

Building a Seniors Campus

A sustainable model to support positive aging and strengthen our communities

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Foreword

Just another White Paper?

No, rather an insightful, experiential, driven instruction manual for those who seek justification for or have the desire and fortitude to pursue what will inevitably become one of the most meaningful institutions established in your community. Further, it is a shining example for the Province to reference when attempting to make sustainable investment decisions with their municipal partners and find true value in seniors' care.

When Jane Sinclair first approached me with an elaborate idea to construct an innovative continuum of care and housing complex as a redevelopment of one of our aged long term care facilities, I listened. This was an idea built on a passionate concept of redevelopment, operational and fiscal sustainability, all wrapped up with exceptional care and dignity for generations to come in an elegant home like setting.

Utilizing the successes of components of our own and various other public, not-for-profit, and private sector models of seniors housing and care, Jane wanted to build an aging-in-place continuum of care that also created a long term financial model that reduced operating costs while providing increased care capacities and efficiencies. Not easy, but any new solution to a complex and increasing need which is truly worth pursuing is never simple.

This paper defines what success in seniors care and housing can look like. But don't take my word for it, come and see Simcoe County's Georgian Village first hand to experience this success in person. We look forward to doing anything we can to help you replicate and even build on this achievement.

In terms of the great success of this project, I would like to first acknowledge and thank the dedicated staff who work in seniors' care. I am astounded every day by your boundless commitment and compassion. Building infrastructure is one thing but making it operational and transforming it into a safe and caring home environment for those that need our assistance in their twilight years is 100 per cent due to you.

To Simcoe County Council, past and present, while you have always been open to innovation and different approaches to social, health and community services, your leadership and support on this significant initiative was inspiring. It would have been easy to limit your responsibility, say no, or defer this opportunity.

Hats off to the many officials and staff from the Province of Ontario, right up to and including then Minister of Health and Long-Term Care, Deb Matthews. You should be commended for understanding the needs and putting funding and programs in place that were absolutely critical to this outcome.

And finally Jane Sinclair, whose personal motto of 'never give up' was tested a few times through this process. Your passion, persistence, and vision has achieved great success for the entire industry for many generations to come, not just for Simcoe County or this project. Our region is blessed to have been part of your Georgian Village journey.

Many have contributed to creating something that sets a new standard for seniors housing and care which will directly, and with immense dignity and compassion, positively impact the lives of thousands of our residents at their most vulnerable time in life, individuals to whom we owe our respect and a debt of gratitude. On their behalf, I sincerely thank you all.

Well done.



Mark Aitken Chief Administrative Officer County of Simcoe

Message from the Author

Municipal governments have been in the business of providing housing and services to support seniors for more than a century, recognizing the significant contributions our elders have made in building our communities and shaping our future. Older adults form the cornerstone of many volunteer programs, provide tremendous value and support to their families, friends and neighbours, and have and continue to play a vital role in our economy as skilled, knowledgeable, and experienced workers. As our seniors get older, they are well-deserving of our attention and priority focus to ensure they are duly supported in their later years. As a community, now is our time to give back.

Municipalities have an inherent responsibility to safeguard our most vulnerable citizens. Ninety-three percent of all seniors live in private households, many alone and socially isolated. One in every three seniors cannot afford their rent and fifteen percent of those who live alone, live in poverty. Our seniors require more than three times as much health care and utilize almost half (44%) of our entire health-care dollars. With this demographic more than doubling over the next 20 years, in an era of fiscal constraint and mounting health-care pressures, finding innovative ways to support our seniors is no longer an option; it is an imperative. (*Institute for Research on Public Policy, 2015*)

Though this paper is written through the lens of municipal experience, it is equally important to recognize the significant role of the entire not-for-profit sector for the incredible value and quality that they offer in long-term care, seniors housing, and home and community services. Research has shown time and again, that not-for-profit providers deliver care and services second to none. Principled in a spirit of altruism, our not-for-profit partners dedicate more resources, have higher staffing levels, greater quality, support cultural and ethnic diversity, reinvest in the people they serve, and are surrounded by a groundswell of community support that provides a perfect foundation for the development of a seniors campus continuum. As stewards of our communities, municipalities and not-for-profit providers must continue to step forward to provide these innovative solutions.

With such a rich history of understanding and supporting older adults, the County of Simcoe is one such example of this leadership, extending beyond their legislative responsibilities with the creation of an entire seniors' campus, called Georgian Village. Though co-locating seniors' housing has been a practice across Ontario for many decades, the development of this new continuum offers a unique environment that combines housing options with built-in support services and healthy lifestyle amenities so that our seniors can truly age in place and enjoy the comfort and security of home and community; all in one location.

This paper provides our not-for-profit sector with a clearer understanding of their role in seniors' care, delineates key principles and strategies essential to the development of a successful seniors' campus continuum, outlines the basic underpinnings of business plan development, and high-lights the successes of this new model. This sector is able to leverage an entire foundation of services and community partnerships and are well poised to provide this needed leadership in a more efficient and cost effective way. This white paper should reach into the depths of our civic consciousness as a call to action to continue to safeguard for our most vulnerable citizens. It is less about meeting our regulatory obligations and more about being the right thing to do.



Jane Sinclair, RN, BScN, MN General Manager, Health and Emergency Services *County of Simcoe*

Executive Summary

The County of Simcoe (County) is a rapidly growing municipality, investing in innovative strategies to foster positive aging and create more sustainable and healthy communities. The County's vision for a state-of-the-art, "60+" adult lifestyle community offering an entire continuum of housing and services combined with a unique opportunity to age in place, became a reality when the Georgian Village campus opened its doors to its residents in 2013 in the Town of Penetanguishene, Ontario. This advanced "age-in-place model" is the future of housing for older adults that provides efficient, comprehensive and accessible services and amenities within a safe and welcoming community environment.

For those municipalities faced with significant financial pressures associated with the operations of long-term care homes, this model will not only build housing capacity in their communities, but can also lower their municipal impact!

The creation of campus continuums for seniors, builds infrastructure to support the needs of our aging population and offers municipalities and not-for-profit providers with a viable option to create sustainable housing and services, cultivate economic growth, and generate revenue opportunities to offset an inadequate funding system for such critical services as long-term care and community support programs. As a municipality, the County brings a unique vantage point to our communities in that our principal interest is to support all individuals regardless of such factors as age, gender, ethnicity, health condition, and socio-economic status. Our goal is to ensure equitable, affordable, accessible, high-quality care and services for everyone. We are committed to a high standard of care and take great pride in setting the bar high.

Building on a foundation of more than 120 years and serving more than 1,000 older adults from multiple locations across the region, the following paper applies our unique municipal perspective in outlining key considerations for the development of a successful campus continuum. This model provides important underpinnings that are transferrable to other organizations and furthers the conversation regarding municipal responsibilities and leadership in seniors' care.

