



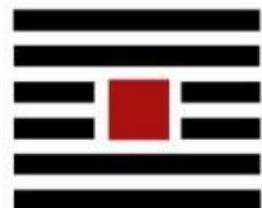
EDMONTON
SENIORS
COORDINATING
COUNCIL

Helping Seniors Age in Place

*A Strategic Framework to Improve Outreach to
Edmonton's Isolated and/or At-Risk Seniors*

An Edmonton Seniors Coordinating Council Collaboration

October 2010



Mark Holmgren Consulting
building capacities for new visions

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Helping Seniors Age in Place

A Strategic Framework to Improve Outreach to Edmonton's Isolated and/or At-Risk Seniors

Please note: This report is a strategic document that recommends an overall framework for the delivery of outreach services to isolated and/or at-risk seniors across Edmonton. As such, it does not yet address making the strategy operational.

The hope is to create sufficient interest in and support of the strategy to mobilize efforts to move to the implementation stage. Once that interest and support is in place, the Edmonton Seniors Coordinating Council will coordinate the development of work plans and timelines with its members and aid in the promotion and coordination of this enhanced outreach service.

Helping Seniors Age in Place

A Strategic Framework to Improve Outreach to Edmonton’s Isolated and/or At-Risk Seniors

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The Edmonton Seniors Coordinating Council (ESCC)

The ESCC was established in 2004 as a communication hub for the senior-serving sector. ESCC helps agencies and stakeholders plan and collaborate to improve programs and services for Edmonton’s aging population. We provide education and representation on key issues related to community supports, diversity, fitness and recreation, personal safety, transportation and health and wellness.

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Helping Seniors Age in Place

A Strategic Framework to Improve Outreach to Edmonton's Isolated and/or At-Risk Seniors

EXECUTIVE SUMMARY

The purpose of the collaborative initiative that produced the content for this report was to recommend a strategic framework for the delivery of a **made-in-Edmonton model for city-wide access to outreach services to isolated and/or at-risk seniors**.

Fourteen (14) senior serving organizations, along with a representative from City of Edmonton FCSS and from the Edmonton Seniors Coordinating Council, participated in five strategy sessions.

These sessions were supported by a significant body of research undertaken by the Edmonton Seniors Coordinating Council, City of Edmonton Community Services, and others; consultations with seniors and service providers and the breadth of experience of those who sat around the collaborative table.

Highlights of the *Helping Seniors Age in Place* strategic framework are:

Common Definition of Outreach

For purposes of this initiative, outreach is defined as *a service delivery model that aims to improve accessibility of services to seniors. It involves outreach workers providing a set of services to seniors in their homes, a centre or elsewhere in the community.*

Characteristics of an Isolated and/or At-Risk Senior

An *isolated senior* (also considered to be at-risk) is 55 years of age or older and typically has one or more of the following characteristics:

- Presents complex needs or circumstances that any single organization may not be able to address.
- Typically unable to address needs on his or her own.
- Has limited or no contact with family and friends.
- Lacks a support system.
- Unaware of what help is available.
- Lacks transportation or is unable to use public transportation.
- Lacks sufficient finances.
- Isolation is involuntary.

Outcomes

At the onset of this project, the participants did not have an explicit set of common outcomes to reference.

A review of a draft set of outcomes from City of Edmonton FCSS and of the outcomes that guide a similar outreach service in Calgary helped the group identify the following:

- ✓ **More seniors in our community are aware of and able to access services** that successfully meet their needs and aspirations, including financial, informational, home support, cultural, physical, medical, and psycho-social.
- ✓ **An increased number of seniors participate** in educational, supportive and preventative programs.
- ✓ **Seniors in our community experience decreased isolation** for reasons that include language and cultural barriers, financial condition, disability, and mental and physical barriers.
- ✓ **There is increased community awareness** of and support for services that are available to seniors.
- ✓ **There is an increased number of referrals** to community services on behalf of seniors.
- ✓ **Community education about aging increases awareness** of the negative impact of ageism in our society.

Core Outreach Services

To facilitate equitable access to city-wide outreach services, the following services were identified as Core Outreach Services:

Case Finding

Isolated seniors do not typically seek assistance. An outreach service with a focus on such seniors must be proactive about finding them through

liaisons with landlords, businesses, health professionals, etc.

Assessment Services

Assessment is the linchpin of outreach services. It is client-centred and sets the stage for everything to follow. It identifies a senior's circumstances, her or his living situation, health challenges or conditions, mobility issues and generally the senior's overall strengths and challenges.

Information and Referral

Services include linking seniors to community resources that will meet their needs. The outreach worker's degree of involvement can range from arranging an appointment to accompanying the senior to the appointment and being involved in further services as required.

Case Management

The need for case management is determined through the assessment process and becomes necessary when the work with a senior will be ongoing. It involves the following: holistic care planning, the identification of goals/outcomes, the development, implementation and monitoring of a Care Plan, and ongoing documentation.

Service Development and System Advocacy

One of the measures of an effective outreach service system is the extent to which what is learned on the front line translates into systems change for the betterment of clients.

Community Engagement / Community Building

The needs and challenges facing seniors are the community's to address. A city-wide outreach program for seniors should deploy community development techniques to create awareness and mobilize community interest and support for seniors.

