

## INTEGRATION INCUBATOR

The Change Foundation introduces the periodic *Integration Incubator* series spotlighting innovative initiatives—and the smart people behind them—helping to create on-the-ground change to advance health system integration and collaboration across sectors, providers, and services to improve the quality of patient care and experience. We hope these local and international good news stories on new ways of being, thinking and doing in health-care will spark and spread just that in Ontario.

*(Feature 1, October 2009)*  
—Ottawa, Ontario

### **Ottawa's Village Saint-Louis to be vibrant model of healthy aging and community partnership**

If you build it, they will ask—*what a great idea, why didn't you do this before?* This has been the common positive public response to a uniquely integrated healthy aging community for seniors planned in east-end Ottawa by [Bruyère Continuing Care](#) and the Perley and Rideau Veteran's Health Centre. If funding comes through, the welcome [Village Saint-Louis Supportive Housing Project](#) will be ready to house approximately 200 elderly residents by spring 2011.

Bruyère's leadership in the multifaceted and multi-partnered project arises from its longstanding commitment to provide and advance exemplary seniors' health care in Canada using research and education. The organization saw an urgent need to act on recommendations in the [Affordable Supportive Housing for Seniors Framework](#) developed jointly by the United Way and the City of Ottawa in 2007. The paper called for an expansion of affordable housing options for middle and low-income seniors as their total local ranks potentially rise (from 12 per cent

to 22 per cent by 2031) facing more chronic disease. "Supportive housing allows seniors to remain actively engaged in their community with easy access to services if and when their health starts declining," says Bruyère Senior Vice President, Corporate Services and Chief Financial Officer, Daniel Levac.

Bruyère itself is the largest provider of continuing care services in the Champlain Local Health Integration Network (LHIN), offering clinical programs in complex continuing care, long-term care, rehabilitation, palliative care, and family medicine. The [Élisabeth Bruyère Research Institute \(ÉBRI\)](#) is a partnership of [Bruyère Continuing Care](#) and the [University of Ottawa](#) and led by President and Chief Scientist [Larry Chambers](#), also on The Change Foundation board.

Bruyère and a wide network of key partners (see appendix) from all three levels of government and private and community care sectors also saw the forward-looking initiative as a way to tackle frustrating systemic "gridlock" issues affecting seniors, such as: unnecessary emergency room visits and hospital stays (alternate level of care or ALC); and moves to more costly long-term care facilities because of inadequate options. Levac points to Ontario Home Care Research and Knowledge Exchange Chair

[John Hirdes's](#) work showing that at least 10 to 17 per cent of LTC residents could be in supportive housing or at home, translating locally to 300 to 500 people. "Seniors will be able to age safely in their own homes and potentially avoid admission to long-term care, explains Levac.

The \$60-million project will require a central ongoing funding partnership with the Champlain LHIN.

### *Building the Village Vision*

Early in the planning process, [Champlain LHIN](#) CEO Dr. Robert Cushman challenged the project's steering committee members from Bruyère Continuing Care, Perley Rideau and the Alzheimer Society and United Way to dream big and not get overly bogged down by policy and legislative constraints. "The Aging at Home strategy aims at providing seniors with innovative programs and community support, so that they can continue to live independently at home," said Dr Cushman, Champlain LHIN CEO. "The Bruyère Village concept was presented to the Champlain Board of Directors as an innovative approach to caring for seniors. We look forward to future discussions with all partners involved in this exciting proposal."

With this "outside the box" directive in mind, Bruyère undertook a provincial study tour of nine exemplary continuum-of care facilities (see list below) committed to keeping seniors independent, healthy, and engaged in their communities for as long as possible. The resulting liveable, coordinated design rests on a mix of supportive housing, strong informal social networks and formal services along the health-care continuum to ensure patients receive the right level of care at the right time. At its core is the belief that seniors have something of value to contribute and should not be separated or siloed

but rather integrated into community life. The final Village will embrace its local neighbourhood inviting ongoing social interaction in coffeehouses and restaurants, around shared community projects like gardens, through on-site educational lectures on wellness and health, with such needed services as pharmacies and daycares, and by the ongoing recruitment of energetic volunteers of all ages to help make things run.

Along with key funding and research partnerships, there have been two very positive community town hall style public consultations with over 100 local residents. "Bruyère is involving as many stakeholders as possible in the project. We don't want to duplicate existing services but rather fill in gaps through plans for the new facility," explains Levac.

