

Enabling Aging in Place Promising Practices: Ottawa West Aging in Place Program





The following promising practice was prepared following interviews with Ottawa West Community Support in the summer of 2023. Healthcare Excellence Canada (HEC) would like to formally acknowledge their generosity for sharing their skills, knowledge, expertise and experiences to inform this promising practice.

About Healthcare Excellence Canada

Healthcare Excellence Canada (HEC) works with partners to spread innovation, build capability and catalyze policy change so that everyone in Canada has safe and high-quality healthcare. Through collaborations with patients, essential care partners and people working in healthcare, we turn proven innovations into lasting improvements in all dimensions of healthcare excellence.

HEC focuses on improving care of older adults, bringing care closer to home and supporting pandemic recovery and resilience – with quality and safety embedded across all our efforts. We are committed to fostering inclusive, culturally safe and equitable care through engagement with different groups, including patients and essential care partners, First Nations, Métis and Inuit, healthcare workers and more.

Launched in 2021, HEC brings together the Canadian Patient Safety Institute and Canadian Foundation for Healthcare Improvement. We are an independent, not-for-profit organization funded primarily by Health Canada. The views expressed herein do not necessarily represent the views of Health Canada.

150 Kent Street, Suite 200 Ottawa, Ontario, K1P 0E4, Canada 1-866-421-6933 | <u>info@hec-esc.ca</u>

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Model description

The Aging in Place (AIP) program provides enhanced social support and homecare services to older adults living in social housing. Older adults living in social housing are often admitted to long-term care sooner than others because they cannot afford the home-based or assisted retirement living support they need to stay home longer. The AIP program responds to this need by providing these older adults with wrap-around services that support aging in place.

The overall goal of the AIP program is to reduce emergency department visits, hospitalizations and premature admission to long-term care by assisting older adults living in community housing with a wide variety of activities and services.

The **objectives** of the AIP program are to:

- provide outreach and intervention activities
- reduce barriers to healthcare access
- provide services that support older adults to live healthier lives and remain longer in their own homes
- link older adults to appropriate community resources and services

The program is a partnership among Ottawa West Community Support (OWCS), Champlain Home and Community Care Support Services (CHCCS) and Ottawa Community Housing (OCH). It began in 2007 in five older adults' buildings operated by OCH that were identified as having a high number of calls to paramedic services. It was quickly expanded to an additional six sites for a total of 11 buildings. In April 2023, the social support services component expanded to eight additional buildings for a total of 19.

The core element to the AIP program includes two delivery models.

Social support services

The following social support services are provided by OWCS and available in all 19 older adults' buildings:

- enhanced case management
- client intervention
- foot care
- home support services (meal preparation, cleaning, laundry services)
- Meals on Wheels
- transportation to social outings monthly
- transportation to urgent medical appointments
- social activities (quilting, exercise classes) and holiday celebrations
- health education sessions (fall prevention, nutrition)
- health promotion partnerships (flu vaccine clinics coordinated with Ottawa Public Health)

Social support services are intended to be flexible and tailored to the needs and interests of the older adults living in the buildings. This means program offerings are identified that:

- · best meet the needs of the older adults in a specific building
- avoid duplicating existing activities and services
- leverage the unique assets of the building and surrounding community

Homecare services

Homecare services are provided by CHCCS in 11 older adults' buildings, in addition to social support services. The homecare services include the following:

- Dedicated care coordinators assigned to buildings that receive direct referrals for the older adults needing home care services. The care coordinators assess needs and coordinate the necessary healthcare services for older adults living in the buildings.
- Feeding, dressing, bathing or other activities of daily living (ADL).
- Access to a nurse practitioner who responds to medical concerns for individuals who do not have or cannot access a family physician.

Enabling Aging in Place Principles

Person-centredness is a core philosophy of HEC's Enabling Aging in Place program. All the principles must be implemented in a person-centred way and reflect a deep understanding of community assets and needs of older adults and their care partners.

Access to specialized healthcare services	Access to social and community support	Access to system navigation support
Programs improve access to services for older adults and caregivers, living in community to promote all forms of health including chronic disease management, and more accessible, safe and secure living environments.	Programs are built around community assets and partners to improve social connections and reduce loneliness and social isolation of older adults and caregivers living in community, complementary to specialized healthcare supports.	Programs optimize the use of health and community assets and improve access to supportive services through personalized navigation and accompaniment to support older adults.
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Adaptive and responsive

Programs are tailored to the specific, individualized needs and preferences of older adults and caregivers living in community. Programs adapt and respond to emerging needs as they evolve.

Equitable

Programs integrate a health equity lens, with a focus on the structural and social determinants of health, that support older adults aging in place in community.

High value

Programs optimize resources used on health and social services relative to outcomes that matter to older adults and care partners over the course of their care journey.

The following reflects how the Ottawa West AIP program fulfils HEC's Enabling Aging in Place program principles:

Access to specialized healthcare services – The AIP program facilitates direct referrals to healthcare and coordinates homecare services. The AIP program also provides health promotion programs and home support.