Proposed Structure

While participants acknowledged the service gaps and challenges related to providing equitable outreach services to seniors throughout Edmonton, they concluded that Edmonton seniors would be best served by the current member organizations of the Edmonton Seniors Coordinating Council and other organizations (in particular multi-cultural groups that serve seniors) joining together to **collaborate on offering core outreach services to Edmonton's isolated seniors, which would include, but not be limited to:**

- ✓ **Establishing Terms of Reference for how collaborating organizations will work together** to develop, deliver and measure outreach services.
- ✓ **Creating a mutually agreeable set of standard forms, tools and resources** such as an outreach manual that would support outreach services.
- ✓ **Identifying a mutually agreed upon range of qualifications** which would be appropriate for outreach staff. It was agreed that flexibility was necessary given that ESCC members' hiring criteria and practices have been built to address the needs of their clients, as well as the culture and resources of their respective organizations. Also, grassroots and multi-cultural organizations that may join the collaborative will have varied practices around the hiring of staff, which should be respected.
- ✓ **Developing centralized training opportunities** for outreach staff and volunteers.
- ✓ **Coordinating education about challenges and issues facing seniors** as well as promotion of the collaborative approach to outreach service.
- ✓ **Reviewing current service boundaries**, given that there are areas in Edmonton that currently do not have a senior centre or an outreach service.
- ✓ **Exploring the use of common data collection and reporting methods.**
- ✓ **Jointly presenting/sharing output, outcome and process information with stakeholders** to raise awareness about issues and the need for support to the individual organizations to continue to offer and expand the service.
- ✓ **Exploring the establishment and promotion of effective communication methods** to access seniors outreach services.
- ✓ **Exploring how the collaborative network can best address the needs of seniors that require specialized services.**
- ✓ **Facilitating the expansion of a collaborative network** to include other outreach or related services.

SUPPORTING ORGANIZATIONS

Calder Seniors Drop-In Society

Edmonton Meals on Wheels

Edmonton Seniors Centre

Elder Care Edmonton

Edmonton Seniors Coordinating Council

Mill Woods Seniors Centre

Multicultural Women and Seniors Services
Association

Native Seniors Centre

Operation Friendship Seniors Society

Seniors Association of Greater Edmonton
(SAGE)

Seniors Outreach Network Society

South East Edmonton Seniors Association
(SEESA)

Seniors Assisted Transportation Society

Strathcona Place Senior Centre

Westend Seniors Activity Centre

City of Edmonton Community Services, FCSS Liaison

Helping Seniors Age in Place

A Strategic Framework to Improve Outreach to Edmonton’s Isolated and/or At-Risk Seniors

1.0 INTRODUCTION

In 2007, City of Edmonton’s Community Services commissioned a study that resulted in the publication of a report called *Aging in Place: A Neighbourhood Strategy*. The report identifies a wide range of challenges facing seniors today and to come in the future; it goes on to recommend a comprehensive set of actions to address the challenges.

Overall, the Aging in Place strategy represents *a vision of our community where seniors are engaged and visible in their neighbourhood and are receiving the help they need to prevent them from becoming socially isolated.*

One of the major recommendations is to “expand the use of outreach or community workers to identify shut-in seniors.”

While the entire study is an excellent backdrop to this report, we have drawn from it to highlight those specific themes in *Aging in Place** that relate directly to the development of a strategy to deliver outreach services to isolated and/or at-risk seniors city-wide. The table below lists key themes from *Aging in Place* on the left and implications for outreach services identified through this project on the right.

<i>Aging in Place</i> Themes/Recommendations	Implications
<i>Transportation is the foremost factor affecting social isolation. Seniors need information about programs and services and help to navigate the system. However, no single source of information is available.... Make information on programs and services available in easy to obtain and understand formats and in other languages.</i>	Outreach workers can help seniors coordinate transportation and/or provide it when indicated. One of the core services of outreach is the provision of information and referrals and help with navigating various support systems. As well, the recommended outreach model in this report recognizes the importance of offering services that address the needs of multi-cultural populations.
<i>Seniors need more help with personal care, housekeeping and meal preparation than they currently receive. Regular contact with people who can provide this care would reduce social isolation and thereby risk.</i>	Often, seniors and their families do not know of all the options available to them in terms of getting these kinds of basic services. Outreach services can assist with making seniors aware of their choices and linking them with relevant, affordable services.
<i>Train residents to identify signs that seniors in the neighbourhood are at risk.</i>	The core services identified later on in this study include community engagement that goes beyond systems and agencies to include businesses, neighbourhood groups and leaders, and volunteers in the development and sustainability of an age-friendly community.
<i>Encourage multi-disciplinary teams of medical professionals to work together in providing care to seniors... Improve coordination of information between healthcare professionals and seniors.</i>	The core elements of the recommended outreach service include Case Management. That role, along with the role of Service Development and System Advocacy, is fundamental to delivering better coordinated health and other services to seniors.

*Note: the *Aging in Place* themes were taken from pages ii and iii of the document.

Since the release of *Aging in Place*, the Edmonton Seniors Coordinating Council and its members have engaged in dialog and undertaken additional work to better understand the needs and aspirations of seniors (in particular isolated or at-risk seniors) and how outreach services can help mitigate isolation and risk for Edmonton's aging population. Work undertaken or reviewed by the ESCC includes:

When	Title	Author(s)
2008	<i>2008 Seniors Needs Assessment.</i> In 2008, Banister Research was contracted by the City of Edmonton to conduct the 2008 Seniors Needs Assessment. The intent of the survey was to gather a clear and accurate representation of the services that are most helpful to seniors, the services that need improvement, and the priorities and opportunities in the provision of services to seniors in Edmonton.	Bannister Research
12/08	<i>Mobilizing for Action: A Report to Help Create Culturally Responsive Pathways for Isolated Immigrant Seniors.</i> A summary of the current research, literature, statistics, consultations, good practices, and cultural and special issues relevant to immigrant and refugee seniors in the Edmonton area.	ESCC & Various Authors
6/09	<i>Outreach Services Survey</i> In spring of 2009 the ESCC surveyed outreach workers in their membership. A focus group was held in July 2009 with these outreach workers along with representatives of the City of Edmonton to review the survey results and identify issues, gaps and strengths related to their work.	ESCC
12/09	<i>Outreach Services to Older People: A Literature Review</i>	ESCC
12/09	<i>Improving Outreach to Edmonton's Isolated Seniors</i> The project was undertaken on behalf of the ESCC and was based on 31 interviews with seniors considered isolated that were 55 years of age or older and 18 interviews with outreach workers from seniors centres and cultural agencies that serve seniors.	Cheryl Klassen
2/10	<i>Outreach Assessment Project Meeting at SEESA</i> Representatives from 11 organizations including the City of Edmonton and the Glenrose Hospital met to discuss the scope of current practice undertaken by City of Edmonton and hospital outreach workers.	ESCC

The ESCC's evidence-based approach to understanding the issues and challenges facing an aging population and its commitment to optimal engagement of seniors, service providers, and funders led to an application to New Horizons for Seniors Program for funding (2009) to develop a strategy focused on **designing a made-in-Edmonton model for city-wide access to outreach services to isolated seniors.**

In April 2010, ESCC contracted with Mark Holmgren (Mark Holmgren Consulting) to design, deliver, and report on a series of five strategy workshops undertaken by ESCC members involved in the delivery of outreach to seniors.

Fourteen seniors-serving organizations, along with a representative from City of Edmonton FCSS and the Edmonton Seniors Coordinating Council, participated in the sessions (see appendices for full list). This report is based on those strategy workshops.

2.0 VISION & GUIDING PRINCIPLES *

The Edmonton Seniors Coordinating Council works to achieve the following vision and guiding principles, upon which the development of this strategic framework was based.

Vision

Edmonton is a community that values, respects and actively supports the safety, diversity and well-being of seniors.

Guiding Principles

- ✓ Society has a responsibility to ensure the basic needs of seniors are met.
- ✓ Seniors have the right to choose where and how they live as long as they don't pose a risk to others.
- ✓ Seniors have the right to feel safe in their homes and communities.
- ✓ As seniors age, their needs may change and services can adapt to meet these changing needs.
- ✓ Services are accessible, affordable, equitable and comprehensive to address a wide range of needs.
- ✓ Seniors' access to needed services will not be limited by ability to pay.
- ✓ Services will be inclusive and respect diversity; they will be responsive to cultures, varied English language skills, marginalized individuals and persons with disabilities.
- ✓ Programs and services will be based on best practices, research and innovation, and will be evaluated for their effectiveness.
- ✓ Programs and services will reflect the character of the community.
- ✓ Communities will be engaged in supporting seniors.

* Taken from the *Strategic Plan for Services to Edmonton Seniors: Towards 2015*; ESCC 2010

EDMONTON SENIORS DECLARATION

In June 2010, Edmonton's City Council declared that it will work towards making Edmonton age-friendly as part of its vision for an integrated, sustainable, liveable city.

The declaration states:

Individuals are respected regardless of age. All generations have much to teach and learn from each other.

People of all ages are safe in their homes and neighbourhoods. Safety has physical, environmental, financial and health aspects.

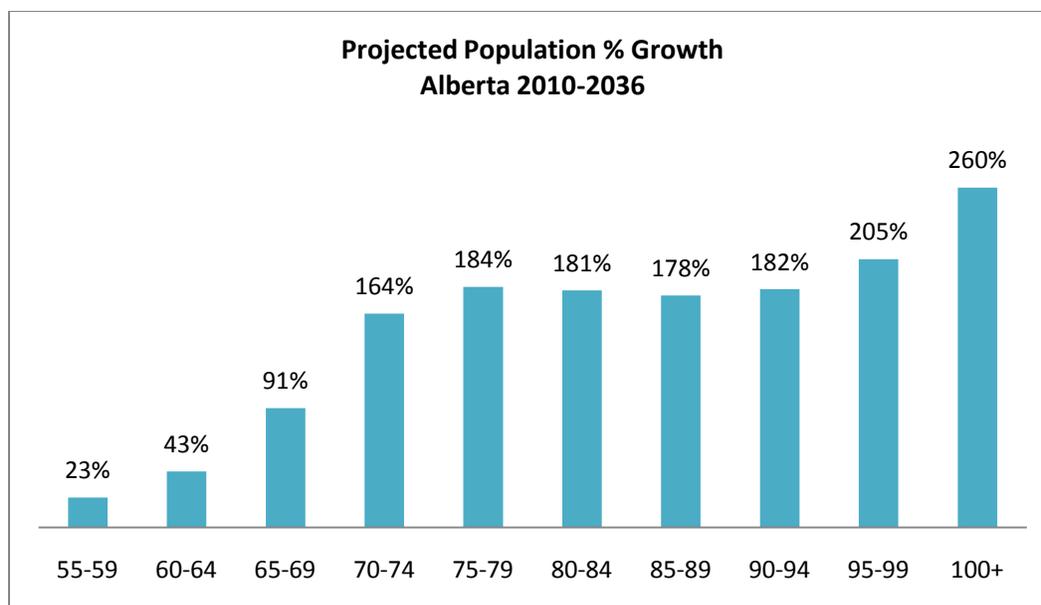
The city's transportation systems, urban design and physical infrastructure allow all people to participate in full lives. No one is barred by mobility or resources from involvement in city life.

Older people have ready access to programs, employment, activities and services that help them stay engaged, respected and appreciated.