In reflection of Georgian Village, this paper discusses key elements essential to the success of this business model within the context of an "aging-at-home philosophy" and the need to embed socialization as a mainstay of healthy living. Salient aspects recommended in campus development include a continuum of housing and service options, the presence of a community hub, healthy lifestyle amenities, social and recreational programming, strong partnerships, and the provision of community outreach. These considerations are further discussed within the context of our municipal role, age-friendly communities, and the importance of a sound business plan.

As a municipality, we are well positioned to understand and address the increasing needs of our older adults beyond our legislative responsibility to deliver long-term care. With an extensive and broad-based network of partnerships, services, infrastructure and talent, being collaborative by our very nature, and always striving to provide for the greater good across all of our communities; together we have an exciting opportunity to pave the way toward this new model of seniors' care in the 21st Century.



Introduction

The County of Simcoe has an extensive history of providing support to seniors commencing with a small house of refuge in 1897 that has since blossomed into a larger multi-faceted portfolio that offers housing and programs to more than 1,000 seniors across the region. Arising from our Council's longstanding appreciation and commitment toward seniors, the County now operates four (4) long-term care homes and offers a broad range of seniors' housing that includes

affordable housing units, garden homes and apartment suites, life lease and market rentals, retirement living, and supportive housing. This is further complemented by adult day programing, a suite of "a la carte" services, and a range of outreach programs that include meals on wheels, mobility/seating assessment clinics, and a regional mobile behavioral support services program.

Georgian Village
offers a distinctive
setting that hosts a more
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socio-economic continuum.

In 2006, the County of Simcoe received approval to move forward with capital redevelopment for its smallest home, Georgian Manor, a 107 bed Class "B" long-term care home. The County was faced with an aging infrastructure, inequity with other County Class "A" homes, escalating wait lists for long-term care and seniors' housing, and an increased focus on home and community services. Recognizing the global trends and escalating fiscal pressures associated with an aging population, with 16% of the County's population over 65, the County seized this opportunity to embrace changing demographics by delivering new, innovative and expanded housing and services to relieve the

stresses of lengthy waitlists, promote aging at home, enhance the health status of older adults, provide more efficient and sustainable operations, and fortify our sense of community.

In 2013, the County opened a new and innovative campus model unique to the province of Ontario. Though seniors' campuses have been developed for many years and continue to expand, Georgian Village offers a distinctive setting that hosts a

more diverse range of housing that spans the entire socio-economic continuum. This housing spectrum is nestled within a community setting deeply entrenched in the history and culture of the area, promotes healthy lifestyles and meaningful socialization, and offers a wealth of services and amenities that complete any community.

Building on the work involved with the development of Georgian Village, this document aims to: engage municipalities

and not-for-profit providers in a much broader conversation; provide them with tools and guidelines to explore their role in seniors' care; promote leadership in campus development; and ultimately foster the advancement of age-friendly communities. Though the focus of this paper is by in large based on a municipal experience, the concept and principals of this campus model are replicable and can certainly be applied more broadly to other organizations.

With the increased demands associated with our aging population, we encourage others to embrace this new paradigm for future consideration.



Background

AGING DEMOGRAPHICS

During the next 20 years, in Canada our population aged 65+ will double to 10.4 million, making seniors roughly one quarter of the population in 2036. (Federation of Canadian Municipalities, 2013) Coupled with the development of a rapidly growing older demographic, is the trend that Canadians are also living longer and are increasingly reaching the age of 100. Between 2006 and 2011, the number of Canadian centenarians increased by almost 26%, the second highest increase of all age groups, after the 60-64 age group which increased by 29%. (Statistics Canada, 2011 Census) According to new data from the Office of the Chief Actuary, the average life span for Canadians aged 65+, is now 87 for men and 89 for women. (Mortality Projection for Social Security Programs in Canada, 2014)

Similar trends at an even more accelerated rate are occurring in Simcoe County; experiencing rapid aging above both national and provincial averages. Today, the proportion of adults aged 65 and older in Simcoe County is 18% of the population compared to 16.7% in Ontario and 16.9% in Canada. (Statistics Canada, 2016) An example of this locally can be illustrated in the Town of Penetanguishene from the period of 2006-2011; yielding a five (5) year growth rate increase in the 85+ population of 45 %. (Statistics Canada, 2006-2011)

In light of these significant shifts in our population, it is estimated that 2.4 million Canadians aged 65 years and older will need continuing care, both paid and unpaid, by 2026. That is 71% more people than in 2011 and by 2046, the number is estimated to rise to 3.3 million. Similarly, the associated costs will grow from \$28.3 billion to \$177 billion over this same time period placing additional strain on an already stressed system. (Canadian Medical Association, 2017)

As purported by the Canadian Medical Association (CMA), getting seniors' care right will not only lead to better health outcomes and quality of life for Canada's older population but it will also result in innovations and improvements across the entire health-care system. (Canadian Medical Association, 2017) In Ontario for example, we know that a range of between 20-50% of seniors on the waitlist for long-term care could be diverted if there were appropriate supports for them in their home and community. (AMO, 2016) This not only brings the right care to the right location, but does so in a much more efficient and sustainable manner.

SENIORS' HOUSING

In light of the rapid growth and advancing age of our senior demographic, there is a critical need for more suitable housing to support this vulnerable population. The range of housing options required to foster and sustain the growing population of seniors in this Country is inadequate. (Federation of Canadian Municipalities, 2015)

Over the last 15 years, house prices in most of Canada grew almost three times faster than incomes. In 2016, senior's housing was reported under the top themes of a national housing consultation with Canadians identifying the need for more affordable rental housing (market and non-market/social housing), along with an increased variety of housing options that are well-integrated with services and include supportive housing for those with physical, psychological, and cognitive challenges. Combined with the fact that Canadians are living longer and the expectation that the number of people over 85 years of age will grow by 50% over the next decade, data also suggests that there will be significant pressure to invest in new retirement and long-term care homes and/or additional support programs for people living independently at home. (CMHC: Let's Talk Housing, Consultation feedback, 2016)

According to the 2016 Population Census, close to 6 million (5,935,635) seniors aged 65 and older live in Canada increasing

by 20% over the past five years and this number will only continue to grow. (Statistics Canada, 2016) As purported in the *Alliance of a National Seniors Strategy* (2016), a lack of access to affordable housing increases the likelihood of physical and mental health problems for older Canadians.

From 2011 to 2016, Simcoe County increased its population by 7.5% compared to the provincial rate of 4.6% during the same period. Similarly, growth rates for seniors in the County of Simcoe have also been out-pacing average growth rates across the province. (Statistics Canada, 2016)

Congruent with this trending,
Simcoe County has experienced
an extensive need for seniors'
housing, with growing
demand for market rentals,
increasing wait lists in such
areas as long-term care and
social housing, and housing wait
times ranging between 3-6 years.

18%

of the population in Simcoe County is 65+

NATIONAL SENIORS STRATEGY

Though housing is a primary need associated with this population, the provision of this requirement alone is not enough to support an environment of healthy aging and adequate care for our older adults.

