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PLANNING FOR AN AGING POPULATION

The Community and Health Services Committee recommends the adoption of the recommendation contained in the following report dated October 24, 2012, from the Commissioner of Community and Health Services.

1. RECOMMENDATION

It is recommended that Council receive this report for information.

2. PURPOSE

Recent census data indicates that the Region's older adult population will more than double over the next twenty years. The report proposes a framework for the development of an Aging Population Strategy that will identify the demographic impact on Regional programs and services and position the Region to respond effectively.

3. BACKGROUND

AN AGING POPULATION WILL HAVE A SIGNIFICANT IMPACT ON THE DELIVERY OF HEALTH AND HUMAN SERVICES ACROSS THE REGION

To better tailor polices, programs and services the aging population is described in three segments

Both the public and private sector have typically defined the seniors' population as those sixty-five years of age and older. Using a generalized age classification of individuals 65 years of age and older is challenging when planning programs and services, as there is an increasing difference in the lifestyle and health characteristics of individuals in their sixties, seventies, eighties and nineties. For the Aging Population Strategy staff will use the following age population definitions:

1. Older adult – 65 years of age and older (born prior to 1947)
2. First Wave Boomer – born between 1947 and 1956
3. Second Wave Boomer – born between 1956 and 1966

By defining the population in three segments, a clearer picture of the aging population's needs and future impacts on programs and services emerges.

The Region's demographic profile is expected to change substantially in the coming years, with the older adult population more than doubling by 2031

While demographics of the Region are already changing, the strongest impacts will be felt over the next twenty, thirty and forty years as First Wave and Second Wave boomers age. Preliminary research shows that the aging population will have a significant impact on the delivery of health and human services across the Region.

In *Attachment 1*, Charts 1, 2, 3 and 4 illustrate population projections for the next thirty to forty years. The data indicates:

- The number of York Region residents over the age of 65 will increase from 121,000 to 311,000 in 2031 (see Chart 1)
- From 2001 to 2051, the older adult population is expected to grow at a much faster pace than any other age group (see Chart 2)
- By 2031, 21% of York Region residents are expected to be 65 or older. In contrast, the growth of the population aged 0 -14 years is relatively steady (see Charts 3 and 4)

In *Attachment 1*, Charts 3 and 4 also show the evolution of the age structure in the Region's population from 2001 to 2031. Most notably, across time, the overall size of the older adult segment gets larger due to the increase in population growth across all age groups; as does the population of children and youth aged 0-14. Over the next twenty years this means the Region will have an increased responsibility to provide not only programs and services to its larger older adult population, but it will also have continuing pressures for programs and services for children and youth.

The release of the 2011 Census and National Household Survey Data will enhance our ability to project future trends

There is a limited but growing body of research relating to the future older adult population. Research about current older adults, particularly as it relates to their financial and physical health, is readily available. However, data pertaining to those born between 1947 and 1966 is just now beginning to be collected and researched. Over the next year more findings will be published; in particular, health data will be made available for analysis and will be useable for projecting future trends for the Region's growing senior population. For example, hospitals currently report patient care data to the Local Health Integration Networks (LHINs) and in turn that data is filtered and uploaded to the Ministry of Health and Long-Term Care for public access.

With the First Wave boomers now passing the age of 65 there will be new data available for analysis as to whether or not boomers are in fact healthier than previous generations. Research projects are now beginning to take shape examining the health status and needs of older adults. Once completed, this research will help inform strategies for the delivery of programs and services best suited to the older adult.

To date, Statistics Canada has published 2011 census data including population, age, sex, family, household and marital status data as well as structural type of dwelling. Language data is expected later this year. Data from the National Household Survey is expected to be released starting in May 2013.

International, national, provincial and municipal attention is being directed to better understanding the needs and impacts of the older adult population

In 2006, the World Health Organization developed the Global Age-Friendly Cities Project. A partnership between 35 cities around the world, the initiative is aimed at making communities better, healthier and safer places for older adults to live and thrive, making such communities better for all residents, not just older adults.

Recognizing the potential implications of an aging population, the Canadian government, some provinces and various municipalities and associations have started research and/or planning initiatives. Table 1 highlights some of this emerging work.

