Oxford *Master Aging Plan*

inspiration for the future

**Prepared by Oxford Master Aging Plan Steering Committee,
David Sheridan, Shercon Associates Inc.
March 30, 2012
www.OxfordMasterAgingPlan.ca**

Background

Statistics Canada reports that Oxford County has one of the higher proportions of residents aged 50 years and older compared to the rest of the province, and the number is expected to rise considerably in the next 20 years. The younger population is growing more slowly and for the first time in history will be outnumbered by seniors. The Oxford Master Aging Plan will serve as a road map for the future development of services for seniors and will inform planning of public, private and not-for-profit organizations and service providers in Oxford County.

This project was funded by a grant from the Ontario Trillium Foundation and overseen by a project Steering Committee with representatives from a broad range of community organizations across Oxford County supported by an external consulting firm. Work got underway in September 2011 and was complete in March 2012.

Approach

Steps in carrying out the project were the following:

- A review of relevant background information and demographic and health data
- Establishment of three separate planning committees to focus on different segments of the aging population: well and fit seniors; seniors requiring some assistance with activities of daily living; and seniors requiring 24-hour support
- A needs assessment survey of 55 agencies and individuals providing services and supports to seniors in Oxford County
- Twelve focus group sessions at different locations across the County engaging a total of 180 seniors
- A full-day facilitated community stakeholder forum that was well attended by a dynamic mix of seniors and service providers
- A discussion paper widely distributed on-line and in hard copy form to inform citizens about the project and gather further input to the emerging goals and objectives

Needs of seniors

Needs identified through these consultation data gathering initiatives were the following:

Transportation	Improved and expanded public transit Additional paratransit services Affordable and expanded taxi services Support for seniors operating their own vehicles A "pedestrian friendly" environment throughout the County More transportation options for rural areas
Housing	Facilities with a continuum of supports to facilitate "aging in place" Appropriate, affordable, accessible, well-located housing options House maintenance and renovation supports More retirement homes especially in rural communities Reduced wait lists for long-term care ... Cont'd

Social, cultural and recreational	Continued support of existing organizations More information about what is available Transportation to events and activities Outreach and home visiting Expanded educational opportunities Coordinated opportunities to offer volunteer services
Health care	More in-home health care More physicians and specialists Local diagnostic services Health education and promotion Supports to caregivers Assistance with hearing, dental and vision expenses More mental health services and supports
Other community needs	Community awareness education re: seniors' needs Counselling and transition planning Financial support and cost reduction initiatives Safety and security programs Technology training and resources

Goals and objectives

The following goals and objectives emerged from the planning process.

Goal 1.0 – Establish a strong leadership profile

1.1   Ensure seniors input in all policy and planning decisions

1.2   Continually identify and communicate senior's needs

1.3   Increase the level of engagement of seniors within the community

1.4   Promote a positive image of seniors in Oxford County

Goal 2.0 – Foster an active and positive lifestyle for all seniors

2.1   Maintain and grow seniors' recreational facilities

2.2   Leverage existing community facilities and services

2.3   Increase formal and informal educational opportunities

2.4   Capitalize on the potential of technology as a lifestyle enabler for seniors

Goal 3.0 – Optimize the health and wellness of seniors

3.1   Promote senior-centred approaches in healthcare delivery

3.2   Increase supports for formal and informal caregivers

3.3   Expand mental health services and supports

3.4   Foster the spiritual health of seniors   … Cont'd

Goal 4.0 – Improve access and utilization of services and supports

4.1   Increase inter-agency collaboration and coordination of services

4.2   Provide more information about available services and how to access them

4.3   Improve ease of access to seniors' services

4.4   Provide financial assistance where necessary

4.5   Encourage and support transition planning

Goal 5.0 – Build and maintain a supportive infrastructure

5.1   Expand transportation options across the County

5.2   Ensure that affordable, accessible and appropriate housing is available in the right place at the right time

5.3   Create an age friendly physical environment

Suggested strategies to achieve the objectives appear in the body of the report.

Next steps

This Plan will serve as a "living document" for planning by service agencies, different levels of government, businesses and the community at large. A specific implementation strategy is now being implemented by members of the Steering Committee.

The ultimate success of the initiatives in the Oxford Master Aging Plan will be dependent on broad and sustained engagement of community members, service providers and agencies, and most of all, seniors themselves. Successful implementation will require some new initiatives, but many of the strategies are already underway through existing organizations and providers. The plan should guide collaboration and resource sharing, advocacy and long-term planning by all sectors.

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March 30, 2012

TABLE OF CONTENTS

1.0   INTRODUCTION

1.1   Purpose

Statistics Canada reports that Oxford County has one of the higher proportions of residents aged 50 years and older compared to the rest of the province, and the number is expected to rise considerably in the next 20 years. As the population ages it is necessary to ensure that resources are in place to provide Oxford seniors with the support they need and deserve. The Oxford Master Aging Plan will serve as a road map for change and development and will inform future planning of public, private and not-for-profit organizations and service providers in Oxford County.

1.2   Background

The need for comprehensive planning for seniors was first identified in 2010 by a collective of local agencies and active community members. The group researched other related initiatives including the Master Aging Plan for Brantford and Brant County issued in late 2008. The Brant plan was in turn based on methodologies employed in Orange County, North Carolina, the location of one of the first comprehensive aging plans in North America.

In July 2011 the United Way of Oxford announced that it had received a $41,000 grant to develop the Master Aging Plan from the Ontario Trillium Foundation, a leading grant maker that strengthens the capacity of the voluntary sector through investments in community based initiatives. A formal project Steering Committee with representatives from a range of community organizations across Oxford County was established and a Request for Proposals for consulting support was issued. The Steering Committee selected SHERCON ASSOCIATES INC. of Oakville to provide research, planning and facilitation services to the project. The Steering Committee Co-Chairs approved the final project work plan on September 19, 2011. Work got underway immediately and the plan was reviewed and finalized at a meeting of the Steering Committee held on March 29, 2012.