As purported by the IRPP Task Force (2015), there are four pillars that support a *National Seniors Strategy* and thus support our older Canadians. These include ensuring that older adults: remain independent and engaged within the community; lead healthy and active lives; have access to person-centered, high-quality, integrated care close to home; and that their informal caregivers such as family and friends are acknowledged and supported. (Institute for Research on Public Policy, 2015)

Therefore, in addition to the provision of appropriate housing, greater attention is required in such key areas as health and support services, age-friendly design of our communities and physical environments, social and recreational programming, and creating a sense of community that supports older adults and their circle of care.

Statistics Canada recently estimated that while 2.2 million Canadians received home care, 15% of them still reported having unmet needs. Persons with unmet or partially met needs reported higher levels of stress and negative feelings. For example, 62% of care recipients with partially met needs experienced loneliness, compared with 31% of those whose needs were met. (Statistics Canada, 2014) When seniors health declines and their care needs intensify, the level of supports must also intensify.

In the province of Ontario, our government has called for a shift in health-care priorities that will help address these changing needs of our seniors. In 2010/11, according to *Ontario's Action Plan for Health Care* (2012), there were more than 271,000 unnecessary trips to hospital emergency rooms by Ontarians who could have received treatment closer to home in alternative primary care settings. This situation is further compounded with high hospital readmission rates, noting 140,000 instances of readmission within 30 days.

Further, 75% of seniors with complex needs discharged from hospital received care from six or more physicians and 30% obtained their medications from three or more pharmacies. (Ontario's Action Plan for Healthcare, 2012)

In Ontario, there is a significant dearth and disparity in the level of community support with provincial investments ranging from 27 – 69% across the province. (Ontario Association of Community Care Access Centers, 2014)

Seniors require more person-centered, coordinated and seamless access to their health services that is closer to home.

TRENDS IN RURAL COMMUNITIES

In addition to the need for more person-centered, coordinated and seamless access to health services, an important factor to consider in understanding the health-care needs of our seniors is the additional limitations associated with living in small rural communities. Twenty-three per cent of all seniors live in rural areas and small towns in Canada. The majority of these seniors, even those in the highest age bracket of 85 plus, are also living independently at home. (Age-Friendly Rural and Remote Communities: A Guide)

Though there are many obvious benefits of living in the beautiful and charming communities of rural Ontario, limited housing and transportation, along with fewer health, social and community support service options, place older adults at higher risk of social isolation and poorer health status. Often there may be rural areas which cannot accommodate their older adults in seniors' housing, local retirement or long-term care homes. Seniors that are constrained in their choices, may become displaced from their home, longtime community, and social network; forced to move to other locations where more suitable housing and supports are available.

Addressing this swell in the number of older Canadians, whether that be in rural or urban locations must be based on smart, targeted and innovative interventions. (*Seniors and Housing: The Challenge Ahead, 2015*) The development of a seniors' campus continuum with housing options, socialization, health and personal care services, and healthy lifestyle amenities offers seniors a one-stop shop within a healthy aging environment and is a prime example of innovation that will go a long way in meeting the needs of this fast growing population.



Section 1 – Municipal Role

Municipalities are well-positioned to move forward with this kind of innovation in creating their own campuses of care for seniors. As a level of government, municipalities are financially stable, open and transparent organizations, with longstanding and far-reaching partnerships, and are the vanguard of services that benefit older adults including affordable housing, financial assistance, transportation, planning, physical infrastructure, long-term care and community health; just to name a few.

By working in collaboration with other levels of government, service providers and community stakeholders, municipal governments are already targeting initiatives that support age-friendly community planning. These include important strategies such as: retrofitting homes to improve accessibility; sustaining investment in subsidized housing; supporting the delivery of affordable rental housing; investing in accessible, and convenient public and active transportation; and creating accessible streets and trail systems.

It must be acknowledged that some municipalities face a significant financial burden in operating their long-term

care home under the current provincial funding structure. As such, we must continue to advocate to the province for more appropriate financial support.

However, building a campus continuum will allow these municipalities to leverage their many assets to both increase seniors support and reduce the associated taxation of their constituents.

Municipal governments are also committed to providing high quality, safe, accessible and affordable services to their citizens. While some services are required through legislation, many municipal governments have filled gaps when provincial allocations are insufficient, introducing additional services, and developing innovative ways of working beyond what is required. (Canada's Aging Population: The Municipal Role in Canada's Demographic Shift, 2013) With such high standards and level of commitment, municipalities assume an important role in setting standards and establishing a benchmark for others across this province.

In light of these many attributes, municipalities possess an inherent responsibility to protect our most vulnerable citizens. As stewards of our communities and our people, this level of government is well poised to leverage an entire foundation of municipal services and community partnerships and must move forward to provide the needed leadership to support our seniors into the future



Section 2 – Campus Model

Dating as far back as the 1980s, it has been well understood that our aging population will pose additional strain on our health-care system and that the solutions need to focus on keeping people in their homes and communities so that they can live independently for as long as possible. With this understanding, there have been numerous government led policy papers emphasizing the need to build community-based continuums of care. (Institute of Research on Public Policy, 2016)

Given the significant aging population within the County of Simcoe, situated across a large geography among a substantial number of small and rural communities; the impact on seniors associated with this particular backdrop presented an ideal setting for the County to develop a community based continuum to support our older adults.

In 2013, Georgian Village, an "Aging in Place Campus Continuum" was created to respond to the needs of our seniors and establish a new and innovative model to support this population. This model responds to escalating wait lists for seniors' housing and services, reflects the underpinnings of Canada's *National Seniors Strategy*, and plays an instrumental role in cost-effective capacity building now and for our future.

In developing this campus continuum, there are eight (8) key doctrines that form the foundation of this model that include: an aging at home philosophy; socialization; a continuum of housing options; a broad range of cost-effective services; a community hub; partnerships and collaboration; outreach support to seniors living in the surrounding community; and the application of age-friendly community planning principles. To assist organizations considering the development of a continuum in their own locale, the following section provides further details regarding each of these core components of our model:

1) Aging at Home

In 2007, Ontario adopted an *Aging at Home*Strategy to provide supports for seniors and their caregivers so they can stay healthy and continue to live independent lives in their homes and communities.

As defined by the U.S. Centers for Disease Control and Prevention, aging in place is about an individual's "ability to live in one's own home and community safely, independently, and comfortably regardless of age, income and ability level". In addition to fostering increased independence and better health, this construct has other beneficial consequences regarding the utilization of our health-care system. (United

States Centre for Disease Control, 2015)

Georgian Village was designed to support this "aging at home" philosophy by providing a community based continuum of housing and integrated care options to support our seniors and their caregivers. This campus model includes: an extensive range of housing options with various levels of support and socio-economic conditions; a broad selection of services that is integrated and can be accessed regularly or on an as needed basis; and a host of health and wellness programs and amenities to promote active and healthy living.

Whether the individual endures a critical life transition, suffers a major health event, or experiences subtle changes in their day-to-day activities; this environment is adaptable to respond to whatever their individual health status requires. Designed to meet the changing needs of our seniors as they grow older, Georgian Village offers a solution for older adults so that they can continue to live healthy, vibrant lives within a community setting.