### *Building the Village: key components*

The 27-acre Village will border the Ottawa River adjacent to Saint-Louis Residence, an existing Bruyère long-term care facility. [The Village](#) will preserve green space and include three key components: an apartment complex with supportive housing units, a Village Commons with retail and office space, and a Healthy Aging Centre. The complex will be linked by inside pathways and house both frail and more functional seniors over 60; a mix which represents the community.

The apartment building's 140-units span independent apartments, supportive housing and long-term care. Unlike a traditional retirement complex, the housing is geared to overall rental affordability with 45 housing units subsidized by government. "It is very important to us that the look of the subsidized and market rent apartments be consistent and seamless as we don't want to set up a social stigma between groups," explains Levac. It is projected that 70 residents will use supportive housing services; another 30 will use these services but live in

their own homes within the neighbourhood; and 60 units will be for independent living. Seniors can access a wide basket of services such as housekeeping, personal care, “friendly visits” from volunteers to help with shopping and appointments, and emergency response as needed.

The second component is a Healthy Aging Centre with a Primary Health Care facility hosting a Family Health Team and a Wellness Clinic focused on prevention of decline. The Centre will include an airy, open fitness centre with a therapeutic pool to keep seniors moving and active. Seniors will be able to access a variety of health-care providers such as doctors, nurses, physiotherapists and nutritionists specializing in seniors’ care.

Thirdly, a Village Commons will be a central social hub hosting commercial space, offices and services geared to seniors and the surrounding community. Some of these

services, retail and commercial partners will afford seniors new volunteer or employment opportunities. The specific partnerships are still being finalized but include key social meeting places and services, such as pharmacies and eateries.

“The idea is to provide a continuum of care in a collaborative way within a supportive community setting,” explains Levac.

To learn more, see below Q and A with Daniel Levac, CFO, Bruyère Continuing Care. Contact [Bruyère Continuing Care](#). See [pictures](#) from proposal.

## Part 2:

### Q & A with Daniel Levac, Senior Vice President, Corporate Services and Chief Financial Officer, Bruyère Continuing Care

Our vision is to provide a continuum of care for seniors ( 60+) allowing them to:

- remain in their homes as long as possible
- maintain healthy lifestyles
- provide for different levels of accommodations (i.e. independent living, supportive housing, LTC)
- offer affordable housing

—*Bruyère Continuing Care, Seniors' Supportive Housing and Village Project*

#### Q1. The Saint-Louis Residence Village is designed to expand the continuum of care and bridge gaps. Can you talk about why this integrated model makes sense for seniors' health and our system?

Well I think we wanted to put together a model that allows seniors to stay in their homes longer and improves their overall quality of life recognizing that 1 in 4 seniors needs support for daily living. This project allows for something in between full time care and other kinds of help to provide the right level of care for those who wish to age at home and are not yet in need of a long-term care facility. This is where we felt there was a need. On the system level, this approach reduces costs by cutting down on such things as unnecessary and costly emergency room visits by seniors seeking care because they don't have simple supports and also impacts the overall ALC issue. We know from John Hirde and others that 20 per cent of Ontarians end up in the wrong level of care whether that's acute, chronic, or long-term care and 17 per cent of seniors in Ontario don't belong in long-term care at all. In the case of Ottawa at least 10 per cent of residents don't need this level of care so that's between 250-300 residents.

#### Q2. How does this differ from a traditional adult retirement community?

It's very different because we are creating a holistic health care model with an affordable housing component for seniors. Many of these people can't afford expensive condos. It's not just housing and not just health care. We'll be offering a continuum of care approach so seniors can transition easily and smoothly to the next stage as their needs change. We will build in common amenities and services for them and the surrounding community to encourage active living and real engagement with other age groups to avoid a seniors' silo. And on the health services and wellness side, we'll have a Family Health Team, physiotherapists, social workers, nutritionists, and a fitness area with a pool. The idea is to provide a continuum of care in a collaborative way within a supportive community setting.

**Q3. I understand the project team looked at various exemplary models of integrated care to propose the village idea? Can you tell me more where you looked and what impressed you and what you felt important to adopt?**

Yes we did a tour of nine different Ontario retirement and other homes for seniors to get a sense of the landscape and what would best meet needs here. (\*See list below) It was very instructive in identifying both positive and undesirable characteristics. One thing that emerged is that the actual physical link and proximity between supportive housing and care facilities was key to making it easy for seniors to access timely care. Also, we saw that having a common area where seniors can meet, socialize, play, work or pray is very important and can be the heart of these communities. In terms of this central common ground, it was often a church or a big dining hall as was the case in the Parkwood Home in Waterloo. Also, mixing with the outside world and different ages is central to creating real community as in the award-winning Yee Hong Seniors Community Centre in Scarborough for Chinese seniors. It offers social and daycare activities, community outreach, drop-in programs and meals-on-wheels. And again as I mentioned volunteerism is key. So these were some of the main ideas that influenced our local design.