Table 1
Illustrative Summary of Initiatives in Canada

	Highlights
Canada	• Endorsed the Age-Friendly Rural/Remote Communities Initiative • Published reports from the Public Health Agency of Canada, Seniors Canada and the National Seniors Council
Ontario	• Aging at Home Strategy (2007) • Seniors Care Strategy currently in development
Federation of Canadian Municipalities	• Developing a Quality of Life Reporting System themed report on Canada's aging population and aging in place • Report expected to be released Fall 2012/Winter 2013
Association of Municipalities Ontario	• Released the *Coming of Age: The Municipal Role in Long-Term Care* report (August 2011)
City of Ottawa	• Currently developing an Older Adult Plan
City of Toronto	• Developing a strategy for improving City Services for Toronto Seniors

	Highlights
Region of Peel	• Identified the need to assess the impacts of the aging population on health and human services as a priority area in the term of Council • Developing a seniors' advocacy strategy, engaging in further research and creating a tool to support the integration of a seniors' perspective into all Regional priorities.

4. ANALYSIS AND OPTIONS

The rapid growth of the older population has implications for York Region as a whole – for the labour force, businesses, transit, housing polices and services, health and community services, among others. While the implications are broad, eight existing Regional service areas, as outlined in *Attachment 2*, Table 2, will likely be most impacted by the growing older adult population. Existing Regional service areas include:

- Subsidized Housing
- Healthy Living
- Senior's Community Programs
- Residential Long Term Care Homes
- Domiciliary Hostels
- Homemakers and Nurses Services
- Emergency Medical Services
- Transit

The identified service areas not exclusively targeted to the older adult population have older adults as a large percentage of the service users.

Emergency Medical Services (EMS) for example is a service area that will be significantly impacted by shifting demographics. EMS is not targeted specifically to older adults but sees a substantial percentage of their services used by this client group. In 2011, 35% or 22,140 calls for services were from the older adult population. Also in 2011, EMS made 13,754 transports for people 75 years of age and older. The demand for transport is expected to increase by 100% between 2011 and 2031.

The Region will face a number of human services challenges in the coming years. There will be a need to balance growth-related demand for services with more targeted initiatives responding to the shift in demographics.

The Aging Population Strategy will help provide a clear understanding of the Region's role in service delivery and the role and responsibilities of other levels of government.

Research is an important first step in developing an Aging Population Strategy

Strategic planning exercises typically begin with a research process. This report provides a high level environmental scan and a preliminary census review. The next steps in the research process include analysis of the Census and National Household Survey data that will become available in the coming months as well as a literature review.

The literature review will paint a picture of the impact of population aging. It will provide a succinct description of population trends that will transform the Region in fundamental ways. Examining health, economic and social issues facing an aging population, it is expected that the findings of the literature review will inform the development of a Regional response to the anticipated needs of our aging population. The academic literature review will examine the evolving needs of seniors in order to assist in identifying the most appropriate mix of services that the Region should provide to best meet the projected needs of seniors in York. This mix of services will complement the work of other levels of government and other health and human service providers in York Region. Sources will include academic literature, association/university sponsored research, government policy papers, and market-based research from the financial and real estate sector. Review of the literature will be completed through an extensive search of electronic sources as well as an examination of the references and hand searching of specific journals, databases and association websites.

The research will inform the Region's understanding of the service needs and expectations of the First and Second Wave boomer populations and will support demand projections for Regional services. Table 2, below, outlines the framework proposed for an Aging Population Strategy for York Region.

Table 2
Proposed Strategy Development Process

Action	Timing
Council report with preliminary analysis	November 2012
Research and Data Analysis Phase	2013
Present research results and proposed Strategy development process to Council	Spring 2014
Develop draft Strategy	2014/2015
Present draft Strategy for Council consideration	Fall 2015

Link to key Council–approved plans

The development of a comprehensive Regional strategy to address the needs of older adults in the community is a proposed action in the Community and Health Services *Multi-Year Plan*. The proposed framework for the development of an Aging Population

Strategy also directly aligns with the Regional Strategic Plan objective to optimize the health of the community for all ages and stages through health care delivery, protection, prevention and promotion initiatives and Vision 2051's goal of providing appropriate housing for all ages and stages and a place where everyone can thrive.

5. FINANCIAL IMPLICATIONS

An estimate of $170,000 has been identified through the Community and Health Services *Multi-Year Plan* as one-time costs, funded from the Social Assistance Reserve fund, to support the development of an Aging Population Strategy. Costs are expected to include additional data runs from Census Canada to complement standard published data, along with consulting services normally associated with community consultation exercises.

6. LOCAL MUNICIPAL IMPACT

Population growth and changing demographics will impact all nine local municipalities. Comprehensive research and impact analysis will provide the Region with the necessary data to develop an Aging Population Strategy, which will ensure the Region's role and mix of services for older adults meets the needs of the aging population, is effective, and complements other services delivered to older adults.