3.0 TRENDS OVERVIEW

Aging Population

It is well known that the population throughout Canada is aging. Based on conservative, low-growth projections¹ from Statistics Canada², Alberta’s population of people 55 and over will increase from just over 575,000 in 2010 to 1.25 million in 2036, more than double. Based on the low-growth scenario, as a proportion of the population, 55+ year-olds are anticipated to increase from 21.4% in 2010 to 31% in 2036. The growth by age cohort is documented below.



It is anticipated that Edmonton will experience similar rates of growth in the senior population. In 2006, Edmonton (CMA) had a total of 114,825 seniors – more than one in ten Edmontonians.³ Factoring Statistics Canada’s low-growth rate, this number will double to 230,000 by 2036.

In 2010, Statistics Canada estimates Alberta’s aging population to be segmented as follows in comparison to its projection for 2036.

% of Senior Population		
Age Range	2010	2036
55 - 74 yrs	77%	70%
75+ yrs	23%	30%

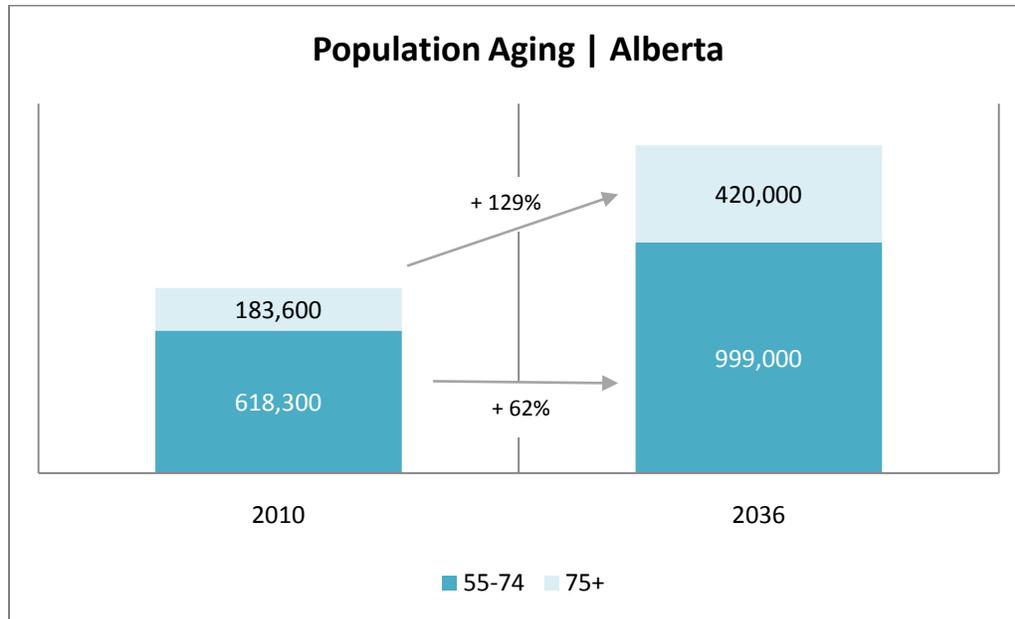
This change in make-up of the overall senior population in Alberta is due to a much higher projected growth rate for seniors 75 and older. See graph on the next page.

¹ Statistics Canada bases population projections on a number of growth scenarios. We have chosen to use its lowest growth scenario to be conservative, and because even the low-growth projections indicate major change in the number of seniors over time.

² *Population Projections for Canada, Provinces and Territories 2009 to 2036*, Statistics Canada, web data. Table 10-10

Population by age group and sex, low-growth scenario. URL: <http://www.statcan.gc.ca/bsolc/olc-cel/olc-cel?catno=91-520-XWE&lang=eng>

³ Statistics Canada. Census 2006. Community Profiles Edmonton (CMA).



Based on Statistics Canada low-growth projections

Diversity of the Senior Population

In addition to the significant growth in numbers of seniors across Canada, it is also the case nationally and locally that the senior population is becoming more culturally diverse. Up until 2001, just over 50% of immigrants came to Edmonton from Europe or the United States, with a third coming from Asia and the Middle East.

The shift in immigration patterns more recently (2001-2006) has seen nearly three-quarters of immigrants to Edmonton coming from Asia and the Middle East. European immigrants have fallen to 12%.⁴

The Aboriginal senior population is younger than the general senior population, with 60% of Edmonton’s 3,600 Aboriginal seniors being between 55 and 65. Projected growth for this population will be at a slower pace;⁵ however, low income and isolation are significant issues facing this population.

Income

In terms of income, senior women aged 70 and over experience low income⁶ at a rate nearly three times that of senior men. Seniors who live alone experience higher rates of low income: 48% of women and 33% of men over the age of 65 have low income.

⁴ Statistics Canada, 2006 Census, Catalogue # 97-557-XWE2006020

⁵ Statistics Canada: *A Portrait of Seniors in Canada*, 2007

⁶ Low income is defined by Statistics Canada based on low income cut-offs (LICO). “The LICO measure is a relative calculation as it is based on the percentage of income that individuals and families spend on the basic needs or necessities in comparison with the rest of Canadians. Some have called it a ‘relative necessities’ approach” (Source: www.socialpolicy.ca).

Living Independently

Currently, most Edmonton seniors (55 and over) own their homes (70%) and tend to live with other family members, although the incidence of living alone increases with age. By the time people reach their 80s, fewer than half live in their own homes and 38% live alone.