Steering Committee members are listed in Appendix A.

1.3   Next steps

The Oxford Master Aging Plan will become a "living document" serving as a template for planning by service agencies, different levels of government, businesses and the community at large.

A specific implementation strategy is described in the final section of the report.

2.1 Information review

At the outset of the project relevant background information was reviewed including documentation from the Brant Master Aging Plan, the Oxford County Seniors Health Status Report prepared by Oxford Public Health and Emergency Services, information on existing services for seniors, and other related reports and publications. Statistics Canada data from 2006 was utilized as the 2011 census information had not been released at the time of the study. The demographic information was supplemented with information from the Canadian Community Health Survey, Ontario Ministry of Health and Long-Term Care and tables contained in the Oxford Seniors Health Status Report.

2.2 Planning committees

Three separate Planning Committees of service providers and community members were recruited to focus on different segments of the aging population: well and fit seniors; seniors requiring some assistance with activities of daily living; and seniors requiring 24-hour support.

Each Planning Committee met twice to review data collected by the consultants and make recommendations for addressing the needs of seniors in their target group. Members of the three Planning Committees are listed in Appendix B.

2.3 Provider survey

In order to gather direct input from all providers of services to seniors in Oxford County a five-page provider questionnaire was constructed and distributed on-line to the agencies and individuals listed in the service inventory obtained through the information review. The survey questions addressed awareness of current services for seniors, perceptions of service effectiveness, gaps between demand and supply, priorities for service enhancement, potential service duplication, perceived barriers to service, and suggestions for service improvement. It was distributed to a list of over 60 service providers in November 2011. Replies were received from 55 respondents representing a good cross-section by provider type.

The provider questionnaire along with the findings obtained appears as Appendix C.

2.4 Seniors focus groups

Direct in-person input from seniors was the centerpiece of the consultation component of the Master Aging Plan. Twelve focus groups were organized at different times and locations selected on the basis of County geography and service segments. The facilitation approach varied depending on the group size and included a briefing on the project, likes/dislikes of existing services and supports, present and future needs for services and supports and suggestions for improvements and future priorities.The groups were facilitated by the consultants with support from staff from Oxford Public Health and Emergency Services.

Dates and locations of the community focus group sessions

Location	Date	# Participants
1. Woodstock 1	October 17 morning	30
2. Drumbo	October 19 morning	12
3. Woodstock 2	October 19 evening	3
4. Norwich	October 20 afternoon	9
5. Woodstock 3	October 20 evening	6
6. Tavistock 2	October 21 morning	1
7. Mount Elgin	October 24 mid-day	14
8. Embro	October 25 morning	25
9. Tavistock 3	October 25 afternoon	14
10. Ingersoll 1	October 25 evening	13
11. Tillsonburg	October 26 afternoon	45
12. Tillsonburg 2	October 26 evening	8
	Total Participants→	**180**

The groups were lively, well received and generated thorough and comprehensive discussions that revealed high levels of consensus regarding seniors' needs.

A summary of focus group findings appears in Appendix D.

2.5   Community stakeholder forum

A full-day facilitated community stakeholder forum was held in Ingersoll on Friday November 25, 2011 and was well attended by members of the Steering Committee, the three Planning Committees, other service providers, other key community players and a solid contingent of seniors. Activities and deliberations included the following:

- Review and validation of the information from the information review, provider survey and seniors focus groups
- Visioning and brainstorming exercises to identify potential initiatives and establish strategic themes
- Breakout work, followed by plenary discussion to develop broad strategic goals related to identified needs areas including transportation, housing, social/recreation and health care
- Identification of preliminary implementation strategies

The forum was attended by over 50 participants, and the dynamic mix of seniors and service providers resulted in high quality input and advice stemming from the day.

2.6   Discussion paper

A short discussion paper was prepared to update citizens and service providers about the project and solicit responses to the emerging goals and objectives. The paper was widely distributed on-line and in hard copy format in January 2012. Responses were received from 61 seniors, family members and providers by the February 15th deadline.

> **In total the consultation process directly engaged over 200 seniors through focus groups and the community forum, 35 service providers through committee work, an additional 20 providers through the stakeholder survey, and a further 61 community members through the discussion paper.**
>
> **It was particularly noteworthy that the needs identified by the seniors were highly consistent with the needs identified through the survey of providers.**

3.1 Demographic factors

Selected demographic charts and tables for Oxford County appear in Appendix E. The age pyramid in the Appendix shows the movement of the baby-boomer age group over the next 10 years. In 2011 there were 17,214 residents over the age of 65 in Oxford, and this is projected to increase by 42% to almost 24,000 by 2021. At that time seniors in Oxford will make up 40% of the population, compared to 19% in Canada.

At the same time, the population of residents under the age of 65 is expected to decrease by one percent. With older adults increasing in numbers and the younger population decreasing, the changing "Old Age Dependency Ratio" will create challenges in supporting increases in programs and services in the county.

Other data presented in the Oxford County Seniors Report indicates that significantly more Oxford County seniors live in a household alone or with their spouse, compared to the rest of Ontario. This fact, coupled with the rural nature of the County and lack of transportation may contribute to isolation and unavailability of needed services.

It was noted that income levels of Oxford County seniors are lower than the provincial average. Education levels of seniors also tend to be lower.

Tillsonburg has the largest density of seniors aged 65 and over within Oxford County. Woodstock has the highest number of seniors in the County.