7. CONCLUSION

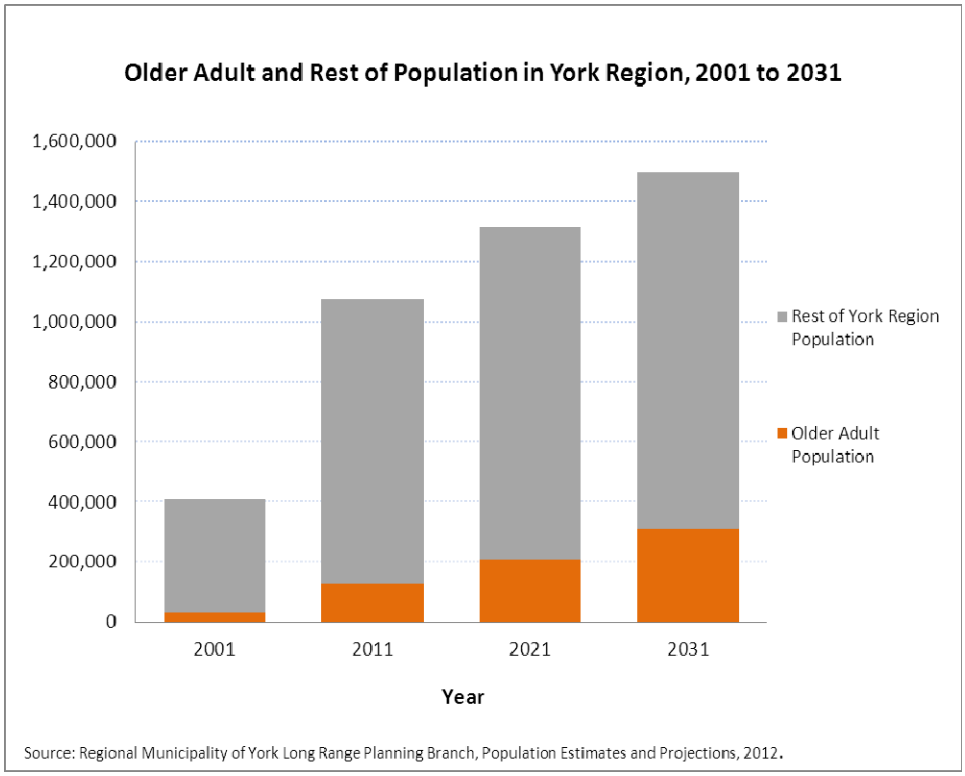
By initiating plans to complete a research review and impact analysis on the older adult cohort, the Region is being proactive in identifying the current and future needs of this growing and changing population. Through this review and analysis phase the Region will be in a better position to develop an Aging Population Strategy, which will recommend planning, and program initiatives which will adequately and appropriately serve older adults and the First and Second Wave boomers.

For more information on this report, please contact Sylvia Patterson, General Manager, Housing and Long Term Care at Ext. 2091.

The Senior Management Group has reviewed this report.

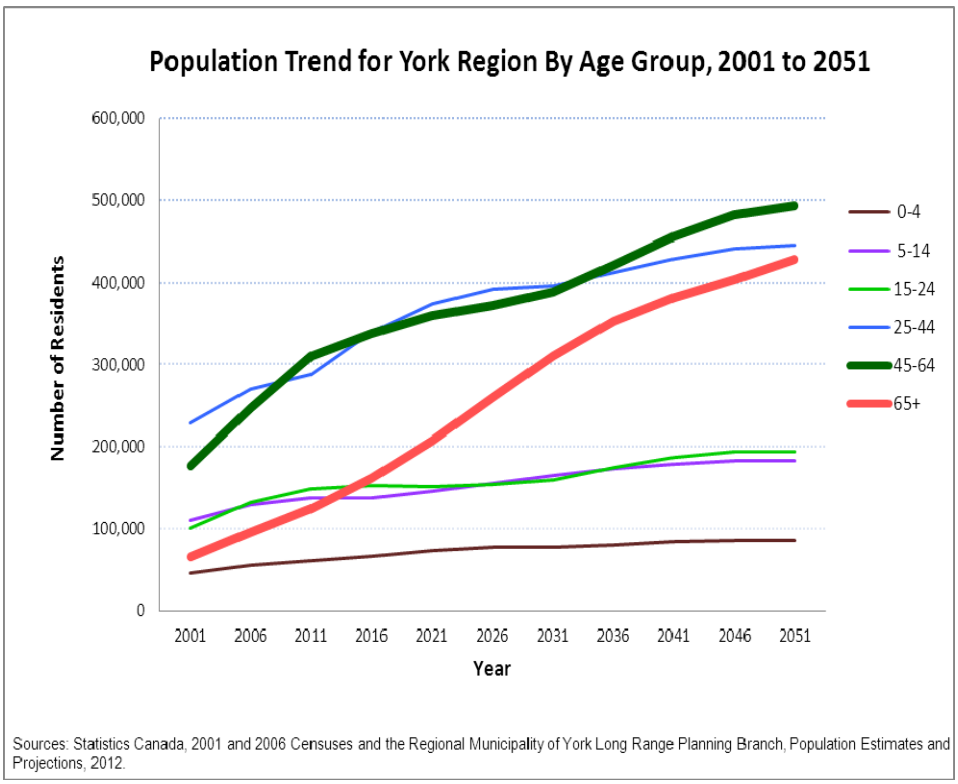
(The two attachments referred to in this clause were included in the agenda for the November 7, 2012 Committee meeting.)