Access to social and community support – The AIP program provides opportunities for social interaction and community connections in each building by organizing events that reflect the interests of the residents to reduce social isolation and loneliness.

Access to system navigation support – The AIP program links older adults to community services and facilitates transportation to medical appointments and health-related activities. It also provides enhanced case management and coordination of homecare services.

Adaptive and responsive – The AIP program encourages older adults to identify personal needs and supports them in accessing relevant AIP and community services.

Equitable – The AIP program is provided for low-income older adults living in community housing.

High value – The AIP program optimizes the use of resources by coordinating the delivery of homecare services by a single service provider to an entire building with a large concentration of older adults who are geographically co-located. This reduces travel time and coordination effort and improves the consistency of the homecare services. Consistency helps service providers build trusting relationships with their older adult clients. Referrals for homecare services are coordinated through the AIP program's onsite staff for improved efficiency for older adults and service providers.

Funding

The AIP program is funded through the Ontario Ministry of Health. Homecare services are provided through the general operating budget of the CHCCS.

Implementation

Assessing needs and assets: When the AIP program is introduced into a new building, OWCS partners with OCH staff to organize coffee chats, pop-up information sessions and barbeques, which help engage the older adults living there. Older adults are invited to share food, meet with the AIP program staff and learn about the services. In turn, the OWCS learns about the older adults and how services can be tailored to their unique community needs and assets.

Ottawa West AIP program team: OWCS has one half-time community support outreach coordinator (CSOC) assigned to each building. The CSOC is responsible for coordinating social support services for their building. In addition, there are two full-time equivalent (FTE) drivers and approximately 12 FTE home support workers across the 19 buildings. Home support workers assist with the various aspects of support services.

CHCCS assigns three care coordinators and one nurse practitioner to the 11 buildings where homecare services are available. The care coordinators and the nurse practitioner receive direct referrals from older adults living in AIP buildings.

Target population: The program is available for all individuals living in the designated OCH buildings for older adults. The OCH older adult buildings house people who have met eligibility requirements for subsidized housing in Ottawa, which includes:

- ability to live independently
- status as a Canadian citizen, landed immigrant or refugee or refugee claimant
- income and assets within the allowable limits

Enrollment: There is no formal enrollment process into AIP. It is a benefit that comes with an individual's community housing tenancy. The CSOC reaches out to new individuals moving into the building and informs them about the program and how the services can be accessed. They are also given a welcome package, including written information about the program. Word of mouth and the onsite presence of the CSOC provides older adults with an ongoing connection to the program.

Partnerships: Each building has many local **informal partnerships** that respond to the unique needs of the different buildings involved in the AIP program. The **formal partnerships** of the AIP program are with Ottawa Community Housing, Champlain Home and Community Care Support Services and Ottawa West Community Support. Other key partners include Ottawa area Community Support Services, Community Health Centres, Meals on Wheels, hospital discharge planners, Ottawa Public Health, the Regional Geriatric Assessment Program and many other community agencies in the Ottawa area.

Adaptations over time: The premise of the AIP program has remained stable over time. The most significant change was the recent expansion of support services to additional locations in April 2023.



In a 2022 satisfaction survey, respondents reported high satisfaction with the services they received through the AIP program. A large majority of respondents reported that AIP services reduced feelings of isolation or loneliness, decreased stress and helped older adults live more safely at home.

Information related to the impact of the program on admission to long-term care and emergency department visits was collected during the program's initial implementation. Currently, no data is available. However, based on tenant demographics and the duration tenants remain in the AIP buildings, delayed entry to long-term care is most certain.

Hospital discharge planners connect with the CSOC when an older adult living in the building is released. They often discuss the older adult's situation and the appropriateness of discharge home.

Keys to success

Community building: Fostering a trusting relationship with the older adults living in the building is a key enabler that takes time and consistency. By getting to know the older adults personally and having the flexibility to respond to unique community needs, CSOCs offer programming and services that enable the older adults living in the buildings to age in place.

Skilled onsite staff: It is essential to have someone onsite with the right skill set to fulfill the role of the CSOC. The CSOCs need to be passionate about helping people, knowledgeable about the community and willing to interact with older adults in a way that builds trust and respect.

Flexibility: Each building has older adults with unique interests and cultures, so allowing for flexibility in implementing support services is important. All sites have similar core elements, yet operate differently to meet the community's needs within a building.

¹ The evaluation and impact information shared reflects information available at the time of writing this promising practice. HEC would like to acknowledge that evaluation activities are an ongoing process for many promising practices and the type of data collected is influenced by program goals, the length of time the program has been implemented and the level of resources available to support evaluation.

Key challenges

Building trust: Earning the trust of older adult communities in the buildings was the biggest challenge during the program's implementation at new sites. The communities felt that, "We are doing just fine, and we don't need you here." Existing tenant groups were also concerned that the CSOC would take over their role in organizing activities. To overcome this, the AIP program is introduced gently and focuses on raising awareness about the services available should the older adults in the building need them. Also, it is made clear that the program is intended to be an addition to the activities already taking place.