2) Socialization

According to the Constitution of the World Health Organization Principles (1946), health can be defined as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". Though social well-being is a central component of health, many seniors are at higher risk of social isolation and therefore susceptible to the deleterious consequences resulting in poorer health outcomes. It is estimated that approximately 20% of all older adults in Canada currently experience some degree of social isolation. (National Seniors Strategy Evidence Informed Policy Brief, 2017)

Informed Policy Brief, 2017) As noted by the World Health Organization (2003), social isolation and exclusion are associated with "increased rates of premature death, lower general well-being, more depression, and a higher level of disability from chronic diseases". Given the prevalence and serious effects of social isolation, creating a friendly and inclusive environment that fosters healthy social interaction and a strong sense of community has been a driving force in the development of this campus setting. Georgian Village offers a comprehensive range of more than 100 programs per month that include such activities as arts and crafts, card playing, billiards, musical entertainment, book clubs, bus outings, chair yoga and weekly "Pub Nights", to name a few. The campus is situated on 20.7 acres of land complete with a number of recreational amenities that

include outdoor trails, golf greens, bocce ball

and shuffleboard courts, a fitness centre

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and therapeutic pool, a greenhouse and raised gardens, a woodworking center and a large auditorium that hosts many events and tailors to big screen movie nights.

In addition, to our many activities, recreational programs and outings, we also provide congregate dining that offers nutritional meal service in a setting where individuals can enjoy fellowship and a positive social experience.

With approximately 320 seniors living on campus, we observe a participation rate in social activities of approximately 90% of all campus residents. In addition, we welcome seniors from the adjacent community who utilize our amenities and regularly participate in some aspect of our programs, activities and events. For our most frail seniors who are living in long-term care and retirement living, we have designed our programming to safeguard that all of these individuals are engaged in some form of social experience within the campus environment.

3) Housing Options

Compatible with an "aging at home" philosophy and the increasing need for more and varied accommodations, including a broad range of housing options is an important element of this type of development. Georgian Village consists of a 311,500 square foot campus style community that features an entire continuum of housing alternatives to support varied socio-economic needs and the most independent lifestyles right through to housing that provides full services for some of our most vulnerable citizens. This

campus consists of five (5) diverse housing structures that offer eight (8) different choices of accommodation.

Specifically, this unique design consists of: a 143-bed fully accredited long-term care home that provides French language services and includes long-term, respite and convalescent care; a 42-unit retirement living facility complete with a full service package that includes all meals, programs and recreational activities, and provides individualized nursing and personal care with 24/7 staffing support; a 40-unit affordable housing complex with barrier-free accessibility and a modest service package that includes a weekly meal program, recreational activities, 24-hour emergency support and an annual apartment cleaning; independent Life Lease housing options that are available in both apartment suites and garden homes; and independent market rental units also available in both apartment suites and garden homes.

To support the concept of aging in place; this housing continuum operates under a "priority placement" policy that facilitates a seamless transition for campus residents needing to move from one model of accommodation to another as their needs and associated requirements for support change. Since opening, we have facilitated 30 internal transfers within the community housing component with all residents moving to a higher level of care setting. Long-term care is the one exception to priority placement within the campus. Provincial legislation requires all long-term care applicants be placed through Local Health Integration Networks (LHIN) under specific placement guidelines. With the additional suite of services available to residents living on campus, the County has celebrated a number of success stories by supporting campus residents with additional services until they can transition into our long-term care (LTC) home.

Despite this advantage, we have lost almost the same amount or half of our community residents needing LTC to other homes due to the current provincial placement guidelines. As such, 14 of the 29 residents needing LTC were required to move to another LTC home.

4) Suite of Services

As individuals get older and their abilities and health status depreciate, they may need increased support with meals and housekeeping, help with shopping and errands, and transportation to activities, services, and appointments. Home care services, however, are not universally covered by health care or insurance. (Federation of Canadian Municipalities, 2015) A 2014 study of home care in Canada found that 13% of seniors aged 65-74 and just more than one in four aged 75+ (27%) relied on home

13%

of seniors aged 65-74 relied on home care services

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care services. These same demographic groupings experience a disability rate of 31% and 53%, respectively. (Statistics Canada, 2014)

Given the limited levels of home care within the community, many seniors rely on informal caregivers to supplement these services providing support that ranges from helping to manage with some of the most basic activities of daily living to providing more technical care for complex and multifaceted medical needs. IRRP Task Force on Aging (2015) identified that between 75-80% of all home care is provided by informal, unpaid caregivers. This constitutes 35% of our workforce and represents a \$1.3 billion loss of productivity each year. With such strain on our population, we are experiencing higher rates of caregiver burn out and more and more individuals needing institutionalized care.

Eighty-four percent of Ontarians support home and community care as an alternative to institutionalized health care. Not only is this the preferred choice for Ontarians; it is also the most cost effective and sustainable choice for our health-care system. In Ontario, home care costs are approximately \$45 per day compared to long-term care at \$135 per day and hospital care at \$450 per day. (Ontario Association of Community Care Access Centres, 2014)

Georgian Village was designed to offer an entire continuum of home and community care services using the preferred and the most cost-effective model of service delivery to help support residents and their caregivers so that they continue to age in place. Please refer to **Tables 3 and 4** below for costing details of the County's model compared to that of Ontario's three (3) options.

Table 3 – 2017 County of Simcoe Health-Care Costs

Campus Model - Average Per Diem Cost						
* Simcoe Village Supportive Housing \$30 / day						
Georgian Village	Affordable Housing	\$11 / day				
Georgian Village	Retirement Living	\$67 / day				
Georgian Village	Adult Day Program	\$22 / day				

^{*}Simcoe Village is smaller County of Simcoe seniors' campus that includes a supportive housing component with publicly-funded personal care in addition to the same services provided in the Affordable Housing model at Georgian Village.

Table 4 – 2014 Ontario Health-Care Costs

Average Per Diem Cost						
Hospital Bed	\$450 / day					
Long-Term Care Bed	\$135 / day					
Home Care	\$45 / day					

Ontario Association of Community Care Access Centres, 2014

In addition to the different service packages included with the various housing programs, a full range of services are available on an "a la carte" basis for residents to access directly within their own homes. These services include nursing and personal care, medication management, attendant care, meals, housecleaning, laundry, and transportation.

Supplemental to the services provided directly by County of Simcoe staff, this campus hosts a number of additional amenities on site that include physiotherapy, occupational and recreational therapy, dental, pharmacy, audiology, and medical services. This is further complemented by the operation of two Ontario Telemedicine Network (OTN) facilities that provide access to a full range of specialists that are available to residents within the campus and the local community.

An overarching component of these services is our ability to coordinate and customize care to ensure that any changes in the levels of service are provided for seamlessly and meet the unique needs of each individual. An additional benefit fundamental to this model is the element of continuity. The campus serves as a hub for a broad range of resources and service providers that ensures consistency and continuity and develops positive trusting relationships among clients.



