



## Strategies for Enhanced Services- Synthesis of Small

### Group Discussion – Group A & B

- 1) Are you aware of any effective strategy (ies) in your community or elsewhere that has been developed for this strategy grouping? Please describe.
  - Early screenings & interventions (e.g. early identification tool for people coming into emergency)
  - Adult day programs for Alzheimer’s patients which offers respite for family members & caregivers)
  - A service Directory on the internet would be helpful to assist family
  - A “211” service directory as part of the telephone network
  - Au Chateau in Sturgeon Falls has 3 social housing units attached to the LTCH supported by a CSS program
  - Cassellholme, in North Bay offers support services to on-site senior apartments
  - Service hubs in local communities would be an effective way to deliver services
  - Early screenings & interventions (e.g. early identification tool for people coming into emergency)
  
- 2) What opportunities/challenges exist in your community for/against potential implementation?

<b>Challenges</b>	<b>Opportunities</b>
<ul style="list-style-type: none"><li>▪ We need to promote prevention &amp; education programs rather than exclusively focusing on back end services of health care</li><li>▪ The system is hampered by inflexible and fragmented mandates</li><li>▪ Most communities do not have an organized directory of resources. If such a directory exists, the challenge is keeping it updated.</li><li>▪ There is no one entry point into the system</li><li>▪ There needs to be greater coordination between federal and provincial programs for First Nation</li></ul>	<ul style="list-style-type: none"><li>▪ All sectors must work collaboratively to ensure a balance and range of community support services</li><li>▪ Review LTC transfer of light level residents to hospitals by working with PHUs on outbreak procedures that keep residents in facilities during times of outbreaks</li><li>▪ Subsidize access to retirement living as well as to LTC respite beds to reduce # of low level care admissions to LTC sector</li><li>▪ Develop specialized longer term beds for psycho-geriatric patients</li></ul>

<p>communities</p> <ul style="list-style-type: none"> <li>▪ We need transitional funding to realign services that focus on in-home supports</li> <li>▪ Transportation for seniors is a challenge. Encourage the use of private sector (taxis) and subsidize those seniors that qualify for financial assistance. Additionally, make greater use of school buses during their downtime</li> <li>▪ Human Resource challenges continue unabated such as shortage of rehab specialists in the North, low PSW wages, LTC staff retention</li> <li>▪ Alternative accommodation (R&amp;R homes, facility respite, etc) is too costly for some seniors</li> <li>▪ LTCHs do not have resources to deal with behavioural management people</li> <li>▪ There are lack of residential &amp; day programs for MH population</li> <li>▪ Need to promote prevention &amp; education programs</li> <li>▪ LTCHs have a lot of light care residents that could still be in their own home</li> <li>▪ Hospitals are too often used as a health resource of first resource</li> </ul>	<ul style="list-style-type: none"> <li>▪ There are some social housing vacancies in some areas of Manitoulin-Sudbury which may create potential accommodation for some ALC clients</li> </ul>
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3) What steps, resources, and partnerships would you put in place to operationalize this strategy?

- Develop IADL services to keep people in their homes (non-medical such as homemaking, friendly visiting, transportation,
- Collaborate with the PHUs to develop disease prevention and health promotion services
- Develop awareness and education among physicians and other health professionals to promote early referral/intervention for frail elderly
- Make supportive housing for the elderly a priority
- Set up geriatric resource specialists in ER to deflect high risk patients back home

- Facilitate access to CC beds directly from community rather than having to go through the hospital
- Build in behavioural supports within LTCHs for high need care clients
- Include municipalities as partners on cross sector planning tables
- Adopt differential strategy for both rural & urban areas, ie; closer collaborative relationship between hospitals and CSS services in smaller communities
- Municipal Economic Development Councils and Chambers of Commerce can develop promotional programs to attract outside youth to health care careers
- Provide funding for a system navigation function