3.2 Target groups

The study focused on target groups of seniors based on their needs rather than ages. This approach was adopted from the Orange County Master Aging Plan as it offered a meaningful way of focusing on needs based on personal circumstances rather than arbitrary age distinctions. The Planning Committees identified the broad characteristics of their respective target groups and these are summarized below:

Well/Fit Seniors:

These individuals generally are in good health and able to live independently without assistance. The goal of services for this population is to help them maintain their health and independence for as long as possible. The Planning Committee for this group produced the following profile:

- Wide age range from 50 to 85+
- Many are retired, some working beyond typical retirement age
- Living independently in own homes – although affordable and appropriate future housing may be an issue
- Physically mobile
- Most drive
- Varying family situations
- More demanding of services
- Becoming more "tech-savvy" and beginning to use social media

Minimal supports are required for this group although it will be important to watch for risk factors such as isolation and depression which could jeopardize their wellness.

Seniors Requiring Some Assistance with Activities of Daily Living:

This population requires some assistance with activities of daily living in order to allow them to stay in their own homes. In many cases the support comes from family members. The Planning Committee for this group produced the following profile:

- Mid and lower income, with increasing numbers of low income
- Some have financial concerns and challenges
- Predominantly female
- Acute and chronic disease and illness including diabetes, stroke, MS, arthritis, Parkinson's, heart and renal disease
- Increasing dementia and mental illness issues
- Some are driving, others have caregivers who drive
- Some are invisible and inaccessible especially in rural areas
- Many are at risk and one step away from crisis
- Most have local family doctors – who are gradually retiring
- Declining family support
- Caregiver burnout becoming more evident
- Increasing expectations for services and supports

The need for services that support caregivers and individuals to stay in their own homes is very evident with this group.

Seniors Requiring 24-hour Support:

The majority of these individuals reside in long-term care homes. The Planning Committee profiled this group as follows:

- Age range 50 to 85+, with the majority in older age groups
- About two-thirds are female
- Entering long-term care older and more frail
- Increasing acuity and complexity of needs with higher care requirements
- Increasing behavioural challenges related to dementia
- Limited family support

Quality of care is a priority issue for this segment of the older population.

The next five sections outline seniors' needs identified in the study. Selected quotes from seniors and other stakeholders replying to the discussion paper are included to add richness and flavour to the points.

3.3 Transportation

"Bike, scooter and wheelchair lanes need to be painted on the roadways. As of right now many young car drivers will yell at you because you are not as fast as them."

"We need options for accessing health care outside the community. How do you get to London if you don't have a car?"

Transportation was regarded as a major priority by all participants in the planning process. Current services in the County include public transit in Woodstock, paratransit in Woodstock and Ingersoll, Canadian Red Cross and Canadian Cancer Society drivers, Ingersoll Services for Seniors, Tillsonburg Multi-Service Centre, taxi services and some delivery services. Specific needs identified by survey respondents, planning committee members and participants at the various community meetings were the following:

- Improved and expanded public transit
- Additional paratransit services
- Affordable and expanded taxi services
- Support for seniors operating their own vehicles including signage, training, parking and graduated licenses
- Creating a pedestrian friendly environment throughout the County
- More transportation options for rural areas

3.4 Housing

"Those who have maintained independence in their own home face the following issues: affordable property maintenance, winterizing home, lawn care, education regarding salesmen, telemarketers and those preying on seniors."

"We definitely need more allotted long-term care beds so seniors and their families can choose where they want to go as opposed to being placed in the least appealing place because there is no room."

"We need financial help to install things like porch lifts on our property. As of right now the income level to get approved is so low that a low income person would not be a home owner anyway."

The County currently has eight retirement homes, 12 nursing homes and a relatively affordable housing stock. Housing needs identified by the planning process participants were the following:

- Appropriate, affordable, accessible and well-located housing options
- House maintenance and renovation supports
- More retirement homes especially in rural communities
- Additional long-term care spaces and reduced wait lists for long-term care

Many of the stakeholders consulted pointed to the need for accommodation facilities with a continuum of supports to facilitate "aging in place".

3.5   Social, cultural and recreational opportunities

"I feel more progress needs to be made in the area of preventative education in all areas of living – fitness, nutrition, mental and spiritual."

"We need easier access to public facilities for handicapped seniors."

"We need a service to match up retired people looking for ways to volunteer and give back to their communities."

"Maybe have a newsletter/paper aimed at only seniors with events that are coming up."

There is a wide range of social, cultural and recreational options available to Oxford seniors including three well utilized recreation centres, active faith based organizations, libraries, educational opportunities such as Learning Unlimited and numerous organized groups, activities and events. This category of services is important as it contributes directly to the health and well being of seniors.

Needs identified by both providers and seniors included:

- Continued support of existing organizations
- More information about what is available
- Transportation to events and activities
- Outreach and home visiting
- Expanded educational opportunities
- Coordinated opportunities to offer volunteer services

3.6   Health care

Oxford seniors are served by three hospitals located in Woodstock, Ingersoll and Tillsonburg. Most have local family physicians although many are retiring. They carry less health insurance for drugs, eye and dental care than Ontario seniors. Pharmacists play a key role in providing health care advice and support to seniors.

Health care needs identified in the planning process included:

- More in-home health care
- More physicians and specialists
- Local diagnostic services
- Health education and promotion
- Supports to caregivers
- Assistance with hearing, dental and vision expenses
- More mental health services and supports

3.7   Other community needs

A number of other needs not related to a particular category were identified:

- Community awareness education re: seniors' needs
- Counselling and transition planning
- Financial support and cost reduction initiatives
- Safety and security programs
- Technology training and resources

Technology will have a major positive impact on the lifestyle of seniors in the next three to five years. New groups of seniors are more computer literate and the user interfaces are being greatly simplified. As these trends converge seniors will be increasingly using Facebook, Skype, Twitter and new emerging Web 2.0 applications to keep in touch with families, friends and service providers.