Chart 1



Source: Regional Municipality of York Long Range Planning Branch, Population Estimates and Projections, 2012.

Chart 2



Sources: Statistics Canada, 2001 and 2006 Censuses and the Regional Municipality of York Long Range Planning Branch, Population Estimates and Projections, 2012.

Chart 3

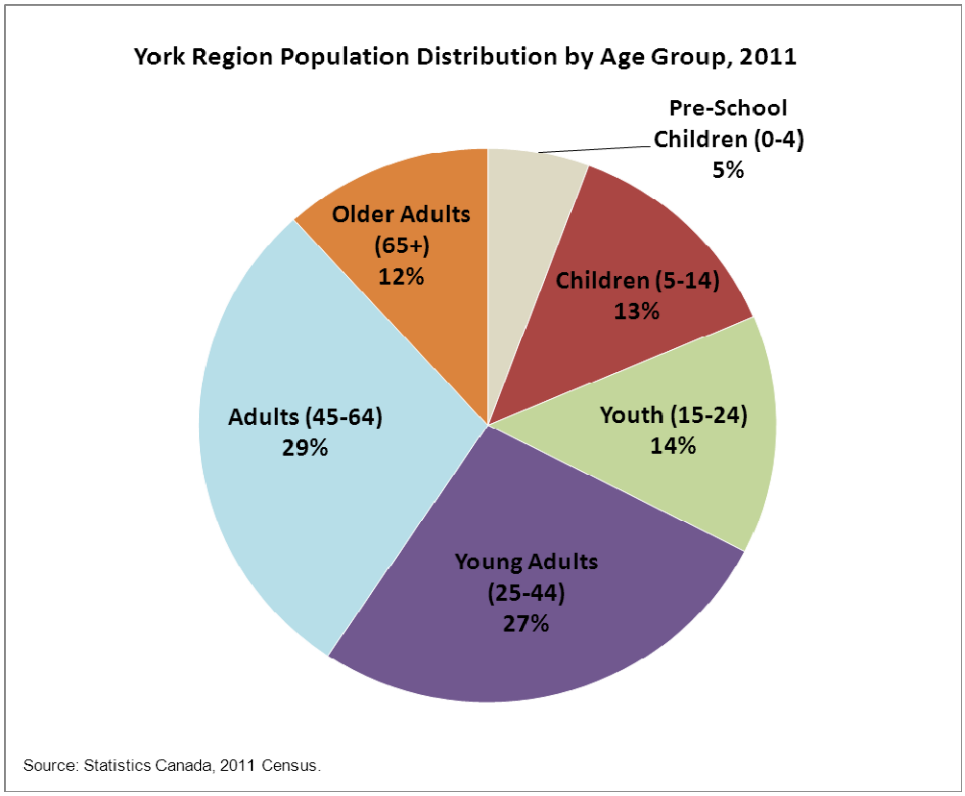


Chart 4

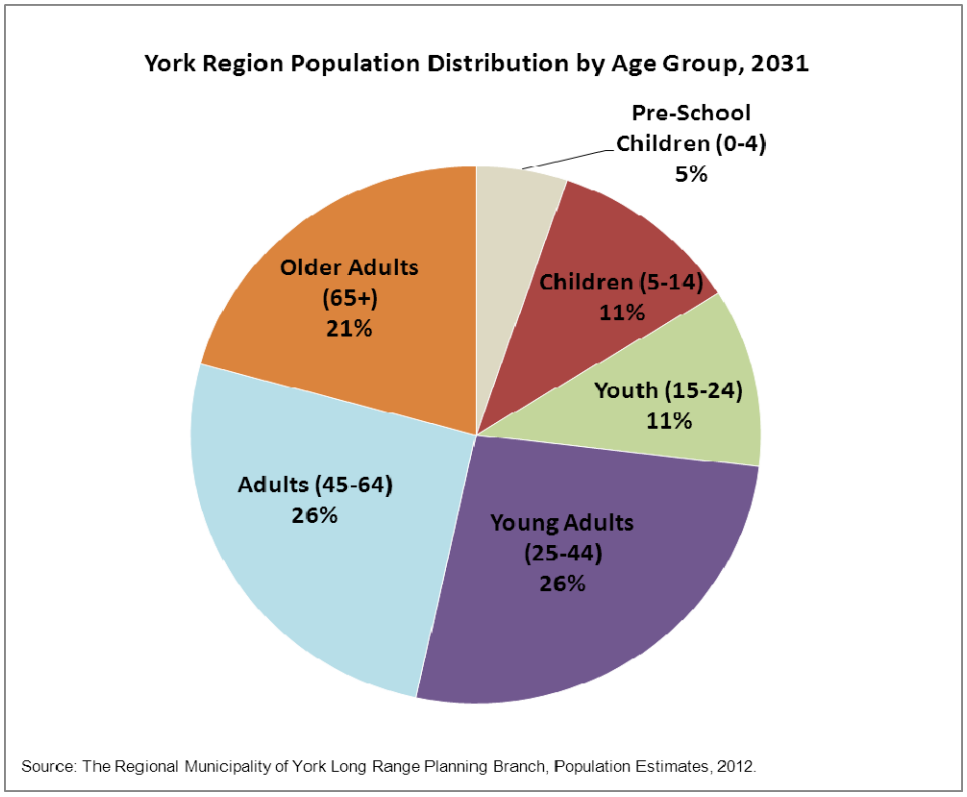


Table 1
Anticipated Service Implications of an Aging Population

Subsidized Housing:

Approximately 2600 units (40%) of social housing is mandated to individuals 60 years of age or older

- Increased duty to accommodate and provide accessibility upgrades
- Expectation to accommodate aging in place
- Greater demand with population growth

Healthy Living:

Designated Seniors Program focused on prevention of injury and chronic disease as well as promotion of physical and social activity

- **Falls and fall related injuries are a significant burden on the healthcare system**
- **Increase need for staff in response to program demands**

Senior's Community Programs:

Offers six community programs to approximately 880 older adults

- **Added costs and pressure to meet community care expectations**
- **Language and ethnic diversity is increasing**
- **As programs growth, better coordination and integration is needed**

Residential Long Term Care (LTC) Homes:

Own and operate two LTC Homes with a total of 232 beds and offers services for short-stay residents

- **Increased costs as a result of strict regulations and increased acuity of residents**
- **With a shift in focus to community care and pressure on hospitals to discharge patients, LTC homes expect:**
  - **to deliver care to more short stay residents**
