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DE GLENDON

# Community-Based Healthcare: A Plan for Positive Aging

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# Presentation Outline

- Key Issues and Policy Problem
- Context
- Current Situation
- Proposed Policy Options
- Recommendations
- Implementation
- Conclusion

# Key Issues and Policy Problem

INCOME  
SECURITY

EVOLVING  
WORKFORCE

HEALTHCARE

Canada is facing a demographic shift that will affect governments' ability to deliver key services related to quality of life

# Contexte

Démographie	Insécurité économique	Système de santé
<ul style="list-style-type: none"><li>• 20% de la population est âgée de 65 ans et plus</li><li>• 27% de la population est âgée entre 50 et 64 ans</li></ul>	<ul style="list-style-type: none"><li>• Régimes de pension de retraite</li><li>• Marché du travail</li></ul>	<ul style="list-style-type: none"><li>• Institutions de santé</li><li>• Perceptions erronées sur les personnes âgées</li></ul>

Le système de santé est le meilleur outil pour assurer une bonne qualité de vie des personnes âgées

# Issue Framing

75% of all Canadians aged 45+ are worried that they will not be able to access necessary healthcare services, like homecare and long-term care in a timely fashion when they need them\*

**Objective:** To support healthy aging through effective home and community care service delivery

## Priorities

- Wellness and vitality
- Managing illness

## Risks of Inaction

Overwhelmed healthcare system

## Opportunities of Action

Integrated and efficient healthcare delivery

\*Source: <http://www.theglobeandmail.com/life/health-and-fitness/health/health-care-may-tarnish-golden-years-baby-boomers-fear/article20090574/>



Ontario

Québec 

# Parties prenantes

Trois niveaux de  
gouvernement

Réseaux locaux et  
régionaux des  
services de santé

Groupes d'intérêt

Personnes  
aînées

Professionnels  
de la santé

# Services à domicile

Permettent aux individus de recevoir des soins à la maison plutôt qu'en institution et leur donner la capacité de vivre de manière indépendante

Ontario	Québec
<ul style="list-style-type: none"><li>• Aucune réglementation claire</li><li>• Difficulté à fournir des soins longue durée</li><li>• Accessible par l'entremise des <i>Community Care Access Centres</i></li></ul>	<ul style="list-style-type: none"><li>• Pour les personnes ayant une incapacité qui ne sont pas admissibles dans un hôpital</li><li>• Soins complémentaires</li><li>• Accessible dans les centres locaux de services communautaires</li></ul>

# Policy Options

1

Local Leadership in Home and Community Care

2

Independent Action by the Provinces for Home and Community Care

3

Interprovincial Leadership for a Pan-Canadian Home and Community Care Strategy



# Option I: Local Leadership in Home and Community Care

## Strengths

- Many current initiatives are community-based
- Local expertise and knowledge can better target local interventions

## Challenges

- Minimal provincial oversight means a lack of accountability in the context of provincial funding
- Lack of integration among providers

## Option 2: Independent Action by the Provinces for Home and Community Care

Strengths	Challenges
<ul style="list-style-type: none"><li>• Use existing partnerships</li><li>• Continuation of existing provincial strategies</li><li>• Flexibility in making independent decisions</li><li>• Acknowledges that each province has its own strategic needs</li></ul>	<ul style="list-style-type: none"><li>• No federal collaboration</li><li>• No sharing of best practices</li><li>• Demand for interprovincial collaboration in federal government's plan for a new health accord</li></ul>

# Option 3: Interprovincial Leadership for a Pan-Canadian Home and Community Care Strategy

Strengths	Challenges
<ul style="list-style-type: none"><li>• Common vision and shared practices</li><li>• Leadership for a range of innovative community-based initiatives</li><li>• Comparable access to care across regions and boundaries</li><li>• Federal support for funding research</li></ul>	<ul style="list-style-type: none"><li>• Willingness of the federal government</li><li>• Communities may not feel that their distinct needs are being recognized</li><li>• Interprovincial collaboration</li></ul>

# Best Practices

## Access to care

- Home is Best™ model in BC partners family doctors and other healthcare professionals
- *Partnering for Patients* pilot project in Alberta

## Community Initiatives

- *Community Care Dietitian Project* in BC – dietitians work closely with community partners and homecare providers

## Technology

- *STAR Trak* application in Ontario replaces paper-based homecare administration system