3.8   Overall system analysis

Planning committee members and participants at the community forum engaged in exercises to identify the following strengths, weaknesses, opportunities and threats pertaining to the overall system of services and supports for seniors in Oxford County:

Strengths
- Many established activities, programs and services
- Committed and dedicated service providers
- Volunteer involvement
- Seniors Centres in Ingersoll, Tillsonburg and Woodstock
- New hospital in Woodstock
- Strong sense of community
- Engaged seniors

Weaknesses
- Transportation challenges, especially in rural areas
- Need for more housing choices and supports
- Gaps in some healthcare services
- Limited service options in rural areas
- Restricted/insufficient funding for some programs
- Wait times for services
- Awareness of services and need for system navigation
- Cost of some services
- Coordination between agencies and service providers

Opportunities
- Increasing numbers and influence of seniors
- Leadership and advocacy
- Partnering and collaboration
- Engagement of business and industry
- Technology applications in service and communication
- Use of social media
- Transition planning
- Exploring new and creative models of care

Threats
- Rising numbers of people requiring service
- Increased acuity/complexity as population ages
- Caregiver and service provider burnout
- Changes in political priorities
- Stigma
- Personal financial pressures on seniors

Any initiatives in the Oxford Master Aging Plan will need to build on strengths, rectify weaknesses, capitalize on opportunities and address threats.

3.9   Advice from stakeholders

"Sorry … I'm only 75 … waaaay to busy to think about suggestions."

"Stop pussyfooting around – just do it."

"Get going and don't just talk about it."

"Let everyone know that these issues are everyone's issues."

"We need to involve seniors who live in Oxford but receive most services from outside the County."

"Bridge the generational gap and engage seniors with other subgroups of the population."

"Don't treat seniors as a separate entity."

"Do not be satisfied with simply having written a report."

The 180 seniors attending the community focus groups sessions were asked to offer advice to the Steering Committee and consultants conducting the study. Numerous suggestions were received, falling under the following themes:

- Acting on results
- Ensuring interagency cooperation
- Increased communication
- Leveraging existing resources
- Engagement of decision makers
- Exploiting the "political clout" of seniors
- Involving all stakeholders

Providers responding to the needs assessment survey and the discussion paper also offered some advice for the planning process:

- Ensuring providers work together
- Including representation from all levels and aspects of senior care
- Establishing a system to provide information about services
- Broadening the network of persons focused on the implementation of the plan
- Engaging all municipalities in the County
- Communicating to everyone about the issues

The next section outlines the plan developed to address the needs identified in the situation analysis.

4.1 Vision and goals

A vision statement describes the preferred future of a community and its stakeholders. The Planning Committees, drawing on information gathered from seniors and service providers, established the following vision statement:

A place where aging is celebrated and seniors are an integral part of society

This vision would entail:

• Ongoing leadership, engagement and advocacy powered by seniors
• Generations working together to create innovative solutions that have a positive impact on the community
• Sustainable services and supports that are accessible, affordable, timely, and integrated along a continuum of needs
• Partnering and collaboration across all service providers

The vision will be achieved by pursuing five broad goals:

1. **Establish a strong leadership profile**
2. **Foster an active and positive lifestyle for all seniors**
3. **Optimize the health and wellness of seniors**
4. **Improve access and utilization of services and supports**
5. **Build and maintain a supportive infrastructure**

4.2 Objectives and strategies

The objectives and strategies in this section were derived from stakeholder input collected from the planning process. Objectives were drafted by the Planning Committees and refined based on discussion paper feedback. The strategies put forward for consideration were drawn from suggestions at the community forum and ideas put forward by participants at the focus group sessions and planning meetings.

Goal 1.0 – Establish a strong leadership profile

	OBJECTIVES	STRATEGIES FOR CONSIDERATION
1.1	Ensure seniors' input in all policy and planning decisions	• Establish and seek funding for a seniors organization with decision making and policy authority • Appoint seniors representatives to key groups and committees involved with community planning • Develop an advocacy and government liaison strategy
1.2	Continually identify and communicate senior's needs	• Ensure ongoing quality surveillance of services provided to seniors • Explore feasibility and appropriateness of an Oxford Ombudsman for Seniors • Identify service gaps and propose/monitor solutions • Advocate on behalf of individual seniors as required
1.3	Increase the level of engagement of seniors within the community	• Increase volunteer recruitment and participation • Promote intergenerational projects and approaches to problem solving • Establish a registry of seniors' skills • Engage business and industry in joint initiatives with seniors
1.4	Promote a positive image of seniors in Oxford County	• Develop a media and marketing plan that increases the visibility of seniors' activities and accomplishments

Goal 2.0 – Foster an active and positive lifestyle for all seniors

	OBJECTIVES	STRATEGIES FOR CONSIDERATION
2.1	Maintain and grow seniors recreational facilities	• Continue support for the seniors centres in the County • Monitor increases in demand for centre facilities and ensure appropriate funding • Increase promotion and utilization of existing senior's facilities and programs
2.2	Leverage existing community facilities and services	• Recognize and support the contributions of faith based organizations, service clubs and other key community groups through training, promotion and resources • Foster community connections for all seniors, including long-term care residents • Increase awareness and uptake of available social, recreational and cultural opportunities across the County • Explore resource sharing partnerships with local organizations and with adjacent Counties and jurisdictions
2.3	Increase formal and informal educational opportunities	• Continue links with existing educational agencies • Explore Elder College model • Explore formal links with educational institutions
2.4	Capitalize on the potential of technology as a lifestyle enabler for seniors	• Provide increased computer access/training for seniors • Explore the potential of social media for connecting and networking seniors and their families • Continually monitor developments in technology applicable to seniors

Goal 3.0 – Optimize the health and wellness of seniors

	OBJECTIVES	STRATEGIES FOR CONSIDERATION
3.1	Promote senior-centred approaches in healthcare delivery	• Recruit more specialists in aging and gerontology • Address gaps in home-based services • Offer training to health care professionals on unique needs and characteristics of seniors • Increase social work and specialized geriatric services
3.2	Increase supports for formal and informal caregivers	• Increase staff training, support and recognition of all employees working with seniors • Provide relief, respite and support for informal and family caregivers • Advocate for improved staff remuneration • Advocate for caregiver benefits • Establish new caregiver support groups and sustain existing ones
3.3	Expand mental health services and supports	• Increase counselling for mental health and addictions issues • Provide more specialized space and care for those with Alzheimer's and dementia • Continually work to reduce stigma associated with mental health issues
3.4	Foster the spiritual health of seniors	• Recognize and leverage the contributions of faith- based organizations • Collaborate with faith-based organizations in planning and delivering health and wellness initiatives • Increase pastoral care and spiritual support services

