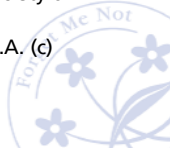




Aging at Home Strategy Report

Commissioned by the Alzheimer Society of Ontario
By: Helen Androulidakis, BHA, M.A. (c)
Public Policy Intern



Agenda

- Aging at Home Strategy: What does it mean for people with dementia?
- Methodology, Limitations
- Analysis of Results
- Innovations
- What do we Know?
- Questions, Comments



Aging at Home Strategy

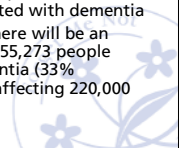
- \$702.4 Million
- Unprecedented
- Create change
- First year funding



What Does it Mean for People with Dementia?



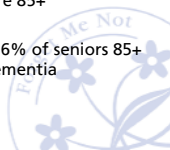
- Double in the next 16 years
- Dementia on the rise
- 80% of care provided by relatives, friends, and volunteers
- In 2008, 165,000 Ontarians were afflicted with dementia
- By 2018, there will be an additional 55,273 people with dementia (33% increase), affecting 220,000 people



What Does it Mean for People with Dementia?



- On average, dementia affects 1 in 10 seniors over 65; 1 in 2 seniors over 90 years of age.
- Almost half of seniors with dementia are 85+
- By 2016, 49.6% of seniors 85+ will have dementia



What Does it Mean for People with Dementia?



- The highest dementia rates for seniors (65+) will occur in 2011: 9.6%
- In most LHINs, over the next 5 years the number of people with dementia will increase at a faster rate than the total population of seniors
- Women account for the majority of seniors with dementia





Methodology

- Reviewed and analyzed the 14 Aging at Home Directional Plans
- Referred to the Pressing Needs and Emerging Possibilities: The Dementia Challenge report
- Reviewed backgrounders, slide decks, scanned LHINS and MOHLTC websites, and newsletters



Limitations

- Timing of the release of information
- Difficulty in accessing information



Analysis of Results

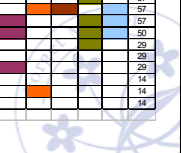
- Reviewed key priorities and / or services from each of the 14 Directional Plans



Review of the Aging at Home Directional Plans: Identified Priority Services

Key Words	1	2	3	4	5	6	7	8	9	10	11	12	13	14	%
Care Coordination															100
In-home Respite															100
Housing															93
Transportation															86
Culturally Appropriate Supports															86
Chronic Disease Prevention and management															71
Access to Primary Care															71
Hospital to-Home Services															64
Home making / Home Maintenance															64
Adult Day Programs															57
Education and Training															57
Mental Health / Addictions															57
Long Term Care Beds															50
End-of-Life Care/Palliative Services															29
Food															29
Self-directed, Self-managed care															29
Telephone Assurance Checks															14
Seniors Hotline															14
Counselling															14

Sources: Local Health Integrated Network (2007), Directional Plans



Key Findings

- High priority (between 86 – 100%) for:
 - care coordination
 - respite
 - supportive housing
 - transportation
 - culturally appropriate supports



Key Findings

- Medium support (50 – 71%) for:
 - Chronic disease prevention and management
 - Access to primary care
 - Hospital to home services
 - Adult day programs
 - Education and training
 - Home making / home maintenance
 - Mental health and addictions
 - Long term care beds





Key Findings

- Lowest support for:
 - Meals
 - Self-managed care
 - End-of-life care
 - Seniors hotline
 - Counseling
 - Telephone assurance checks



Innovations

- Seven LHINs referred to innovation in their Directional Plans, which included criteria such as:
 - Education
 - Enhanced access to primary care (NP Model)
 - Telephone monitoring program
 - Hospice after hours services
 - Collaboration
 - Harnessing linkages



Innovations

- Activating knowledge exchange
- Continuum of services / Care Coordination
- ASSIST
- Balance of Care model
- Services for ethno-cultural populations
- Health promotion / disease prevention approach
- Transportation
- Home at Last



Innovations

- Supportive housing
- Caregiver health and well-being



What Do We Know?

- LHIN 2 (South West) has posted allocated funding for year 1 (\$7 M)
- Examples of programs and services funded include:
 - \$1.65 M for supportive housing initiatives
 - \$793,000 for Home at Last projects
 - \$700,000 for a community stroke rehabilitation program

(Source: South West LHIN News Release, February 28, 2008. South West LHIN announces first phase of plan to help seniors live healthy lives at home)



What Do We Know?

- LHIN 3 (Waterloo Wellington) has posted allocated funding for year 1, 2, and 3.
- Year 1 funding (\$4,783,309) has been allocated to:
 - Complex and frail seniors services
 - Supportive Housing Services
 - Seniors Health and Wellness
 - Infrastructure, Geriatric Lead and Planning
- Year 2: \$7,340,573 has been allocated
- Year 3: \$8,037,005 has been allocated

(Source: LHINformation, Highlights of the Waterloo LHIN Aging at Home Service Plan Recommendations, February 28, 2008)





What Do We Know?

- LHIN 7 (Toronto Central) has posted allocated funding for year 1.
- Year 1 funding (\$6.2 M) has been allocated to:
 - Seed monies for community development
 - Reduce pressures on LTC home waiting lists
 - Initiatives supporting seniors outlined in the 2007-10 IHSP
 - Supportive housing services

(Source: Aging at Home Strategy Detailed Service Plan 2008 / 09, Executive Summary)



What Do We Know?

- LHIN 10 (South East) has placed all of their funding for year 1, 2, and 3 into the SMILE program - \$17, 413, 767
- The SMILE (seniors managing independent living easily) program offers seniors the choice to self-manage their care with traditional or non-traditional service providers, and / or agencies. Services are targeted to the most elderly and individuals most at risk of institutionalization

(Source: South East LHIN: A Plan to Help Seniors Stay at Home, SMILE program)



Questions, Comments



- For further information, please contact the Alzheimer Society of Ontario at staff@alzheimeront.org

