



Theme: Strategies for Redesign

Synthesis of Small Group Discussion

- 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 identification, assessment, and intervention of patients for ALC placement
 - Geriatric Emergency Management model would be a model for effective screening & diversion
 - Physician awareness and training in identification of ALC patients
 - CCAC case manager in ER
 - Patient is charged hospital co-payment once placement offer is made
 - First Nations providing care for First Nation peoples through development of retirement homes
 - North Bay's interim strategies committee has inter-sector representation to develop strategies for effective patient transition

- 2) What opportunities/challenges exist in your community for/against potential implementation?

Challenges	Opportunities
<ul style="list-style-type: none">- need a provincial blueprint for Supportive Housing plan- shortage of supportive housing- different assessments by different agencies which create service barriers- rapid response Mental Health assessment- shortage of transportation services- limited in-home case management for elderly and people with substance abuse problems.- scarcity of IADL services- shortage of rehab professionals (OT, PT, Speech) in the North- shortage of family physicians (orphaned patients)	<ul style="list-style-type: none">- starting approach should be how we can maintain people in their own home before consideration of any other alternative- suggested global funding for community services- pooling dollars between and among agencies where possible- potential for realigning services by creative partnerships- building on CCAC's I &R mandate- bridging with retirement homes- offer mentoring & advice to families who face family members with behavioural issues

<ul style="list-style-type: none"> - cross ministerial barriers (housing, transportation, MCSS, & Health - disparity of salary/benefits between community and institutional sector 	
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3) What steps, resources, and partnerships would you put in place to operationalize this strategy?

- Encourage the development of early intervention and prevention strategies
- Need to do more work on health prevention & promotion rather than preoccupation with illness management
- Encourage service providers to review and share best practices, better use of resources, and ways to reduce duplication
- there is need for more CCAC and CSS support services
- develop a risk assessment tool for potential ALC patients
- Increase supportive housing and enhance IADLs
- Need for community nursing clinics to be established within the hospitals
- Increase day programming capacity to allow caregivers time off
- Provide funding for specialized psycho geriatric resources in LTCHs
- Increase threshold for LTC high intensity funding
- Increase community supports for mental health population
- Increase # interim LTC beds in communities with above average ALC hospital rates
- Formalize protocols for transfer of funds across sectors
- Need flexibility to transfer funds between various Ministry programs (Health and MCSS)
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