# Option Choice and Strategy

## Recommendation: Interprovincial Leadership for a Pan-Canadian Homecare Strategy

Weight of Ontario and Quebec's action will create momentum

Best practices need leadership to be implemented

Beyond acute and institutional care

End goal of federal funding

# Risk Assessment and Mitigation

Risk Level	Risk	Mitigation Strategy
Low	Negative public perception	Emphasize existing services
Medium	Inability to overcome institutional rigidities	Advocate that change will be gradual and incremental
Medium	Inability to work both vertically across governments	Develop agreements and forums for consultation
High	Insufficient buy-in from the healthcare sector	Active outreach and education programs to the healthcare sector

# Plan de communication

## Objectif

Promouvoir les avantages d'un système de santé ancré dans la communauté et répondant aux besoins des populations

## Moyens

- Médias
- Consultations
- Campagne d'information

## Message central

Développer des programmes de santé qui reflètent le désir des personnes âgées de rester dans leurs communautés et avoir accès aux soins médicaux chez eux

# Implementation

<b>Short term</b> <i>Present- 1 year</i>	<b>Medium term</b> <i>1 year - 2 years</i>	<b>Long term</b> <i>2 years +</i>
<p>Execute Communication Strategy</p> <p>Develop interprovincial common practices on home care accessibility and quality of services</p> <p>Make home care and community services a budget priority</p>	<p>Increase equitable access to home care services</p> <p>Discuss strategy for funding with the Federal government</p> <p>Provide adequate training on seniors to the healthcare workforce</p>	<p>Ontario and Quebec to lead in the development of a pan-Canadian homecare strategy</p> <p>Expand home and community care services to meet increasing demographic demand</p> <p>Maintain coordination among public and private healthcare providers</p>



# Conclusion

**Recommandation: Stratégie interprovinciale pour améliorer et augmenter les services à domicile**

Création d'opportunités pour que les personnes âgées puissent rester actives dans leur communauté et avoir accès à des services de santé adaptés

Le Québec et l'Ontario restent maîtres de leurs décisions et s'entendent sur les meilleures pratiques

# Appendix A

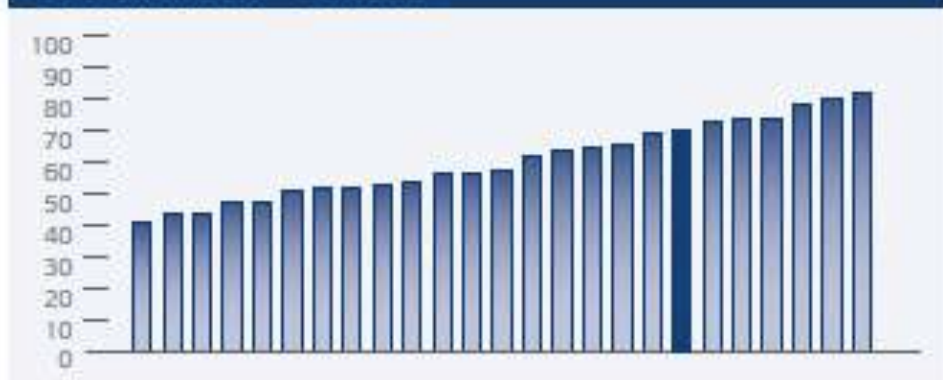
## Calculating the Melbourne Mercer Global Pension Index



\* Source: Government of Québec, Vieillir et vivre ensemble

# Appendix B

Overall Index – Canada



Grade	Index Value	Countries	Description
A	>80	Denmark Netherlands	A first class and robust retirement income system that delivers good benefits, is sustainable and has a high level of integrity.
B+	75-80	Australia	A system that has a sound structure, with many good features, but has some areas for improvement that differentiates it from an A-grade system.
B	65-75	Sweden Switzerland Finland Canada Chile UK	