Given the projected growth in the senior population, the City of Edmonton will be challenged to provide a sufficient stock of age-friendly housing. The municipal government expects many neighbourhoods to see their senior population double by 2041, especially in those areas in proximity to services seniors require.⁷

Because of the high incidence of low income among seniors, there are concerns about the future affordability of housing, especially for older seniors.

Supportive Housing & Long-term Care

As life expectancy increases to well into the mid-80s by 2031, the need for supportive housing and long-term-care beds will increase as well. In Alberta, according to Alberta Health Services, the number of people waiting for a long-term-care bed has nearly quadrupled between 2006 and 2010 and in the same time-frame, the number of people in acute-care hospitals waiting for a long-term bed have increased more than 2.5 times.

Health & Health Services

Health issues will grow correspondingly. Alberta's current shortage of physicians and health-care professionals in general is not the only concern facing Edmonton's seniors. Health-insurance costs pose a challenge to seniors on tight budgets and for older seniors. Being able to attend health related appointments is anticipated to become a significant issue. As well, seniors who do not speak English will find it even more difficult to access and navigate health care.

4.0 WHAT PROBLEMS/ISSUES NEED TO BE RESOLVED?

Based on previous work, a review of research and trends, and drawing upon their own experience, the participants in the five strategy sessions identified the significant/priority problems and issues they wish to address through the creation of a city-wide outreach service for isolated and/or at-risk seniors.

4.1 Not Enough Outreach Capacity

Among all the senior-serving organizations there is a lack of capacity to provide outreach services that meet current and anticipated demand.

The capacity shortfall relates not only to having a sufficient number of staff to provide outreach, but also to the increased complexity of needs and challenges outreach services will face due to a rapidly aging population and the growth of cultural diversity among Edmonton seniors.

The ability to deploy volunteers to assist with outreach services is expected to become an increasing challenge. Rising numbers of isolated seniors with complex circumstances may call for levels of training that will be difficult to sustain.

⁷ City of Edmonton, *Preliminary Population Projections 2006-2041*, 2007

4.2 Gaps in Services

Often, if not the majority of the time, the services seniors can access are dependent on where they live. While senior centres are fairly well disbursed across the city, in some areas there are no outreach services available.

Those areas that do offer outreach operate typically with an inconsistent basket of services and have varied abilities to help multi-cultural and non-English-speaking clients.

It is also true that “we don’t know what we don’t know.” The inability to provide a sufficient volume of outreach, especially pro-active outreach, likely means there are gaps in services and unmet needs that ESCC members have not yet identified.

4.3 Need Common Outcomes & Improved Coordination/Collaboration

Because each senior-serving organization has its own service delivery model and individual relationship with funders, common outcomes for city-wide outreach services were not in place at the onset of this initiative.

At this writing the City of Edmonton FCSS is developing, in consultation with others, outcomes for the seniors’ services it funds. Based on a review of FCSS draft outcomes as well as referencing the outcomes of an outreach model in Calgary, ESCC members developed high-level outcomes for this initiative.

Each organization represented at the ESCC table deploys different methods of assessing client needs, which can be a challenge to seniors in terms of equitable access to an established set of “core” outreach services delivered to a common standard of quality.

Coordinating services with institutions and among seniors centres is a challenge because of silos caused and perpetuated by organizational mandates, resource limitations, the absence of sufficient collaboration around case management, and independent client databases.

This can lead to seniors not receiving appropriate follow-up services when leaving institutions of care and/or inadequate preventative care designed to help seniors avoid institutionalization in the first place.

Because of the many players often involved in a senior’s case, it is possible for multiple workers from different organizations to be working on resolving the same problem for a client, resulting in needless duplication of effort.

...[H]uman contact and aging are healthy features of life and the more seniors are engaged and visible in their neighbourhood, the more likely they will receive help before a problem escalates to a crisis.

Engagement not only prevents social isolation, it creates opportunities for a Senior to seek help or for others to observe changes in the senior’s ability to manage.

Outreach is therefore a key component of the [Aging in Place] strategy.

-From Aging in Place: A Neighbourhood Strategy

4.4 Lack of Awareness

There is concern among ESCC members that seniors across Edmonton are likely insufficiently aware of the range of services available to them, whether centre-based, located in other agencies and institutions, or accessible through outreach services.

There are particular challenges in terms of promoting awareness and knowledge about services to non-English speaking seniors.

This lack of awareness can also extend to families, caregivers, and to professionals no matter where they work. Given the pace of change and the varied mandates and service criteria of Edmonton-wide services, staying current on what is available to address a senior's circumstances is a major challenge.

4.5 Inadequate Resources

There is a question as to whether or not there is shared understanding among funders and senior-serving organizations about what outreach services are, their importance, and their overall *fit* with seniors services. Disparate understandings can lead to challenges around collaborative planning and result in inequitable funding.

While it is admittedly typical to state that funders are not providing adequate funding, the needed ratio of outreach workers to the general senior population at least deserves investigation by funders into what are adequate levels of funding, especially in a community that is aging rapidly and becoming increasingly multi-cultural. Funding is vital to help ensure that organizations have the capacity to develop and deliver outreach services that reflect best practices.

5.0 WHO ARE "ISOLATED SENIORS"?

In the course of the group's discussions, questions were raised about whether or not the need to *design a made-in-Edmonton model for city-wide access to outreach services to isolated seniors* should in fact be limited to "isolated seniors." Two primary questions identified were: shouldn't city-wide access to outreach services be made available to all seniors? And, what does "isolated" mean?

Again, referencing research as well as the experience of those present at the model development workshops, there was agreement that outreach services should be open to all seniors in order to at least assess their needs and circumstances. Overall, however, a city-wide outreach program should have a major, if not primary, emphasis on meeting the needs of isolated (or at-risk) seniors.

