

Title: Setting the Balance of Care for Older Persons in Ontario

To what extent can older persons be cared for in their own homes and communities? What factors need to be considered when estimating the appropriate mix of resources for this population at the local level?

A multidisciplinary research team based at the University of Toronto and Ryerson University has conducted a series of projects to answer these two broad research questions. These projects use the Balance of Care framework developed in the UK to estimate the proportion of older persons who can safely and cost-effectively age at home if given access to a range of health and social care services in the community. These projects have considered the role of cultural and sexual diversity, the presence or absence of an informal caregiver, geographical setting, and various models of care (e.g. homecare and supportive housing) in its applications.

The findings of the completed projects suggest the following:

- There is considerable regional variation on both the needs of older persons and local system capacity to meet their needs.
- When the appropriate mix of health and social care services can be incorporated into community-based care packages, a considerable number of individuals can safely and cost-effectively age at home as an alternative to LTC facility placement.
- Assistance with instrumental activities is critical to daily living. Problems in coordinating IADL care increases the likelihood for LTC facility placement.
- The role of informal caregivers is crucial and impacts on the extent to which older persons can remain in their own homes and communities.
- Alternative models of care including supportive housing can moderate demand for more costly institutional based care.
- Different geographical settings have varying service capacities impacting on the extent to which individuals can age in their own homes and communities.

The presentations will provide an overview of the guiding framework of this research along with specific case examples highlighting the roles of diversity, caregiving, geography, and different care models on 1) enabling older persons to age in their own homes and communities and 2) the implications for the broader health care system.