\* Source: Government of Québec, Vieillir et vivre ensemble

# Appendix C

What is Home and Community Care?	Goals of Home and Community Care	Services Within Home and Community Care
<p>"Home and community care" services help people to receive care at home, rather than in a hospital or long-term care facility, and to live as independently as possible in the community. Home and community care is delivered by regulated health care professionals (e.g., nurses), non-regulated workers, volunteers, friends and family caregivers.*</p>	<ul style="list-style-type: none"> <li>• Help people maintain or improve their health status and quality of life,</li> <li>• Assist people in remaining as independent as possible,</li> <li>• Support families in coping with a family member's need for care,</li> <li>• Help people stay at or return home and receive needed treatment, rehabilitation or palliative care, and</li> <li>• Provide informal/family caregivers with the support they need.*</li> </ul>	<ul style="list-style-type: none"> <li>• Nursing,</li> <li>• Personal care such as help with bathing, dressing, and feeding,</li> <li>• Physiotherapy,</li> <li>• Occupational therapy,</li> <li>• Speech therapy,</li> <li>• Social work,</li> <li>• Dietitian services,</li> <li>• Homemaking, and</li> <li>• Respite services.*</li> </ul>

\* Source: <http://healthycanadians.gc.ca/health-system-systeme-sante/services/home-domicile/commuity-communautaires-eng.php>

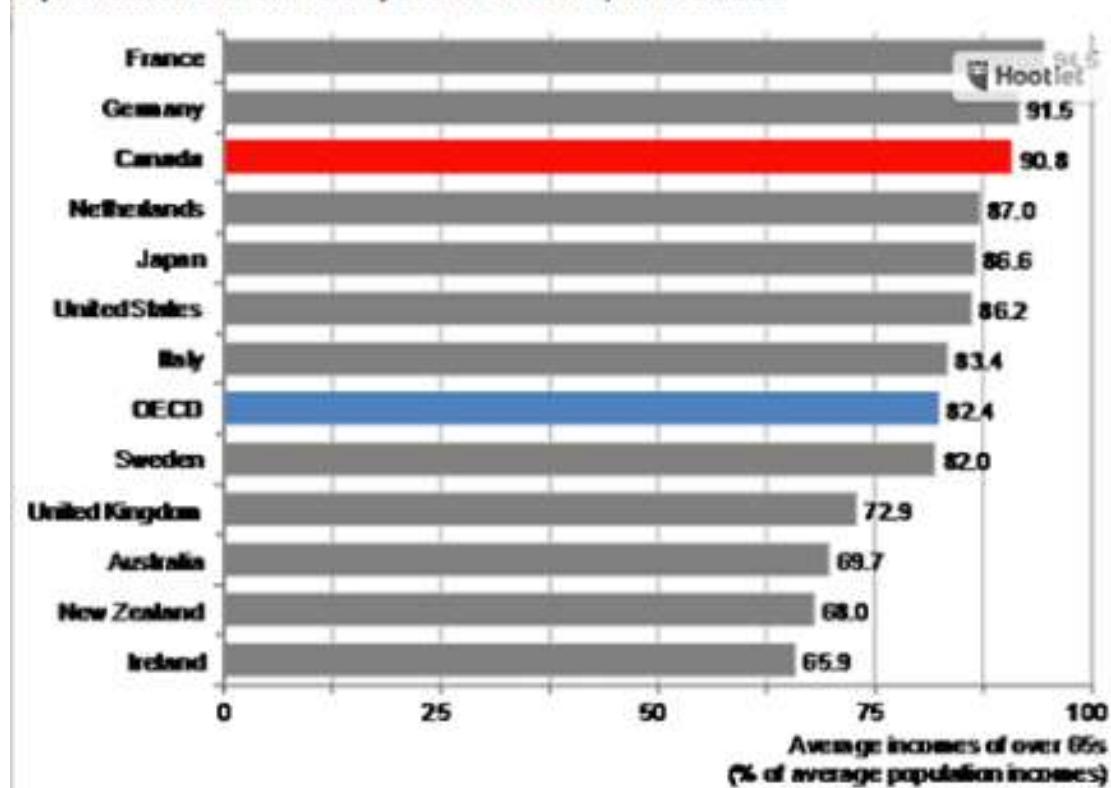
# Appendix D

Ontario's Senior Strategy	Stratégie Vieillir et vivre ensemble du Québec*	New Federal Government Initiative
<ul style="list-style-type: none"> <li>• Improved access to community care</li> <li>• Aging at home strategy</li> <li>• Long-term care transformation</li> </ul>	<p>Trois orientations:</p> <ul style="list-style-type: none"> <li>• Participer dans sa communauté</li> <li>• Vivre en santé dans sa communauté</li> <li>• Créer des environnements sains, sécuritaires, et accueillants dans sa communauté</li> </ul>	<ul style="list-style-type: none"> <li>• Renegotiation of a new health accord</li> <li>• Focus on measurable outcomes: cost-effectiveness, efficiency, and timely access to care</li> <li>• Invest \$3 billion over next 4 years for additional and improved services for people receiving care at home</li> </ul>