The City of Edmonton Seniors at Risk Subcommittee (2004) defined seniors at risk as:

Generally adults aged 60 years and over, living in Edmonton, who face economic, social, physical or cultural barriers that affect their independence, personal well-being and overall quality of life.

Risk factors include: social isolation, lack of family support, advanced age (80+ years), poverty/low income, illness/disability/chronic health concerns, unhealthy lifestyles, language barriers/ethnicity, abuse, being in a caregiver role, mental health problems, unsafe environment, bereavement, limited or lack of community supports and/or limited access to resources, and addictions.

ESCC's 2009 report, *Improving Outreach to Edmonton's Isolated Seniors*, offers the following insight into what constitutes an isolated senior.

"The following definition of isolated seniors comprises feedback from outreach workers, various definitions and the interviewees professional experience working with isolated seniors. The definition was provided to outreach workers for referrals:

"Isolated seniors are seniors 55 years of age or over that have become isolated due to a breakdown in their social networks and loss of independence. Individual and societal factors that influence senior isolation are: living arrangements, health, socio-economic status, language, culture, mobility, frequent falls, decreased or minimal contact with others, physical or mental disability, inability to attend social events, confusion, disorientation, forgetfulness, abuse, neglect, personal beliefs and attitudes, and social support from family, friends or others. Isolated seniors may suffer from chronic health conditions, stress of significant life events such as bereavement or ... addictions.

"As a consequence isolated seniors may have difficulty with: personal care and daily tasks, household needs, transportation, getting around, access to assistance for falls or other health concerns, contacting others, attending social events, memory, safety, finances, overuse of alcohol and/or drugs, irregular use of prescribed medication, language or cultural barriers, confusion, disorientation, forgetfulness or coping due to bereavement of a friend, relative or pet."⁸

The group identified that an *isolated senior* could also be classified as a *senior at-risk*. However, the strategy session participants all agreed that assigning labels such as "isolated" and/or "at-risk" needs to be understood within the context of their collective purpose with respect to delivering services (including outreach) to all seniors:

To help seniors meet their needs and overcome barriers to their independence, working with the seniors themselves as well as family members, friends, and service providers, to help them maintain, if not improve, quality of life and remain in their own homes for as long as possible.

Accordingly, the participants agreed that an *isolated senior* is 55 years of age or older and typically has one or more of the following characteristics.

- ✓ Presents complex needs or circumstances that any single organization may not be able to address.
- ✓ Typically is unable to address needs on his or her own.
- ✓ Has limited or no contact with family and friends.
- ✓ Lacks a support system.
- ✓ Is unaware of what help is available.
- ✓ Lacks transportation or is unable to use public transportation.
- ✓ Lacks sufficient finances.
- ✓ Is not isolated by choice.

⁸ Improving Outreach to Edmonton's Isolated Seniors, Prepared by: Cheryl Klassen, MSW, RSW, December 16, 2009, pages 3-4.

6.0 DEFINING OUTREACH

Review of the literature and research accumulated for this initiative did not reveal a definition of outreach that would be widely accepted. In fact, the research often indicated that a single definition of outreach is somewhat elusive.

That being said, the research and the rich discussions among the participants in this initiative identified narrative that articulates the key characteristics of outreach services.

6.1 Defining Characteristics of Outreach Services

Outreach is a service-delivery model that aims to improve accessibility of services to seniors. It involves outreach workers providing a set of services to seniors in their home, a centre or elsewhere in the community.

These services are typically focused on assessing the needs and challenges a senior faces and then providing appropriate information and referral services and case management for ongoing engagements of clients.

Key is the connecting role an outreach worker plays in the life of a senior. Key connections that can help seniors achieve goals and meet their needs include:

- | | |
|--------------------------|------------------------------|
| ✓ Family members | ✓ Transportation services |
| ✓ Friends and neighbours | ✓ Volunteers |
| ✓ Health services | ✓ Community support services |
| ✓ Place(s) of worship | ✓ Counselling |
| ✓ Community Leagues | ✓ Businesses |
| ✓ Recreation centres | ✓ Government programs |
| ✓ Seniors centres | ✓ In-home help |

In a senior's home you can see and act on things you would not normally know otherwise.

Outreach allows for a relationship of trust and discovery.

Once the trust is there, it is easier to facilitate change in a senior's life.

Outreach workers meet with seniors in order to determine what their aspirations, assets, and needs are. Do they need some information or do they need to be linked to a particular service or program? What talents, resources and abilities do seniors bring to the table that can help achieve their goals?

The outreach worker might refer a senior back to his or her own centre (or another centre) if the senior is capable of attending centre-based services.

Sometimes the outreach worker's involvement with a client is very short-term; other times needs are ongoing, which necessarily involves case planning and management.

While information and referral are key elements of outreach, services can also include accompanying a client to an appointment, participating in case meetings with other service providers, liaising with a

senior's family or friends, as well as discovering emerging issues and challenges through the ongoing relationship with the senior.

Outreach means more than bringing existing services into the community; it means being proactive, not just reactive. Outreach is also about seeking out seniors who may need assistance.

7.0 OUTCOMES

The recommended city-wide enhanced outreach service must operate to deliver a set of overarching outcomes. Further work will be required to identify short, medium and long-term outcomes and indicators for evaluation purposes.

In developing this set of outcomes, the participants in the strategy sessions referenced a set of draft outcomes from the City of Edmonton FCSS and the outcome statements contained in the Calgary Family and Community Support Services' *Seniors Outreach Manual* published in 2005.