Goal 4.0 – Improve access and utilization of services and supports

	OBJECTIVES	STRATEGIES FOR CONSIDERATION
4.1	Increase inter-agency collaboration and coordination of services	• Support standardized forms and processes • Share resources across organizations and service providers • Establish formal mechanisms for collaboration such as joint planning exercises, articulation agreements and Memorandums of Understanding
4.2	Provide more information about available services and how to access them	• Promote the 211service, healthline.ca, 310 CCAC and other information services as they become available • Develop a website for seniors and/or link to existing ones • Explore all media options for disseminating information
4.3	Improve ease of access to senior services	• Support work already underway to develop a single electronic record for health and other services • Explore "one-stop shopping" and "no wrong door" access models • Encourage system navigation approaches • Review and simplify existing admissions and intake procedures • Assist seniors with paperwork where required to access services and benefits • Improve availability of services in rural communities through on-site programming, transportation and outreach
4.4	Provide financial assistance where necessary	• Examine cost reduction options for dental, hearing, vision and other services • Identify and communicate existing subsidies • Target new sources of private and public funding for service subsidies
4.5	Encourage and support transition planning	• Inventory existing transition planning services and make appropriate connections • Advocate for more education and support • Provide counselling for seniors, caregivers and their families on all transition issues including transportation, housing and health care

Goal 5.0 – Build and maintain a supportive infrastructure

	OBJECTIVES	STRATEGIES FOR CONSIDERATION
5.1	Expand transportation options across the County	• Extend existing public transportation in some areas, and create a transportation system to service the entire county • Increase availability and reliability of paratransit • Encourage driver supports including refresher training, graduated licenses, scooter bylaws, improved signage and appropriate parking • Develop affordable alternative sources of transportation such as subsidized taxis, shuttle services and car pooling • Explore agency pooling of equipment between organizations and a shared transportation registry • Research/adopt creative transportation solutions from other jurisdictions
5.2	Ensure that affordable, accessible and appropriate housing is available in the right place at the right time	• Provide a continuum of accommodation with appropriate support options that facilitate aging in place • Expand needs based home supports • Provide housing maintenance, renovation and financial supports and services • Engage developers and the real estate industry • Lobby for long-term care beds, retirement homes and affordable supportive housing
5.3	Create an age friendly physical environment	• Continually review and improve walking, bicycle and scooter facilities • Identify and apply best practices from other jurisdictions • Establish links and collaborate with related initiatives such as the" 8-80 Cities Project".

The ultimate success of the initiatives in the Oxford Master Aging Plan will be dependent on broad and sustained engagement of community members, service providers and agencies, and most of all, seniors themselves. Successful implementation will require some new initiatives, but many of the strategies are already underway through existing organizations and providers. The plan should serve as a template for collaboration and resource sharing, advocacy long-term planning by all sectors.

5.0 IMPLEMENTATION STRATEGY

Discussed at Steering Committee meeting on March 29, 2012

Rollout

1. Establish and implement a communication plan for release of the Master Aging Plan report and its companion document, the Oxford County Seniors Health Status Report.
2. Launch at a major community event planned for June 15, 2012.
3. Present to County and Municipal Councils requesting motions of endorsement.
4. Distribute to local MPP and MP and to relevant government offices.

Implementation

5. Review strategies and identify quick wins that can be implemented immediately. Include these in initial communications.
6. Reconstitute the Steering Committee with a focus on implementation and monitoring. The role of the new committee could include:
   - Raising the profile of seniors in the community
   - Identifying service gaps and shortfalls and advocating with funders and government
   - Communicating initiatives and brokering partnering opportunities
   - Tracking key deliverables against outcome measures
   - Continually updating the implementation action plan to keep it a living document
7. Develop a comprehensive implementation action plan linking goals and strategies to work already planned or underway in the community. Focus on Oxford as well as adjacent counties. Acknowledge existing work that is being done.

Sustainability

8. Seek resources from the County, local municipalities, LHIN, local agencies, businesses and funding bodies.
9. Establish a Coordinator/Community Developer support position along with a host organization to provide in-kind support.
10. Establish links to existing initiatives from CARP, Age Friendly Communities and other like minded groups and organizations.

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Chris Cunningham	South Gate Centre
Linda Dimock	Woodstock and Area Community Health Centre
Lisa Gardner	Alexandra Hospital
Kelly Gilson	United Way Oxford
Terri McCartney	Canadian Mental Health Association Oxford
Bob McFarland	Community Member
Don McKay	County of Oxford
Wendy Palen	Ingersoll Services for Seniors
Donnabeth Sweetland	Southwest Community Care Access Centre
Leanne Turner	Alzheimer Society of Oxford
Natasha Veljovic	Woodstock General Hospital

Champions/Seniors' Advocates

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APPENDIX B - Planning Committee Members

Committee 1 – Representing Well/Fit Seniors

Kim Bidwell	Ingersoll Seniors Centre
Chris Cunningham	South Gate Centre
Cathy Groulx	Community
Eileen Hammerton	Community
Mike Hawkins	Oxford Country Trails Association
Lisa Miettinen	Oxford County Library System
Donnabeth Sweetland	Southwest Community Care Access Centre
Don Taylor	Sweaburg Lions
Lisa Wells	Fanshawe College

