

ALAG Strategic Planning Event

Monday, March 26, 2012

The meeting began with brief introductions from all present. Representation was present from: Northwestern Health Unit, Seniors & Law Enforcement Together, Assisted Living Action Group, Rainy River District Socials Services Administration Board, Canadian Mental Health Association – Older Adults program, Meals on Wheels, Fort Frances Family Health Team, OPP, Community Care Access Centre, Fort Frances Economic Development, Fort Frances Tribal Area Health Authority, Fort Frances Times, Westend Weekly, Town of Fort Frances, Sister Kennedy Centre Board of Directors, United Native Friendship Centre, Revera Living and Riverside Health Care Facilities.

Lori Maki explained the purpose of the meeting and the exercises that the group would work through. The process would begin by a single question being posed, to which individuals responded with comments on sticky notes. The notes would then be posted on the wall, and grouped into common themes. From there, those present would disseminate into smaller groups to discuss the issues and gaps surrounding those needs, and to brainstorm potential solutions or ideas to move towards. The information gained from the entire process will be analyzed and built into a survey directed at seniors to gather their input on what is needed in the District. The ultimate goal will be to work towards the creation and implementation of a 20 – 30 year plan.

The initial question posed was “What do seniors in the Rainy River District *Need?*” The answers identified on the sticky notes are captured in a ***separate document (see attached)***. When sorted, there were 7 common areas of need identified: Health, Safety, Support for Daily Living, Transportation, Housing, Financial & Leisure. The group also agreed that education and awareness should continue around respect & elder abuse issues, and that respect should be an underlying factor in every area, rather than a separate issue.

From this, the large group split into smaller groups to discuss the needs, and after a time came back together as a group to share what was discussed and identified. The smaller groups provided a summary on the discussion and potential “solutions” or “ideals” around each area. Those summaries were as follows:

Support for Daily Living:

Priority: Increased access to community supports.

Action: Develop a directory of community supports in order to create better access to these community services. We do have many services already; a detailed directory that would include a good explanation of services including costs involved is needed. The directory would need to be accessible (ie: not a thick catalog, but rather something manageable for quick reference) and updated regularly. It is also important that such a directory provides information to identify which services are funded vs. which are private pay. Resources should also be tailored to individual needs of seniors. Additional preventative work should also be done, as well as increased communication between partners. Education should be done around being “age-friendly” (ie: to businesses, service providers, family, etc.)

Resources Required: money, time, advertising, materials for creation of directory. Word of mouth referral is important

Challenges: money, *who* would develop the directory?, lack of volunteer base is an issue, as is knowledge of resources to be included.

Universal themes identified: respect, safety, culturally appropriate services, funding issues, and age friendly options.

Transportation:

Priority: Transportation is identified as a critical, high priority. There is currently no *real* service in place. While “Dial a Ride”, taxis and Raincrest shuttle are available, these are all limited. LHIN has provided a seniors van which has no accommodations or modifications to suit those with limited mobility or physical limitations. Accessibility to transportation is definitely a challenge, as eligibility is often too restrictive.

Action: Need to find a way to increase or create a mode of transportation that **all** people can access – perhaps considering only senior access to start. Create an inter-community support system.

Resources Required: volunteer base (can we use resources that we have, ie: Cadets, Rotary, Lions club?), funding/money (start up costs), on-going support. Pooling resources and funds is necessary (a joint effort)

Challenges: money, accessibility (ensuring accessibility for those with, ie: a walker, scooter, wheelchair, etc.), space near facilities, no public transit, finding people to move into volunteer base.

Universal themes identified: accessibility, ensuring a joint effort, critical need for transportation.

Safety:

Priority: Safety in a protection aspect as well as a health aspect is necessary. Seniors should feel respected and secure, should feel as though they have a voice and are protected. Education should continue in this area. From a health perspective, safety includes falls prevention education, medication safety (storing as well as administering) and general hygiene/personal care.

Action: Education in all areas should continue, and should be made available to all seniors, the public, service providers, etc. Community mobilization and engagement is important. The OPP takes a proactive & reactive approach and will act as a liaison to connect victims with proper services. Safe Guard ON is a service provided that intends to prevent break & entering.

Resources Required: education & awareness building to all, education to seniors around elder abuse and services that are available to deal with such abuse, an increase in media coverage, advocacy to raise awareness of supports available, a directory/catalog of services in an accessible format is essential.

Challenges: money, volunteers, who does what? Current admission to CCAC is limited – could this be increased? Chronic illness patients often end up in Emergency due to lack of access to home care services.

Planning: co-operative efforts between service providers is essential. There is duplication of services in some areas, which means increased communication between providers is necessary. An increase in services to ensure safety & accessibility is necessary, as is an increase in home service (services coming to patient rather than patient coming to services). An expansion of out-reach services is needed, as is a catalog or directory of all services available.

Universal themes identified: respect, awareness, education, voices that are heard

Housing:

Priority: Housing that is affordable, accessible and supportive is needed.

Action: Housing options are needed ASAP. Important contacts for this include: DSSAB (housing), CCAC (home-care), UNFC, Fort Frances Community Clinic (nursing). Private contractors and Community Living also identified as key contacts. Options identified: staying in home & receiving

support; re-do existing properties & supply support; build small scale apartment units; build large scale apartment units; build up-scale condo-style units

Resources required: money, partnerships, knowledge, land (space), education to public, collaboration with collective, results of studies/surveys to provide information, communication

Challenges: money, partnerships, knowledge, land

Planning: Can current resources be amended and energy re-directed? Gather input from grass-roots population before planning next steps.

Financial:

Priority: education & awareness around financial issues, outreach needed (for seniors *and* family). Areas include pension, retirement planning, power of attorney, investing, joint accounts, etc.

Action: education to inform on all options available to them, outreach to provide education – where they can access information. Coordination of services is important, as is collaboration of efforts to inform. Accessibility and transportation are also important, as is ensuring that needs are met.

Resources Required: Products that meet the needs of the community – need to know what to change in order to meet needs, services that can be brought to a central location, or to wherever seniors are.

Challenges: knowing who provides which services, building facilities that people want (location??), various channels to go through to find out about funding available to complete these efforts, *who can be trusted for sound advice?*

Planning: increased communication and collaboration among service providers. Gather input from seniors on needs (not just making assumptions on what we “think” they need), set up ways to meet and to better educate/inform one another on what we do. Once we know more → more planning will be required to move forward.

Leisure:

Priority: increased options and opportunities for various age-appropriate leisure activities for seniors. Gathering input from seniors as far as what is desired & what may be lacking.

Action: Add programming to what is already existing, collaborative efforts to apply for funding, expansion of Sister Kennedy Centre for increased use of building for meetings, classes, etc. Input and involvement from First Nations communities and groups; increase in activities that are culturally relevant/protect cultural identity

Resources Required: a directory of what is available, newsletter or newspaper articles, input from seniors, a variety of options, volunteers that can be trained as needed, transportation to/from activities

Challenges: money/funding, modifying the “culture” of the Sister Kennedy Centre, ensuring that any meeting place is inclusive & welcoming, who/how are volunteers trained, lack of transportation, identifying “what” a senior is (ie: 55+, 65+??)

Planning: utilize town space (ie: Sportsplex), develop a directory/catalog, create newsletter/utilize local newspaper to include regular “Seniors” focused articles/reports, form a steering committee, build/expand on services and activities that are already taking place