Helping Seniors Age In Place – Outreach Outcomes

More seniors in our community are aware of and able to access services that successfully meet their needs and aspirations, including financial, informational, home support, cultural, physical, medical, and psycho-social.

An increased number of seniors participate in educational, supportive and preventative programs.

Seniors in our community experience decreased isolation caused by reasons such as language and cultural barriers, financial condition, disability, and mental and physical barriers.

There is increased community awareness and support for services that are available to seniors.

There is an increased number of referrals to community services on behalf of seniors.

Community education about aging increases awareness of the negative impact of ageism in our society.

ADDING TO THE DIALOG **OTHER "DEFINITIONS" OF OUTREACH**

"I define Outreach as taking a service to where the people are. This can be done through cold calling or via referral. I only see people in their homes or speak to them on the telephone. I go to them, they don't come to me," – Ivan Lister

A systematic attempt to provide services beyond conventional limits, as to particular segments of a community: an educational outreach to illiterate adults. (Answers.com)

8.0 CORE OUTREACH SERVICES FOR SENIOR CITIZENS IN EDMONTON

Equitable city-wide access to outreach services calls for the identification of a core set of services that seniors can access regardless of geographic location, gender, age, ethnicity, language, and income.

Based on the group's review of research and its own experience and wisdom, the following services were identified as Core Outreach Services (in no particular order):

- Case Finding
- Assessment Services
- Information and Referral
- Case Management
- Service Development and System Advocacy
- Community Engagement/Community Building

These core outreach services are required elements of an enhanced outreach model that will serve seniors equitably across the City of Edmonton.

It is recognized that there are additional outreach services seniors may need (supplementary or optional services), but such services fall outside of what the ESCC participants as well as other research have identified as "core."

8.1 Elements of Core Outreach

8.1.1 Case Finding

Given that a major emphasis of outreach to seniors is to ensure support and care is there for those who likely will not access it of their own accord, outreach services delivered by staff or volunteers should seek out seniors throughout the community. The outreach worker's role includes connecting with other service providers, businesses, seniors' apartment buildings, health centres, and so forth in order to facilitate optimal awareness of the availability of outreach services.

8.1.2 Assessment Services

Assessment is the linchpin of outreach services. It is client-centred and sets the stage for everything that is to follow. Its purpose is to identify, document, and understand a senior's circumstances, her or his living situation, health challenges or conditions, mobility issues and generally the senior's overall strengths and challenges.

Assessment involves working with the senior and other service providers when applicable in order to ensure the assessment is holistic and comprehensive. Assessments may lead to the development of goals (developed in team with the senior) and a service or care plan.

HELPING SENIORS AGE IN PLACE DEFINITION OF OUTREACH

Outreach is a service delivery model that aims to improve accessibility of services to seniors. It involves outreach workers providing a set of services to seniors in their home, a centre or elsewhere in the community.

8.1.3 Information and Referral

Services include linking seniors to community resources that will meet their needs. The outreach worker's degree of involvement can range from arranging an appointment to accompanying the senior to the appointment and being involved in further services as required.

All referrals must involve follow-up in order to assess if the referral addressed the need(s) of the senior (see Case Management).

Assistance with filling out government forms or the forms of other service providers is included as part of "connecting" seniors to needed services.

8.1.4 Case Management

The need for case management is determined through the assessment process and becomes necessary when the work with a senior will be ongoing. It involves the following:

Holistic Care Plan

The development and coordination of a holistic care plan should be done in team with and approved by the senior (or guardian). Whenever possible, the plan's development should also involve the client's family, other key helping professionals, and others who are engaged with the senior (e.g. neighbour).

Goals & Services

While there is not a predetermined list of services that qualify for case management services, the general guide is that case management by an outreach worker should, as noted earlier in this report, include the following focus:

To help seniors meet their needs and overcome barriers to their independence, working with the seniors themselves as well as family members, friends, and service providers, to help them maintain, if not improve, quality of life and remain in their own homes for as long as possible .

The care plan should clearly and simply identify goals, the actions required to address the goals, and the roles of the various participants in the actions. As well, it should focus on the senior doing as much as possible independently.

The care plan may involve a senior acting alone, with coaching, with direct assistance, or if required having a worker act on his or her behalf (or connecting to another service that will do so).

Monitoring the Care Plan

Monitoring the progress of the plan is a formal component of case management. It includes meeting with the senior in the home or at another location (e.g. seniors centre, doctor's office, family member's home, etc.).

Monitoring can also be done by telephone but this typically should not be the only method of monitoring.

The outcomes of referrals and services being received by the senior are documented and evaluated. The monitoring phase of case management will often lead to a reassessment of the senior's needs.

Documentation

Documentation takes place throughout the case management process; it is not a separate step. For a care plan to be optimally effective, documentation should be transparent and shared with the senior and with other participants in the care plan, giving appropriate consideration to the senior's right to privacy.

8.1.5 Service Development & System Advocacy

Because outreach workers are active in the community, they often are among the first to experience gaps in service, shortcomings in systems, and service denials based on questionable policies or practices.

As well, outreach workers have relationships that exist across various professions, which further helps them to understand the overall service delivery system.

Although it is not the role of the outreach worker alone to undertake the development of new services or engage in advocacy for changes in systems, policies, or organizations, it is the outreach worker's role to bring observations, experiences, ideas, and issues to the attention of her/his organization's senior staff.

One of the measures of an effective outreach service system is the extent to which what is learned on the front line translates into systems change for the betterment of clients.

8.1.6 Community Engagement/Community Building

The needs and challenges facing seniors are the community's to address. A city-wide outreach program for seniors should deploy community development techniques in order to create awareness and mobilize community interest and support for seniors.