5) Community Hub

The process of healthy aging suggests that there are five essential areas of functional ability for older adults that include: meeting basic needs; learning, growing and making decisions; being mobile; building and maintaining relationships; and contributing. Together, these abilities enable older people to retain their autonomy and health, age safely in a suitable and inclusive place, and continue to develop personally while contributing to their communities. Creating an environment that supports these needs and abilities is paramount in fostering healthy aging. (World Health Organization, 2015) Thus, the inclusion of a community hub in the development of a seniors' campus forms one of the cornerstones of this model.

At the heart of the Georgian Village campus is a community hub called the "Rendezvous". This community gathering place, akin to a small town centre, comes complete with a broad range of amenities that includes the Village Clinic (Family Health Team), pharmacy, hearing aid clinic, beauty salon, fitness centre, therapeutic pool and sauna, piano lounge/billiards, public library branch, woodworking shop, and multi-faith chapel. Our hub also includes the Rendezvous Bistro and Village Pub that operates as a full service, licensed restaurant, seven (7) days a week; that hosts weekly pub nights with entertainment, holds regular theme dinner events, offers catering services, and provides residents with access to retail groceries. In addition, our community hub showcases the work of local artists and offers a large auditorium that can be accessed as a meeting hall, host community events, and is ideal

for large family celebrations. This hub also includes smaller public meeting spaces, lounge areas and outdoor patios that encourage relaxation and social interaction. Georgian Village also offers an external membership program to seniors living off-site in the adjacent communities so they too can access the many indoor and outdoor amenities and enjoy the benefits of the central gathering place.

Lastly, as a fundamental component of our hub programming, Simcoe Strong is a volunteer program with a membership of more than 50 individuals at this location. This program offers a wide variety of volunteer opportunities for our seniors to encourage civic participation and promote a sense of purpose and wellbeing.

6) Partnerships and Collaboration

Achieving such personal triumph, in the words of Helen Keller: "Alone we can do so little; together we can do so much" captures another key element in the creation of a seniors' continuum of housing and services. The level of success for any campus development is dependent on the establishment of strong partnerships and collaboration. From the inception of this model, fostering and strengthening partnerships across a broad stakeholder group was a formative part of this process. Considering all levels of government, vital funding, required approvals, and partnered services; relationship building undoubtedly led to the immense success of this campus development.

At the federal level, the County partnered with the Seniors'



Secretariat to receive New Horizon funding (\$25,000) in order to create a sustainable intergenerational gardening program. This seed money led to the development of a community "greenhouse" on the new campus. The County also received \$2.8 million dollars from the Ministry of Municipal Affairs and Housing directed through a federal/provincial capital funding program to support the creation of 40 new affordable housing units.

Provincially, our 107 bed long-term care home received more than \$20 million in capital funding from the Ministry of Health and Long-Term Care to support the redevelopment of the home into a beautiful and more functional Class A facility.

These partnerships were further augmented with tremendous support from the North Simcoe Muskoka Local Health Integration Network (NSMLHIN) who approved and funded an additional 36 long-term care beds and a new level of service in the provision of convalescent care. During the planning phase, the NSM LHIN co-hosted partnership forums with the County that fostered a number of onsite collaborations that included the: co-location of the Victorian Order of Nurses and on-site programming: the delivery of meals on wheels in partnership with the Canadian Red Cross; the provision of equipment and campus-wide access to the OTN with a broader community outreach component; and an enhanced partnership with Georgian College that led to the establishment of a new satellite part-time Practical Nurse program hosted at Georgian Village. In addition, the NSM LHIN provided one-time funding for the purchase of a 16-passenger accessible van and several small multi-passenger shuttles.

As a regional level of government, the last, but certainly not

least of our government relations focused on our local municipal partner; the Town of Penetanguishene. Working together throughout the project, the Town provided a spectrum of support that ranged from such things as signage approvals, building permits and inspections, to the waiving of development charge fees, connecting local pedestrian, bus routes and municipal trail systems, and the establishment of an on-site fully resourced Library branch.

In addition to all levels of government, the County fostered many other partnerships in achieving an entire continuum of services. Working with our attending and local physicians, a Family Health Team was established on site by a lead physician as a significant component of this model. Initially operating with two (2) physicians and a nurse practitioner, the Village Clinic offers improved access to primary care, lends itself to house calls when needed, utilizes OTN to access other health-care specialists, and has the capacity to double their services in future.

As noted previously, the expansive list of services outlined within the Community Hub section, is a direct consequence of strengthening existing and forging new partnerships to improve access through a "one-stop shopping" concept. Having access to a host of paramedical supports and essential services such as lab and pharmacy, ensures seniors have timely and accessible care to maintain their optimal level of health.

Further, a natural extension of this environment has been the provision of Health and Wellness Clinics that facilitate client education focused on health promotion in such key areas as chronic disease management, nutritional care, healthy living,



exercise, and medication management. Other areas of focus include health and wellness clinics and nursing and paramedic student placements in partnership with local community colleges and training facilities.

7) Seniors Outreach

The next principle included in this model focuses on the campus' ability to extend beyond its own footprint to support seniors within the neighboring community. As we know, transportation can have a significant impact on seniors. As people get older, age-related changes in vision, reaction time, power, coordination and the speed of cognitive processing, can all have an effect on driving ability. (The Chief Public Health Officer's Report, 2010) This coupled with changes in financial circumstances, can often lead to seniors becoming dependent on public transit and/or family and friends to access the community for their basic needs, health services and social experiences.

With the provision of recreational memberships, a full range of nursing and personal care services, Meals on Wheels, Ontario Telemedicine, and Adult Day Programs, this model extends services on a much broader scale to seniors in the surrounding community with either residents coming on site to access our services and amenities or by facilitating the delivery of services directly into their homes. To assist with access, the County provides regular transportation to key locations in the community, has partnered with the local municipality in the development

75-80%

of all home care is provided by informal, unpaid caregivers.

of a new public transit system that provides front door service, and collaborates with independent transit providers to support individuals needing transportation to the Adult Day Program.

8) Age-Friendly Community

The final doctrine essential in creating a successful campus continuum for seniors is the application of age-friendly community planning. As noted earlier, our *National Seniors Strategy* purports that age-friendly design of our communities and physical settings is an important component in creating a healthy aging environment.

An Age-Friendly Community (AFC) is a place that encourages "active aging" by optimizing opportunities for health, participation and security in order to enhance quality of life as people age. In 2007, the World Health Organization (WHO) conducted a comprehensive study of older adults that identified eight key dimensions that are central to creating an Age-Friendly Community. These include: outdoor spaces and buildings; transportation; housing; social participation; respect and social inclusion; civic participation and employment; communication and information; and community support and health services. (WHO, 2007) Thus, with this recent research and an improved understanding of what's important to older adults, including the eight principles of AFC is an essential component in the creation of any seniors' campus development. Age-friendly communities recognize the wide range of capabilities among older people, and anticipate and respond to their needs and preferences.

With Georgian Village, this setting embraces many of the AFC qualities offering: an accessible age-friendly continuum of housing, public amenities and outdoor spaces; active lifestyle activities, recreation and amenities; options for transportation off-site as well on-boarding of seniors from the surrounding community; an age-friendly philosophy that values, respects, and supports our older adults; opportunities for volunteerism; regular communication tools and information forums and; a full suite of services to support their health and daily living needs.