Committee 2 – Representing Seniors Requiring Some Assistance

Eric Adriaans	Canadian Red Cross
Lonnie Atkinson	Ingersoll Ministerial Association
Lynda Bartlett	Oxford County Social Services
Kerri Chatland	Oxford Manor Retirement
Linda Dimock	Woodstock and Area Community Health Centre
Diana Handsaeme	Stonebridge Community Services
Fran Hudson	Parish Nurse
Carolyn Kaufman	VON Oxford
Terri McCartney	Canadian Mental Health Association Oxford
Wendy Palen	Ingersoll Services for Seniors
Donnabeth Sweetland	Southwest CCAC
Leanne Turner	Alzheimer Society of Oxford
Elaine Wilson	Canadian Red Cross

Committee 3 – Representing Seniors Requiring 24-hour Assistance

Kathy Dingwell	People Care Tavistock
Lee Griffi	Crescent Care
Marci Hutchinson	Maple Manor Nursing Home
Robin Kish	VON Oxford
Suzanne Mezenberg	Leisureworld
Amy Phillips	Woodingford Lodge
Peggy Radcliff	Community member
Deb Roloson	Woodstock and District Developmental Services
Judi Restemeyer	Alzheimer Society of Oxford
Natasha Veljouvic	Woodstock General Hospital

(Findings appear in Bold italics)

A Master Aging Plan for Oxford County is being developed to provide a blueprint for evolving services and resources for seniors in transportation, housing, cultural services, healthcare and other aspects of community life. The project is supported by a grant to the United Way from the Ontario Trillium Foundation and led by a Steering Committee representing a broad range of community organizations across Oxford County. Work commenced in September and will be complete early in 2012.

This questionnaire is designed to gather service provider perceptions of the current system of services and supports for older adults in Oxford County. Findings will be presented at a community stakeholder forum to be held in on November 25th and used to set planning priorities.

Please complete and return this on-line questionnaire no later than 5:00 p.m. Friday November 18, 2011. Your responses will go directly to the consultant assisting us with the project.

If you are unsure, or don't know the answer to a particular question, simply leave that item blank. It is not necessary to answer all the questions.

1. Please provide the following background information:

   Name of Organization or Service Provider **55 respondents**

   Type of Organization: *Check all that apply*

9	Home support	**1**	Faith based
7	Health care	**3**	Municipality
8	Social services	**7**	Retirement home
2	Hospital or clinic	**11**	Long-term care home
6	Recreation		

   3 Independent service provider such as a physician, therapist, etc.
   (Specify): **Social work, occupational therapy, property service**

   5 Other
   (Specify): **Retail, library, funder, police**

   Estimated percentage of your services that are targeted to seniors: **75% average**

   Which groups of seniors receive services from you or your organization?

   28 Well-fit seniors
   35 Seniors requiring some support with activities of daily living
   30 Seniors requiring 24-hour support

   When you complete this questionnaire think in terms of services for seniors across the county as a whole rather than the specific services that you offer:

2. A list of existing services and supports for seniors in Oxford County appears below. Please review the list for each service group and indicate the five services that you feel are currently experiencing the greatest system pressure in terms of present gaps between supply and demand.

   Check up to five in each column:

		Well/Fit Seniors	Some ADL Assistance	24 hour Support
Transportation	Public transportation	20	22	0
	Special transit	10	22	24
	Taxi services	1	3	1
	Driver supports – signage, instruction, etc.	2	4	1
	Pedestrian friendly environment	4	3	1
Housing	House maintenance and renovation supports	10	9	5
	Affordable and accessible housing options	21	19	10
	Retirement homes	0	6	3
	Supportive housing	5	17	13
	Long-term care beds	9	8	38
Social/ recreational	Recreation centres	6	7	1
	Social groups	10	8	7
	Faith based organizations	0	0	3
	Arts and culture organizations	2	0	1
	Educational opportunities	5	0	0
Health care	Health education and promotion	12	4	2
	Hospitals and clinics	11	12	11
	In-home health care	15	21	18
	Therapies – Physio, OT, etc.	5	9	16
	Physicians	12	8	6
	Pharmacy	0	0	0
	Mental health services	10	12	13
	Addictions services	3	0	1
Other	Counselling	7	4	5
	Supports for caregivers – respite, training, etc.	20	21	26
	Safety and security programs	11	8	1

3. Are there any necessary services or supports for seniors that presently do not exist in Oxford County?

   Public transportation within and between communities; geriatric mental health services; services for intermittent needs; social services in LTC; education/learning programs.

4. Thinking now in general terms, and considering all service groups, rate the overall effectiveness of the system of services and supports for seniors in accomplishing the following:

	Excellent	Good	Fair	Poor
Responding to the unique needs of seniors ……………………………..	0%	64%	29%	7%
Coordination across programs and service providers …………………..	0%	19%	71%	10%
Providing flexibility and choice to seniors ………………….. …………	0%	45%	50%	5%
Ensuring individuals receive the right services …………………………..	0%	40%	53%	7%
Ensuring individuals receive services in a timely fashion …………………….	0%	22%	63%	15%
Communicating information about services available ……………………	0%	32%	42%	26%
Identifying and responding to community needs ……………………	0%	49%	42%	2%
Having a positive impact on the lifestyle and well-being of seniors …	5%	48%	45%	2%

5. If you gave a rating of "fair" or "poor" to any of the items in Question 4, please explain below:

    Interagency coordination; lack of resources; low awareness of available resources; inflexible choices; wait times; system hard to navigate; physical accessibility

6. Do you feel there is any unnecessary duplication of services for seniors in Oxford County?

    4   Yes ---------------------------> 6a.   Please specify below:
    30 No   *Need for organizations to work together; Public/private; more use of local services; case management/supervision*

7. Assume that you have $100 in <u>new</u> funding to distribute to the various services and supports for seniors in Oxford County. Thinking in terms of your answers to the previous questions, <u>allocate these funds across the services below</u>:

Transportation:	Public transportation	$ 9.41
	Special transit	9.10
	Taxi services	0.05
	Driver supports– signage, instruction, etc.	0.18
	Pedestrian friendly environment	0.03
	Total Transportation →	$18.77
Housing:	House maintenance and renovation supports	$ 3.05
	Affordable and accessible housing options	6.13
	Retirement homes	1.97
	Supportive housing	3.77
	Long-term care beds	13.26
	Total Housing →	$ 28.18
Social/ recreational:	Recreation centres	$ 2.49
	Social groups	2.23
	Faith based organizations	0.26
	Arts and culture organizations	0.56
	Educational opportunities	0.41
	Total Social/Recreational →	$ 5.95
Health care:	Health education and promotion	$ 1.21
	Hospitals and clinics	3.77
	In-home health care	10.82
	Therapies – Physio, OT, etc.	5.69
	Physicians	2.62
	Pharmacy	0.05
	Mental health services	5.77
	Addictions services	0.26
	Total Health Care →	$30.18
Other:	Counselling	$ 6.41
	Supports for caregivers – respite, training, etc.	9.36
	Safety and security programs	1.15
	Total Other →	$ 16.92
	Grand Total →	$ 100.00

8. A number of potential <u>obstacles or barriers</u> to individual seniors accessing services are listed below. Indicate the extent to which you feel each of these is a problem in Oxford County:

	Not a problem at all	Not too much of a problem	Somewhat of a problem	A large problem
The hours that supports or services are available	0%	41%	44%	15%
The geographic location of where the services are provided	3%	21%	48%	28%
Transportation...................................	0%	8%	38%	54%
Physical mobility	0%	21%	55%	24%
Stigma related to accessing some services. …………………………………..	13%	24%	45%	18%
The financial cost or out-of-pocket expenses to individuals ……………..	3%	10%	55%	32%
Long wait lists/wait times ……………	0%	21%	18%	61%
Prohibitive admission criteria ....…	5%	50%	29%	16%
Lack of awareness of services ....…	0%	5%	56%	39%
Language or cultural differences ....……	5%	49%	38%	8%

9. Are there any <u>other obstacles or barriers</u> that interfere with seniors receiving the services or supports that they need?

   Lack of awareness of services; lack of advocacy; referral limitations; lack of flexibility in service provision; limits on hours of service; Provider knowledge of geriatrics; lack of individualization

10. If you could only make <u>one suggestion</u> to improve senior`s services in Oxford County, what would it be?

    Providers work together; system to provide information about services; reevaluate service criteria; affordable transportation; rural outreach; more counselling; increased services

11. Feel free to make any <u>additional comments or suggestions</u>: *Various comments*

SHERCON ASSOCIATES INC.
www.shercon.ca

November 2011

Consensus of 180 participants attending 12 sessions at locations across the County

|	Existing	Needs	WF	ADL	24/7
Transportation	Public transit in Woodstock Paratransit in Woodstock and Ingersoll Red Cross, Cancer Society drivers Taxi services Some delivery services	Improved/expanded public transit Transportation options for rural areas Affordable and expanded taxi services Expanded paratransit Support in operating own vehicles Improved street signage Handicapped parking More delivery services Shuttle services	x x x - x x x - -	x x x x x x x x x	- - x x - - - - x
Housing	Retirement homes Nursing homes Relatively affordable housing stock	Maintenance/retrofitting supports Appropriate, affordable, accessible, well located housing options Facilities with a continuum of supports Reduced wait lists for LTC More staff in LTC homes Placement close to own community More retirement homes More subsidized RGI housing Improved transition planning	x x x - - - x x x	x x x - - - x x x	- x x x x x - - -
Social/ recreational	Seniors Centres Faith based orgs. Libraries Groups and activities Learning Unlimited	More information about what is available Transportation to events and activities More staff and volunteers Home visiting, outreach Educational opportunities	x - - - x	x x x x x	x x x x x
Health care	Hospitals CCAC services Physicians (many retiring) Pharmacists	More home care hours More physicians and specialists Local diagnostic services Caregiver supports, respite Hearing, dental, visual support Mental health services/supports Client advocacy	- x x - x x -	x x x x x x x	- x x - x x x
Community	Internet Retired skilled professionals Volunteers Government services Sense of community	Awareness education re: seniors needs Building and walking accessibility Volunteer mobilization Services in rural communities Security education and support Financial support/cost reduction	x x x x x x	x x - x x x	x - - x x x