Engagement and collaboration should go beyond systems and agencies to include businesses, neighbourhood groups and leaders, and volunteers in the development and sustainability of an age friendly community. This work should not be solely the responsibility of the outreach staff, but senior serving organizations should undertake efforts as identified in other research⁹, such as:

- ✓ Work with businesses to help them understand what they can do to be more supportive of seniors (and in the process attract more business their way).
- ✓ Develop programs in collaboration with businesses and other organizations that help seniors do basic tasks: shopping for groceries, pharmacy visits, medical check-ups, etc.
- ✓ Collaborate with public transportation providers (volunteer driving services, buses and taxis) to identify service adjustments or enhancements that will benefit seniors.
- ✓ Collaborate with businesses that offer home improvement services or products in the development of home and/or yard maintenance programs.

⁹ See *FCSS Senior Services Evaluation Report: Seniors Outreach System* prepared by Brenda J. Simpson & Associates, October 1999.

9.0 PROPOSED STRUCTURE

Dialog took place at the strategy sessions about the best way to structure the delivery of city-wide outreach services to Edmonton's seniors. In the end, the participants identified the importance of enhancing the current collaborative model of service delivery in order to deliver on the strategy of **designing a made-in-Edmonton model for city-wide access to outreach services to isolated or at-risk seniors.**

A New Organization is Not Needed

While participants acknowledged the service gaps and challenges related to providing equitable outreach services to seniors throughout Edmonton, they concluded that the development of a brand new organization to deliver this service was not supported for a number of reasons:

First, the group indicated that the integration of the findings of this report into their collective operations was feasible and aligned with the group's current practice of collaborating on the delivery of outreach services.

Second, the Edmonton Seniors Coordinating Council was identified as the entity that could best coordinate, facilitate, and represent the expansion and promotion of the enhanced outreach service. The ESCC was identified as the appropriate body for providing the human resources for coordinating training, facilitating the development of common approaches and tools where appropriate and supporting the ongoing expansion of enhanced outreach services and the collaboration.

Third, city-wide access to outreach services was seen as a shared responsibility that could be well-addressed through enhanced collaboration.

Fourth, a collaborative approach would ensure a consistent, long-term approach to meeting the needs of Edmonton seniors in an equitable manner.

Fifth, given the scarcity of resources, the group concluded a collaborative approach would be optimally efficient and more likely to attract financial support.

The ESCC members also acknowledged that those organizations that choose to participate in this enhanced collaboration may decide, from time to time, to change how they deliver their outreach service to support consistency among the collaborating agencies. Such changes may require support from their Boards and funders.

Enhancing the Current Collaboration

The consensus reached was that Edmonton seniors would be best served by the current member organizations of the Edmonton Seniors Coordinating Council and other organizations (in particular multi-cultural groups that serve seniors) joining together **to collaborate on offering core outreach services to Edmonton's isolated and/or at-risk seniors, which would include, but not be limited to:**

- ✓ Establishing Terms of Reference for how collaborating organizations will work together to develop, deliver and measure outreach services.
- ✓ Creating a mutually agreeable set of standard forms and tools and resources such as an outreach manual that would support outreach services.

- ✓ Identifying a mutually agreed upon range of qualifications which would be appropriate for outreach staff. It was agreed that flexibility was necessary given that ESCC members' hiring criteria and practices have been built to address the needs of their clients, as well as the culture and resources of their respective organizations. Also, grassroots and multi-cultural organizations that may join the collaborative will have varied practices around the hiring of staff, which should be respected.
- ✓ Developing centralized training opportunities for outreach staff and volunteers.
- ✓ Coordinating education about challenges and issues facing seniors as well as promotion of the collaborative approach to outreach service.
- ✓ Reviewing current service boundaries, given that there are areas in Edmonton that currently do not have a seniors centre or an outreach service.
- ✓ Exploring the use of common data collection and reporting methods.
- ✓ Jointly presenting/sharing output, outcome and process information with stakeholders to raise awareness about issues and the need for support to the individual organizations to continue to offer and expand the service.
- ✓ Exploring the establishment and promotion of effective communication methods to access seniors outreach services.
- ✓ Exploring how a collaborative network can best address the needs of seniors that require specialized services.
- ✓ Facilitating the expansion of a collaborative network to include other outreach or related services.

APPENDICES

COLLABORATORS	
These are the organizations (and their representatives) who participated in one or more of the five workshops.	
Calder Seniors Drop In Society	Brenda Shewaga Trish Leduc
City of Edmonton Community Services, FCSS Liaison	Alba Valderrama
Edmonton Meals on Wheels	Liz Tondu
Edmonton Seniors Centre	Ursula Altmann Shirley Kilsdonk
Edmonton Seniors Coordinating Council	Sheila Hallett
Elder Care Edmonton	Tovè Nielsen
Mill Woods Seniors Centre	Pearl Bennett Kitty Choi
Multicultural Women and Seniors Services Association	Sofia Yaqub
Native Seniors Centre	Pat Tessier
Operation Friendship Seniors Society	Rosalie Gelderman Gladis Molina
Seniors Assisted Transportation Society (SATS)	Anna Der
Seniors Association of Greater Edmonton (SAGE)	Roger Laing Bernice Sewell
Seniors Outreach Network Society	Deborah Miville Angella Richard Fran Matthews
South East Edmonton Seniors Association (SEESA)	Kimberly Buehler Kim Boyd
Strathcona Place Senior Centre	Jeff Allen
Westend Seniors Activity Centre	Janice Monfries Steve Renaud

Facilitator/Consultant: Mark Holmgren

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