Section 3 – Business Plan Development

Having defined the leading principles in creating a seniors' campus continuum, the next section of this paper speaks to the criticality of having a well formulated business plan. Central to its success, particularly one of this magnitude and complexity, is the establishment of basic criteria and conditions at the front end of this development process. Business plan development consists of a range of key elements that may include: a project description, objectives, situational analysis, operating and human resource plans, cost-benefit analysis, risk assessment, qualitative analysis, pro forma financial statements, and an implementation strategy. To assist organizations considering a seniors campus development, this section expands on two elements that were instrumental to the development Georgian Village and are highly recommended for consideration.

These focus on the formulation of meaningful and achievable project objectives along with the completion of a comprehensive situational analysis as outlined below.

Objectives

At the outset, the County established a number of prudent objectives. As a government organization and stewards of regional services, identifying significant deliverables that will benefit the community was an inherent part of the business case development. The five objectives identified were intended to: 1) Increase seniors housing capacity; 2) Promote aging at home; 3) Strengthen operational sustainability; 4) Boost the local economy; and 5) Maximize capital funding opportunities for the project.

Objective 1 – Increase Housing Capacity

The first objective focused on increasing local housing capacity for seniors. This was achieved by expanding the original 107 unit long-term care home to a 282 unit campus continuum that now houses approximately 320 seniors within five different types of housing. With the opening of the campus, wait lists and wait times for LTC and affordable housing decreased. The campus achieved full tenancy within the first year and continues to operate with a very high occupancy. However, with the continued growth of an aging demographic, wait list demand and associated wait times have begun to creep back up as illustrated under **Table 5** below. LTC applicants seeking basic accommodation for example, are now waiting more than two (2) years for a bed.

Table 5 – Georgian Manor Wait List Data

	Wait List	Wait Time
FISCAL YEAR	As of December 31	Years
2012	159	0.92
2013	136	0.98
2014	126	0.73
2015	176	0.76
2016	213	2.25

North Simcoe Muskoka LHIN (2017)

Objective 2 - Promote Aging at Home

The next objective focused on promoting an aging-athome environment that fosters healthy aging and supports the changing needs of older adults so that they can remain independent in their home as they continue to age. This campus is complete with a wide range of amenities, a continuum of housing options, and a suite of services that encourages social engagement, active living, and ensures supports are available as needed. Since opening in the fall of 2013, the campus has observed a minimal turnover rate of less than 2% annually. Of the residents living in community housing, approximately 30% access additional services offered on site and more than 90% participate in our social and/or recreational programming.

seniors housed within five different types of housing



Objective 3 – Increase Sustainability

The third objective focused on increasing the sustainability of County operations by reducing the County's municipal subsidy for the long-term care home and increasing annual reserve contributions to support ongoing asset maintenance and reinvestment in services. As a result of economies of scale and operational efficiencies realized with an additional 36 long-term care beds and an expanded campus setting, the municipal tax levy for Georgian Manor decreased substantively. Owning the largest annual subsidy of the County's four homes as high as \$1.1 million, post-redevelopment Georgian Manor became the most efficient home with a reduced subsidy of \$468,000. This was further complemented with an increase in annual reserve contributions by more than five times its former amount at outlined in **Tables 6 and 7** below.

Table 6 – County of Simcoe Long-Term Care Homes Budget Levy \$000s

LTC Home	2010	2011	2012	2013	2013 Per Diem	2014	2014 Per Diem
Georgian Manor	921	1,136	1,070	532	\$11.65	468	\$8.97
Simcoe Manor	52	602	737	551	\$11.97	608	\$13.22
Sunset Manor	319	523	526	514	\$9.39	652	\$11.90
Trillium Manor	623	499	653	698	\$15.67	698	\$15.68
TOTAL	1,915	2,760	2,987	2,295	\$12.02	2,426	\$12.28

Table 7 – County of Simcoe Annual Long-Term Care Reserve Contributions \$000s

2006	2007	2008	2009	2010	2011	2012	2013	2014
75	103	99	161	97	57	100	423	526

Objective 4 – Economic Development

As a significant employer in the local community, the next objective was aimed at strengthening the local economy. An additional 45 new jobs were created increasing the local economic impact by \$3.6 million annually. Refer to details in **Table 8**.

Table 8 – County of Simcoe Economic Benefits

Time Line	Combined Impact	FTEs	Wages	Multiplier 0.46 Total Community Impact		Indirect FTE Jobs
2012	Georgian Manor	87.1	\$ 4.4 M	0.46	\$ 6.42 M	40.0
2013	Campus	132.0	\$6.89 M	0.46	\$ 10.05 M	60.6





Objective 5 – Optimize Capital Funding

The final objective was to maximize funding opportunities to support this capital project. With this in mind, extensive consultations took place with numerous stakeholders over a period of several years in order to secure funding. As a result, the County obtained funding from: a federal program; two provincial ministries; the North Simcoe Muskoka LHIN; community donations; and other sources to capture 80% of all project costs. Refer to **Table 9** for details.

Table 9 – Georgian Village Capital Funding Plan

FUNDING SOURCE	\$	CUMUL. TOTAL	% OF GOAL
MINISTRY OF HEALTH and LONG-TERM CARE (Phase 1)	\$14.2M	\$14.2M	18%
MINISTRY OF MUNICIPAL AFFAIRS AND HOUSING	\$2.8M	\$17.0M	21%
NORTH SIMCOE MUSKOKA LHIN – (Phase 1)	\$4.7M	\$21.7M	27%
DEVELOPMENT CHARGES	\$22.8M	\$44.5M	55%
SIMCOE COUNTY LONG-TERM CARE RESERVE	\$7.8M	\$52.3M	65%
LIFE LEASE SALES	\$5.7M	\$58.0M	72%
GEORGIAN MANOR SALE	\$1.0M	\$59.0M	73%
SALES CENTRE/MISCELLANEOUS	\$0.1M	\$59.1M	74%
FUNDRAISING	\$.807M	\$59.9M	75%
75%			
MINISTRY OF HEALTH and LONG TERM CARE (Phase 2)	\$4.0M	\$63.9M	80%
80%			
MUNICIPAL	\$16.40	\$80.3M	100%

Situational Analysis

In addition to setting key objectives, an important part of the business plan is completion of a situational analysis. This process examines the organization's internal and external environment to better understand their own capabilities, customers, business environment, and opportunities for success. In undergoing this process, the County examined areas that can be best articulated within the 5C Analysis framework. These areas focused on our company, competitors, customers, collaborators, and industry climate.

Company

First, in review of our company, staff examined areas such as past performance, corporate strategic planning fit, and financial capacity to undergo a significant capital project and expanded operations. Drawing on an extensive history of serving seniors, lengthy wait lists and first choice ranking; this longstanding reputation in service excellence provided the initial impetus to consider expanding this aspect of our business model.