**List of homes toured:**

- Christie Gardens, Toronto
- Unionville Home, Markham
- Yee Hong, Scarborough
- Fairview Home, Cambridge
- Parkwood Home, Waterloo
- Greenwood Court, Stratford
- St. Demetrius, Toronto
- Humbervale, Toronto
- Deep River, North Renfrew Long Term Care

**Q4. You envision a mixed community including the frail elderly and those younger (60+) and more functional. You've also designed interaction with the wider community. Can you tell me more about how this cross pollination promotes healthy aging?**

Yes mixing ages and capacities is key to the community's success as we learned from our tour. Younger more active seniors helping older frailer members is helpful for everyone. Helping adds purpose. And, recruiting outside willing young and old volunteers is also critical to making things run. We've already canvassed the community for instance about running a possible on-site greenhouse and we've had about 60 area residents express interest already. It's this kind of ongoing intergenerational interaction that builds community and keeps creative juices flowing. Another plan is to have a childcare centre on site, as seniors love seeing youngsters; it keeps everyone young. We presently have a chapel that offers Sunday mass to the community. We want to create a "village" feel where the neighbours feel comfortable coming on to the property to access the green space, or to have a cup of tea in a pretty café or to come to hear a presenter speak about health and wellness matters.

**Q5. This project came together through the work of many key partners including providers, the Champlain LHIN, other government players like CMHC, local community etc. What was the key in getting this realized?**

Well to be honest, it wasn't always easy due to its complexity but I think we all shared a common vision which helped us stay on the same page. Also the Champlain LHIN led by Dr. Robert Cushman has made seniors a priority in line with the Ministry's Aging at Home initiative. The various funding partners like—the LHIN and the federal government are of course key. And I think it was clear from our two consultations attended by over one hundred people that the Orleans public was strongly on side. I don't think we heard one negative comment. The most common question was—why didn't you do this before? There's a real need and it made complete sense to them.

**Q6. Your project rationale makes the point that supportive housing and healthy aging are part of the solution to addressing ALC and unnecessary ER visits. Can you tell us more about your organization's research and experience with seniors receiving care in the wrong care setting?**

Bruyère Continuing Care has a long history of leadership and expertise in seniors' health. It's evident from research and experience that outside of the system costs which I've mentioned, seniors simply heal better and are happier and healthier at the right level of care. Bruyère wanted to create and expand innovative options in Ottawa as there is an insufficient supply of facilities supporting independent, healthy aging.

**Q7. Overall, what do you hope this project will teach us?**

I hope it generates interest in better understanding healthy aging and building sustainability in health care. As our population ages and faces rising chronic disease, both of these goals are key to creating better care and reducing costs. It will also show us impacts on domino issues such as ALC.

**Q8. How do you plan to share and spread the learning from this project across the Champlain LHIN and beyond?**

Well we've made our project's functional plan widely available to all interested and hope that it will help other agencies and groups expedite their own projects by saving on groundwork research. It contains key planning features and technical details of the design. We encourage those interested to contact us for a copy. The functional planning exercise was funded by the Champlain LHIN, through its Aging At Home Strategy. The Project Steering Committee was comprised of representatives from Bruyère Continuing Care and Perley Rideau as well as community members representing the Alzheimer Society and United Way.

Also, we plan to share our ongoing progress and project learning in many forums and LHIN networks across Ontario.

*Appendix:*

6) Project Partners—Village Saint-Louis Supportive Housing Project

Planning & Advisory	Seniors Impact Council	Council on Aging Ottawa	OAHNSS	Centre Seraphin Marion	Centre Des Aines	Local Community
Government	Municipal Officials	City of Ottawa Housing	CMHC			
Local Health Service Providers	Champlain CCAC	Alzheimer's Society of Ottawa/Renfrew	RGP Eastern Ontario	Family Physiotherapy Centre		
	Geriatric Psychiatry Community Services of Ottawa	King's Daughters MOW	Unitarian House	Eastern Ottawa Resource Centre		
Other Partners	Medisystems	YMCA	Shoppers Drug Mart			
Bruyère	TAFETA	University of Ottawa	Sisters of Charity	EBRI	Helpline	