

What We Heard:

Summary of Stakeholder Feedback on Naturally Occurring Retirement Communities

May 2018

Background:

In November 2017, the government released *Aging With Confidence: Ontario's Action Plan for Seniors* to empower seniors to make the choices that are right for them when it comes to their care, their independence and how they access government services.

One of the initiatives included in the Action Plan is Naturally Occurring Retirement Communities (NORCs). This is a new initiative that will launch in 2018-19 to provide additional social supports for seniors who are naturally congregating in buildings.

Ontario's 14 Local Health Integration Networks (LHINs) will select NORC sites and provide supports. LHINs will be guided in their work by a Provincial Program Guideline.

To inform the Provincial Program Guideline, the Ministries of Health and Long-Term Care and Seniors Affairs engaged with internal and external partners from January to March 2018. External engagement sessions included seniors, health, social and community services, academics, families and caregivers, language and culture groups and LHINs. A list of partners engaged can be found in Appendix A.

The following are highlights of the discussions held in early 2018. It should be noted that these themes reflect the varied feedback of partners engaged.

Key Themes:

Role of Seniors in NORCs

Seniors should determine their needs and participate in the planning and delivery of services including regular access to budget updates and active participation in the NORC evaluation.

The initiative could embed a community development approach, reflecting the broader goals of engagement, community-building and sustainability.

Types of Services and Delivery Partners

NORCs should not be medicalized. LHINs should prioritize social support and delivery partners.

Services provided to seniors in NORCs should target social isolation, nutrition and fitness and housekeeping supports.

Services should be tailored to meet the needs of seniors living in each NORC.

Examples of the types of supports to consider include:

- Fitness and exercise
- Recreational activities
- Programs to strengthen mental capacity
- Supports for instrumental activities of daily living

- Group meals/nutrition
- Public health (e.g. flu shots)
- Home care (e.g. foot care)
- Transportation (e.g. to the mall, to get a haircut)
- Coordination of services/system navigation

LHINs should consider the following partners, both in the selection of NORC sites and provision of services:

- Organizations representing seniors
- Seniors Active Living Centres
- Community Support Service Agencies
- Community Health Centres/Aboriginal Community Health Centres and other primary care providers
- French Language Health Planning Entities
- Ontario's 47 Municipal Service Managers
- Municipalities to encourage improvement of social and physical environments to benefit seniors
- The Age Friendly Communities Planning Outreach Initiative
- Open Lab
- Community centres
- Community service providers such as libraries, churches, recreation centres, and charitable organizations
- Businesses such as malls and barbers/hair salons
- Community transportation programs
- Community Hubs
- Community paramedicine
- Public Health Units
- Nutrition Resource Centres
- Hospitals
- Nurse Practitioner-Led Clinics

Target Population

Funding for NORCs should be used as a tool to respond to inequity of access to services and of health outcomes. Considerations include:

- Income
- Social status
- Social support networks
- Social environments/civic vitality
- Education
- Disability
- Language
- Gender

- Culture, race and ethnicity
- Access to health services

LHINs and delivery partners should have the flexibility to provide a range of supports to seniors living in NORCs. Seniors with the resources to coordinate services without government support may require fewer/lower cost supports (e.g. templates or a toolkit) while other may require more comprehensive services (e.g. on-site support for coordination).

Scope of NORCs

The scope of a NORC needs to be clearly articulated.

Supports for NORCs should consider including a variety of models - not just single buildings. The single building model is less relevant in rural areas of the province that experience the same gaps in services. Also vertical NORC models should consider serving seniors outside of the one building if they are in close proximity (i.e. from neighbouring/clustered buildings).

The NORC model should not include long-term care, retirement homes, or care occupancies.

Other Critical Success Factors

Buy-in from the building owner/landlord is key, particularly with respect to the provision of a common space for activities. Benefits for building owners include lower turnover rates, increased demand for units and fewer complaints from residents.

NORCs can leverage volunteer and neighbour-to-neighbour supports.

NORCs should be based on community partnerships – both private and public (e.g. libraries, malls).

APPENDIX A: PARTNERS INVITED TO ENGAGEMENTS

External Partners

Home and Community Care Services

- Ontario Community Support Association
- Home Care Ontario
- SPRINT Senior Care

Other Health Care Services

- Association of Local Public Health Agencies
- Ontario Public Health Association
- Association of Family Health Teams of Ontario
- Association of Ontario Health Centres
- Alzheimer Society of Ontario
- French Language Health Services Advisory Council
- Home and Community Care Advisory Table

Seniors / Patients and Family

- Canadian Association of Retired Persons
- Ontario Society (Coalition) of Seniors Citizens Organizations
- Ontario Council of Agencies Serving Immigrants
- Patients and Caregiver Advisory Table
- Fédération Des Aînés et des Retraités Francophones de L'Ontario
- Ontario Women's Network
- Care Watch
- AdvantAge Ontario
- Ontario Association of Councils on Aging
- United Senior Citizens of Ontario
- Canadian Association of Retired Persons

Social & Housing Services

- Association of Municipalities of Ontario
- Association française des municipalités de l'Ontario
- City of Toronto
- Seniors Active Living Centres
- Older Adults Centres' Association of Ontario

Think Tanks

- Age Friendly Outreach Initiative
- OpenLab

- Oasis Senior Supportive Living

Indigenous Partners

- Urban Indigenous Health Table
- First Nations Advisory Committee on Home and Community Care

LHINs

- Vice Presidents of Home and Community Care
- Home and Community Care Working Group

Internal Partners

- Ministry of Community and Social Services
- Ministry of Housing (subsidized housing facilities/developments)
- Ministry of Municipal Affairs
- Ministry of Infrastructure (community hubs)
- Accessibility Directorate of Ontario
- Ministry of Transportation (community transportation grant program)
- Ministry of Northern Development and Mines (northern community transportation grants and inter-community buses)
- Ministry of Community Safety and Correctional Services
- Ministry of Indigenous Relations and Reconciliation
- Ministry of Francophone Affairs