This plan was further supported through alignment of three (3) of the Corporation's strategic directions that include the following:

- 1. Growth-related Service Delivery create and strengthen partnerships with key stakeholders to support communities through the delivery of sustainable services;
- Strengthening Social, Health, and Educational Opportunities – establish partnerships to identify opportunities for strengthened human services and education to support improved health and well-being of our residents; and
- Economic and Destination Development create and strengthen partnerships with key stakeholders to develop economic opportunities in response to the changing demographics.

In review of our organization's financial ability to support this project, with reserve funds in place, significant debt capacity, development charge revenue, and an excellent credit rating; the County of Simcoe was well positioned to move forward with such an initiative.

Competitors

Having previous experience providing many of the housing options encompassed within the proposed project scope, projected growth in the aging demographic, extensive wait lists for long-term care and affordable housing, and a market analysis confirming the need for additional seniors' housing, our initial review of potential competition was unremarkable.

However, as the project moved forward with initial planning approvals, the County quickly faced opposition from private enterprise disputing the inclusion of a "retirement home" as one of the newest elements in municipal housing alternatives. As a consequence, additional resource time and attention was required to re-substantiate the business case and validate for the public and a relatively new municipal council. The 42-unit retirement home remained a viable part of the campus development, as originally planned, and continues to operate successfully within this campus setting. Learning from this

experience, it is highly recommended that a competitor analysis is completed for each specific housing element to help anticipate, prepare for, and possibly prevent challenges such as this.

Customers

Understanding customer needs forms a vital part of any situational analysis. To complete this, a wide range of activities were conducted that included client surveys, focus groups, informant interviews, public and government consultations, environmental scans, review of local socio-economic factors, growth considerations, and contracting professional expertise to complete a formal market study. This was further augmented with the creation of a project steering committee comprised of more than 30 internal and external stakeholders that assisted to inform decision making and ensure ongoing feedback throughout the development.

As a result of these processes, building features, amenities, and functional components were included in the design phase, adjustments in housing prices were applied at various milestones, and market rentals were introduced post occupancy in response to rising demand.

In addition to the many activities associated with a fulsome needs analysis, the necessity for ongoing communication and marketing with the public and local community was paramount to the success of this project. Having regular mechanisms in place to both disseminate and receive information from stakeholders fostered a culture of inclusiveness and was foundational in achieving full occupancy and customer satisfaction with the implementation of this new model.



Collaborators

Again, collaboration with many business partners, including internal and external stakeholders, was instrumental in achieving the expansive latitude of housing and programs included as part of this continuum as well as in securing crucial resources to ensure the financial viability of this project. As noted earlier under the Collaboration and Partnership portion of this paper, the County forged significant relationships with government, public and private agencies, community interest groups, clients, media, and local residents in bringing this vision to life.

With increased public interest and awareness of the needs of this vulnerable population, also grew an increased disposition to provide support for local development by contributing to a community fundraising campaign. Georgian Village raised \$807,000 as part of the overall project as a result of the generosity of our local residents and many partnered agencies.

As a regional level of government, capitalizing on the strengths of our internal support departments provided significant fortitude in such areas as housing, Information Technology (IT), Finance, Procurement, Fleet and Property, Communications, Planning, Roads, Forestry and By-law, Library, Emergency Management, Paramedicine, and Long-Term Care and Seniors Services.

Involving a broad spectrum of collaborators in the business plan generates financial and operational support, builds capacity, enhances communications, expands service options, and lends significant credibility to the overall concept.

Business Climate

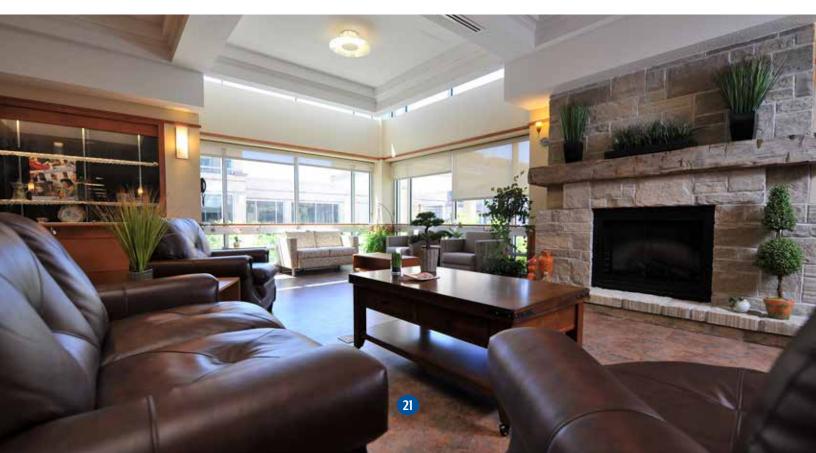
The final, and equally important constituent of this analysis, considers the business climate associated with the plan. First looking at the political and regulatory environment, there were a number of critical policy changes occurring at the federal and provincial levels of government that set in motion ideal conditions to move forward

with this project. In 2007, the province introduced the *Long-Term Care Home Renewal Strategy* (Phase I) to support the redevelopment of level "B" and "C" LTC beds to begin in 2009. This was coupled with a federal/provincial capital incentive program to facilitate more affordable housing units.

Locally, experiencing above average growth rates, increased housing demand, and escalating rates of Alternate Level of Care (ALC) patients in hospitals, the LHIN also became a tremendous source of support funding additional long-term care beds, bringing community partners to the table, and authorizing a broader range of County services with Georgian Manor becoming the regional lead for a Behavioral Support Services mobile team and introducing convalescent care in the new home.

In looking at the economic environment, a stable economy, declining inflation, low interest lending rates, and additional financing opportunities through CMHC aligned support for this project. Similarly, in review of the socio-cultural situation, a global trend in the proliferation of an aging population, often referred to as the "grey tsunami", and heightened awareness set the stage for strategic planning and massive reform to address the intensifying needs of this demographic.

The last area focused on a technical analysis in understanding our business climate. The intent was to improve on previous ways of doing business and to identify new methods of being more cost effective. With additional strain on our health-care system, funding reductions, and an overarching theme espousing the need to do more with less; this was a critical driver of our analysis and project feasibility. Thus, campus design contemplated efficiencies based on economies of scale, bulk purchasing, competitive services and fee structures, partnerships, centralized resource management, and green principles. An operational pro forma was developed to detail all revenues and expenses and construct a sustainable business model.



Section 4 – Conclusion

Moving Toward a New Generation of Seniors' Care

In summary, this paper was generated to set the stage for more informed, engaged, and exciting conversation about campus developments as we move toward a new generation of seniors' care.

Municipalities and not-for-profit organizations are renowned for their leadership in seniors care and possess the key elements essential in building a successful campus continuum that will forever change the way we deliver housing and services to our seniors.

Playing a pivotal role in the implementation of this model, municipalities will not only build significant housing capacity for their communities, but will be able to lower their municipal levy impacts and reduce their annual operational costs providing better and enhanced services.

better understanding of the complex issue before us and more importantly, provide our not-for-profit sector with the necessary tools and a clearer understanding of the significance of their leadership role in seniors' care.