\* Source: Government of Québec, Vieillir et vivre ensemble

# Appendix E

Figure 3. Relative incomes of older people (aged over 65)  
Equivalent household disposable income, mid-2000s

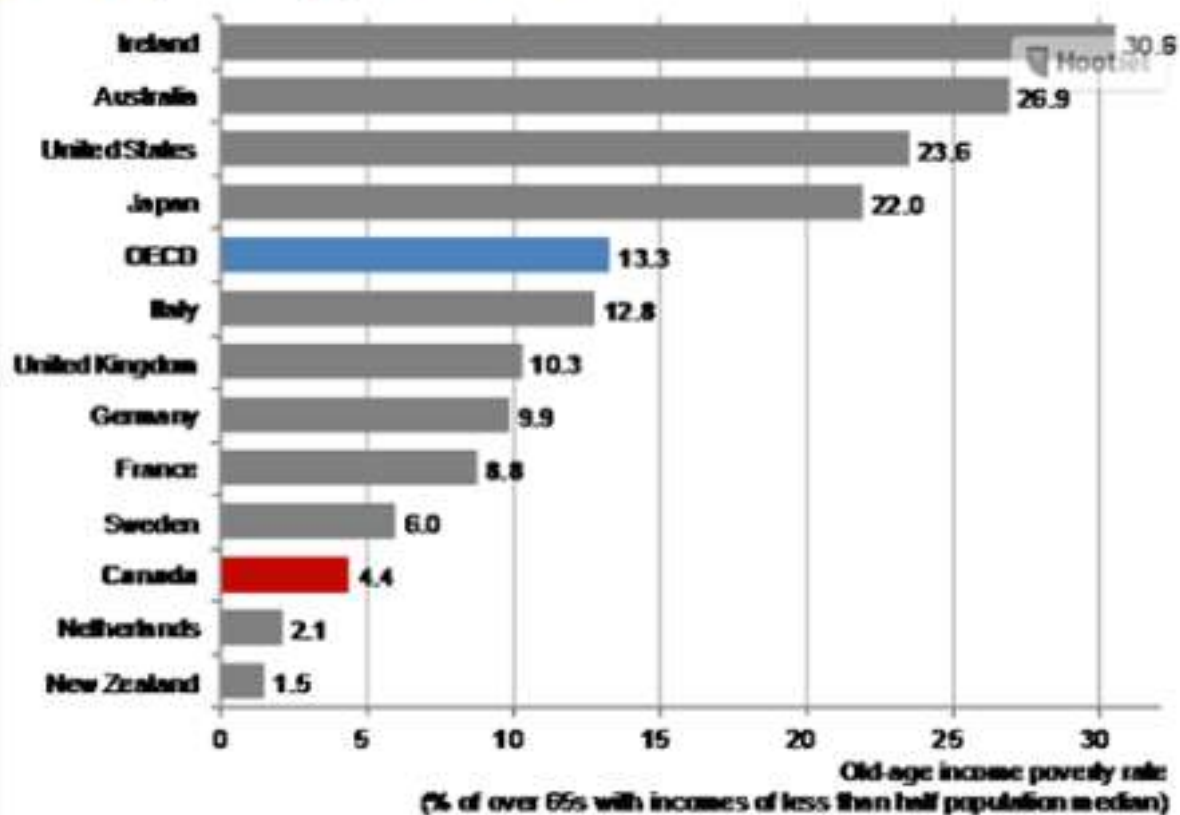


Source: OECD (2009), Figure 2.1; OECD (2008), Figure 2.4.

Whitehouse, E. (2010, January 7). Canada's retirement-income provision: An international perspective. Retrieved October 28, 2015.

# Appendix F

Figure 4. Old-age income poverty rates, mid-2000s  
Percentage of over 65s with incomes of less than half  
median equivalised population incomes



Whitehouse, E. (2010, January 7). Canada's retirement-income provision: An international perspective. Retrieved October 28, 2015

# Appendix G