Age pyramid (2011) for Oxford County residents with 2016 and 2021 projections
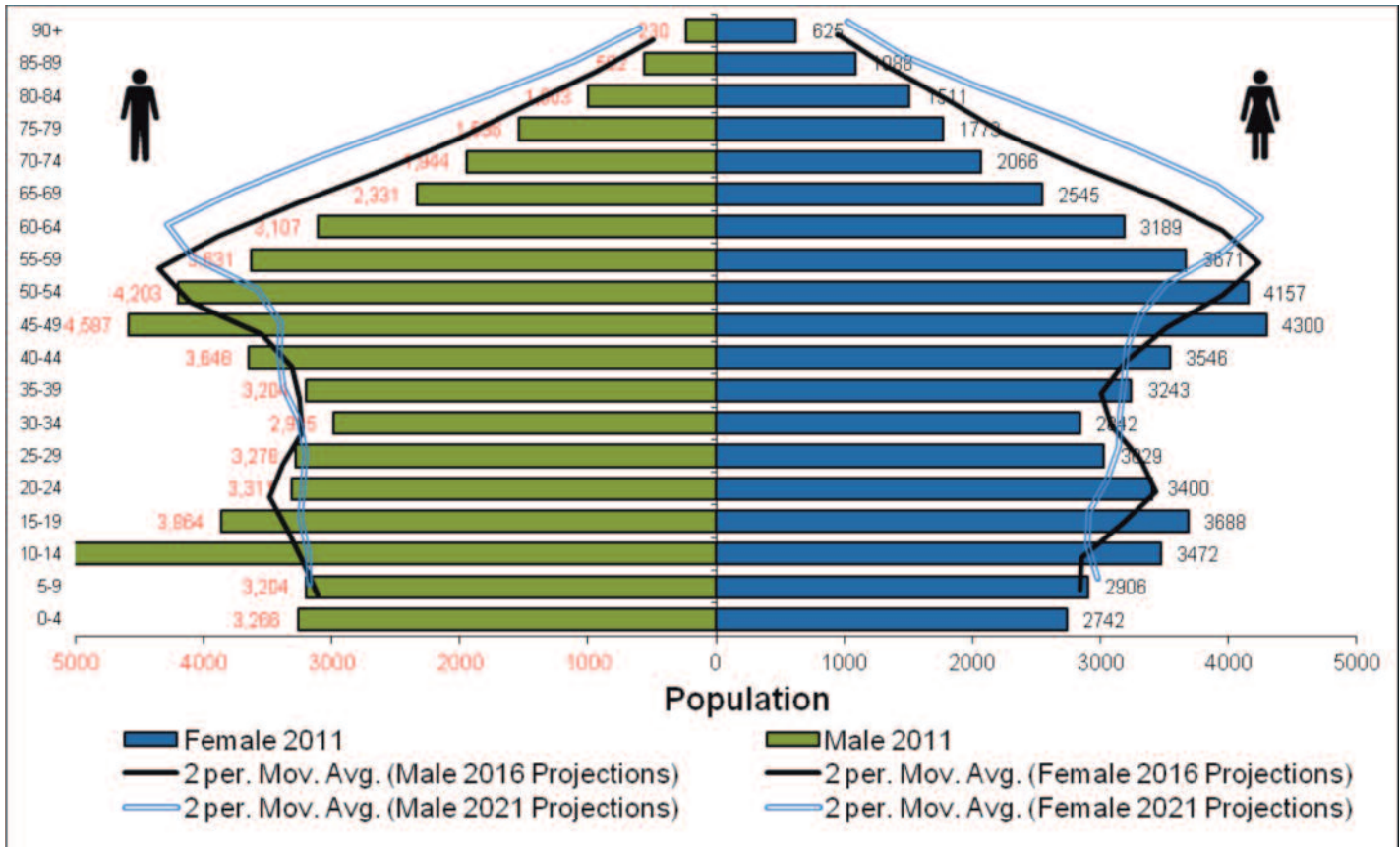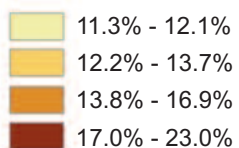

Source: Oxford County Seniors Report

Density Map of Oxford County seniors aged 65 and over
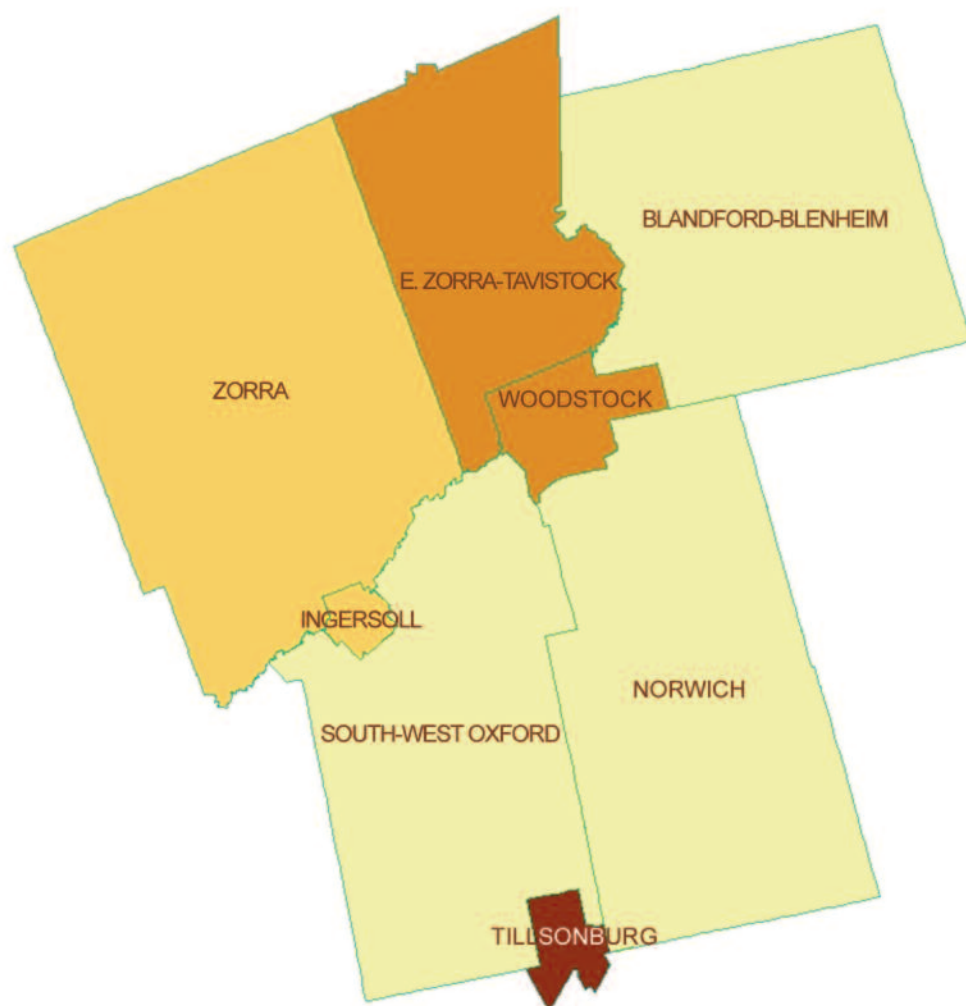
Legend

**Percentage of Seniors in Oxford County
65 and Over**

- 11.3% - 12.1%
- 12.2% - 13.7%
- 13.8% - 16.9%
- 17.0% - 23.0%

Source: [2006] Census, Statistics Canada (15)