The County of Simcoe calls on our many partners to seek out solutions and be leaders in the creation of more integrated housing and care models that will support our seniors and provide them with the comfort and security that they require and deserve.

With such a fast-growing aging demographic, coupled with complex care and housing needs; the time for action is now.



References

Alliance for a National Seniors Strategy (2016). An Evidenced-Informed National Seniors Strategy for Canada; 2nd Edition. Retrieved from https://cnpea.ca/images/national-seniors-strategy-second-edition_jan2016.pdf

Association of Municipalities of Ontario. (2016). Strengthening Age-Friendly Communities and Seniors Services for 21st Century Ontario: A New Conversation about the Municipal Role.

Canadian Medical Association (2017). Improving the Health of All Canadians: A vision for the future. Retrieved from https://www.cma.ca/En/Lists/Medias/improving-the-health-of-all-canadians-a-vision-for-the-future.pdf

Federal/Provincial/Territorial Ministers Responsible for Seniors (2006). Age-Friendly Rural and Remote Communities: A Guide. Retrieved from http://www.phac-aspc.gc.ca/seniors-aines/alt-formats/pdf/publications/public/healthy-sante/age_friendly_rural/AFRRC_en.pdf\

Federation of Canadian Municipalities (2013) – Canada's Aging Population; The Municipal Role in Canada's Demographic Shift. Retrieved from https://fcm.ca/Documents/reports/FCM/canadas_aging_population_the_municipal_role_in_Canadas_demographic_shift_en.pdf

Federation of Canadian Municipalities (2013). Canada's Aging Population: The Municipal Role in Canada's Demographic Shift. Federation of Canadian Municipalities Quality of life reporting System. Retrieved from https://fcm.ca/Documents/reports/FCM/canadas_aging_population_the_municipal_role_in_Canadas_demographic_shift_en.pdf

Federation of Canadian Municipalities (2015). Seniors and Housing: The Challenge Ahead. Retrieved from https://www.fcm.ca/Documents/reports/FCM/Seniors_and_Housing_Report_EN.pdf

Government of Canada (2010). The Chief Public Health Officer's Report on the State of Public Health in Canada 2010: Growing Older – Adding Life to Years. Retrieved from http://www.phac-aspc.gc.ca/cphorsphc-respcacsp/2010/fr-rc/pdf/cpho_report_2010_e.pdf

Government of Canada: Canada Mortgage and Housing Corporation (2016), Let's Talk Housing-What We Heard; Shaping Canada's National Housing Strategy, Analysis of consultation feedback, The Conference Board of Canada. Retrieved from https://www.letstalk-housing.ca/pdfs/what-we-heard.pdf

Government of Ontario (2012): Ontario's Action Plan for Health Care; Better patient care through better value from our health care dollars. Retrieved from http://health.gov.on.ca/en/ms/ecfa/healthy_change/docs/rep_healthychange.pdf

Institute for Research on Public Policy. (2015-10-07). Designing a National Seniors Strategy for Canada, IRPP Task Force on Aging. Retrieved from http://irpp.org/wp-content/uploads/2015/10/report-2015-10-07.pdf

J Am Geriatr Soc. Author manuscript (2015). United States Centre for Disease Control. Healthy Aging Program. Retrieved from stacks.cdc. aov/view/cdc/33869/cdc_33869_DS1.pdf

Keller, Helen (n.d.) quote used in speeches.

Martel, Laurent and Ménard, France-Pascale (2011). Centenarians in Canada: Age and sex, 2011 Census. (Statistics Canada). Retrieved from http://www12.statcan.gc.ca/census-recensement/2011/as-sa/98-311-x/98-311-x2011003_1-eng.pdf

Ministry of Health and Long-Term Care. (2007). Long-Term Care Home Redevelopment. Retrieved from http://www.health.gov.on.ca/en/pro/programs/ltcredev/ltchrs.aspx

Ministry of Municipal Affairs and Housing. (n.d.) Investment in Affordable Housing for Ontario Program - Ontario Renovates Component and New Affordable Housing Program - Rental and Supportive Housing Component

National Seniors Strategy (n.d.). Ensuring Older Canadians have Access to Appropriate, High Quality Home and Community Care, Long-Term Care, Palliative and End-of Life Services, National Seniors Strategy Evidence Brief. Retrieved from http://nationalseniorsstrategy.ca/the-four-pillars/pillars/pillars/access-to-services/

National Seniors Strategy Evidence Informed Policy Brief (2017). Make Addressing Ageism, Elder Abuse and Social Isolation a National Priority. Retrieved from http://nationalseniorsstrategy.ca/the-four-pillars/pillar-l/addressing-ageism-elder-abuse-and-social-isolation/North Simcoe Muskoka Local Health Integration Network. (2017)

Office of the Chief Actuary (2014). Mortality Projection for Social Security Programs in Canada. Retrieved from http://www.osfi-bsif.gc.ca/Eng/Docs/mpsspc.pdf

Ontario Association of Community Care Access Centres (October 2014). Making Way for Change: Transforming Home and Community Care for Ontarians. Retrieved from http://www.longwoods.com/articles/images/OACCAC-Whitepaper-FINAL.pdf

Sinha, Maire and Bleakney, Amanda (2014). Government of Canada: Statistics Canada Analytical Paper: Receiving care at home. Retrieved from http://www.statcan.gc.ca/pub/89-652-x/89-652-x2014002-eng.pdf

Statistics Canada (2006-2011) Census.

Statistics Canada (2016). Census Program – Data Analytics. Retrieved from http://www12.statcan.gc.ca/census-recensement/2016/dp-pd/hlt-fst/as/Table.cfm?Lang=E&T=II

Statistics Canada (2016). Census Program. Retrieved from http://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/index. cfm?Lang=E

Statistics Canada (2016). Census Program; Dwelling Type, Age and Sex for the Population in Occupied Dwellings (table). Statistics Canada Catalogue no. 98-400-X2016021

Turcotte, Martin. Statistics Canada (September 2014). Insights on Canadian Society. Canadians with Unmet Home Care Needs. Retrieved from http://www.statcan.gc.ca/pub/75-006-x/2014001/article/14042-eng.pdf

Williams et al (2016). Institute of Research on Public Policy. Integrating Long-Term Care into a Community-Based Continuum: Shifting from "Beds" to "Places". Retrieved from http://irpp.org/wp-content/uploads/2016/02/study-no59.pdf

World Health Organization (2003). The Social Determinants of Health: The Solid Facts-Second Edition. Retrieved from http://www.euro. who.int/ $_$ data/assets/pdf_file/0005/98438/e81384.pdf

World Health Organization. (2007). Global Age-Friendly Cities: A Guide. Retrieved from http://www.who.int/ageing/publications/Global_age_friendly_cities_Guide_English.pdf

World Health Organization. (2015). World Report on Ageing and Health. Retrieved from http://apps.who.int/iris/bitstre am/10665/186463/1/9789240694811_eng.pdf?ua=1

World Health Organization. Constitution of the World Health Organization Principles (1946). Retrieved from http://who.int/about/mission/en/





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