  - **to provide care to residents who are difficult to serve in the community, including those with heavy or complex care requirements**

Domiciliary Hostels:

Subsidize the stay of approximately 400 residents. Average age of all residents is 55

- **Increasingly difficult to get CCAC hours to assist with increased level of personal care requirements**
- **Aging residents require enhanced supports**

Homemakers and Nurses Services (HNS):

Providing financial assistance for in-home homemaking services to 150 clients, 40% of which are 65 years of age or older

- **Budget freezes at the CCAC have increased pressure on the program with increased referrals and waiting list demands**
- **Growing population may result in more demand and an increase to the waiting list**

Emergency Medical Services (EMS):

In 2011, 22,140 calls for services were from the older adult population (35% of the total call volume)

- **Increase in call volume due to shifting demographic s**
- **Increase in lower acuity responses**

Transit:

In 2011, clients over the age of 64 took 165,000 trips on Mobility Plus. This represents 49% of the overall ridership but only 25% of all active registrants. While there is no accurate counts on the number of older adults using YRT and Viva services, it is estimated that less than 10% of the riders are over the age of 64.

- **Increase in active registrants which will increase demand for services on Mobility Plus**
- **Need to provide older adults with training to use all transit services**
- **Possible redesign of buses to accommodate features such as increased courtesy seating, and space for mobility aid storage**
- **Increase running time on routes to accommodate boarding and alighting of seniors with mobility aids**

*Non Exhaustive List