

Building Effective Research & Public Policy Partnerships to Advance Housing Outcomes for Low-Income Seniors

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Declarations

- No conflicts of interest
- Funding provided by the Canada Mortgage & Housing Corporation & the views expressed are the personal views of the authors & the funding entities accept no responsibility for them.
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Objectives

- To provide a case example of building an effective research-policy-practice partnership to advance housing outcomes for low-income older adults
 - Brief overview of project origins & Toronto Community Housing Corporation (TCHC)
 - Theoretical & methodological approach for the current initiative
 - Key research outputs
 - Recommendations for academic/practice/policy partnerships





SPOILER







Seniors Housing Research?









Origin Story

- Long-standing relationship with the City of Toronto's Senior Services & Long-term Care Division
- In 2017, initiated work with the City of Toronto & its partners to support the planning & evaluation of the Toronto Seniors' Strategy.



The #CIHRHealthyCities Dragons' Den event continues with a ninth pitch, this one from Sander Hitzig and Andrea Austen from @Sunnybrook & @cityoftoronto. They are pitching an age-inclusive approach to addressing social isolation among older adults in cities.



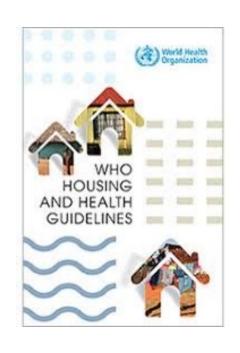
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Seniors Housing a Priority

- Quality of housing has major implications for people's health.
- Structurally deficient housing increases the likelihood that people slip or fall, increasing the risk of injury.
- Poor accessibility to their house puts disabled & elderly people at risk of injury, stress & isolation.
- Housing that is insecure, sometimes due to affordability issues or weak security of tenure, is stressful.



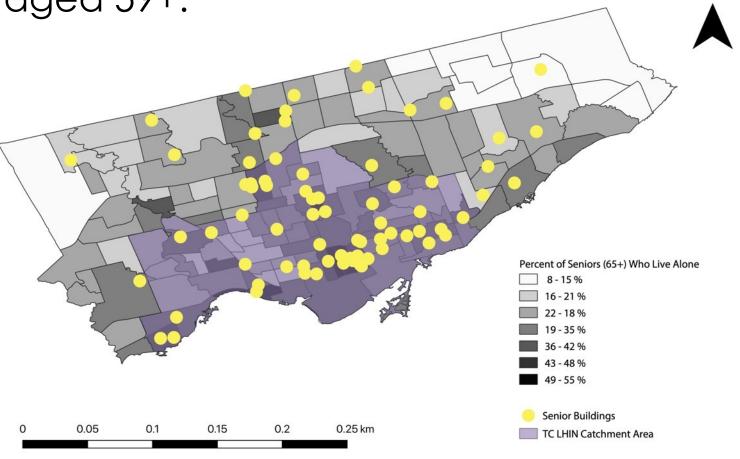




TCHC Seniors' Designated Buildings

• 83 Buildings (13,904 units) designated specifically for

seniors, aged 59+.







TCHC Buildings

- Rent-geared to income.
- Half are bachelor apartments; half are bachelor apartments.
- Range in size smallest has 11 units while others have up to 400 units.







Operating Challenges

1

Older adult tenants are disproportionately impacted by poverty, social isolation & health challenges





Operating Challenges

1

2

Older adult tenants are disproportionately impacted by poverty, social isolation & health challenges

Inconsistent staff-tenant interactions due to high case loads & an operating model that requires tenant support staff to travel between buildings





Operating Challenges

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Older adult tenants are disproportionately impacted by poverty, social isolation & health challenges

2

Inconsistent staff-tenant interactions due to high case loads & an operating model that requires tenant support staff to travel between buildings

3

Lack of integration between housing & health services



A New Approach to Achieve Common Goals

Partnership approach to design a new integrated service model

- Toronto Community Housing
- City of Toronto
- Local health partners

NEED:

Time & resources to make evidence-based decisions

Ageing in place

Successful Tenancies

Integrated Supports

Access to Services





How to design & implement a new approach that will be viewed as meaningful to end-users?





Implementation Science

- The field of implementation science was developed to facilitate the spread of evidence-based practices (Bauer et al., 2015)
- Developed in response to the fact that on average, it takes 17 years for evidence to be incorporated into routine general practice in health care (Morris et al., 2017)
- Only about 30% of evidence-based practices reach clinical settings (Balas & Boren, 2000)

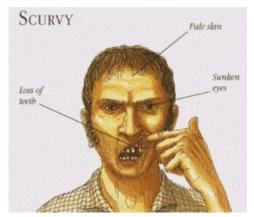




Dr. James Lind & Scurvy

- Dr. Lind surgeon on the HMS Salisbury & conducted the first randomized control trial to test effectiveness of different treatments for scurvy - published in 1753
- The Navy only adopted the recommended treatment in 1795 (<u>almost 4 decades later</u>)
- Surprising since scurvy was an urgent affecting 1,000's of sailors across all nations since the dawn of exploration (Glouberman, 2009)









Barriers to Translation

- Competing theories
- Lack of dissemination

 Government ineffectiveness to move the practice into action





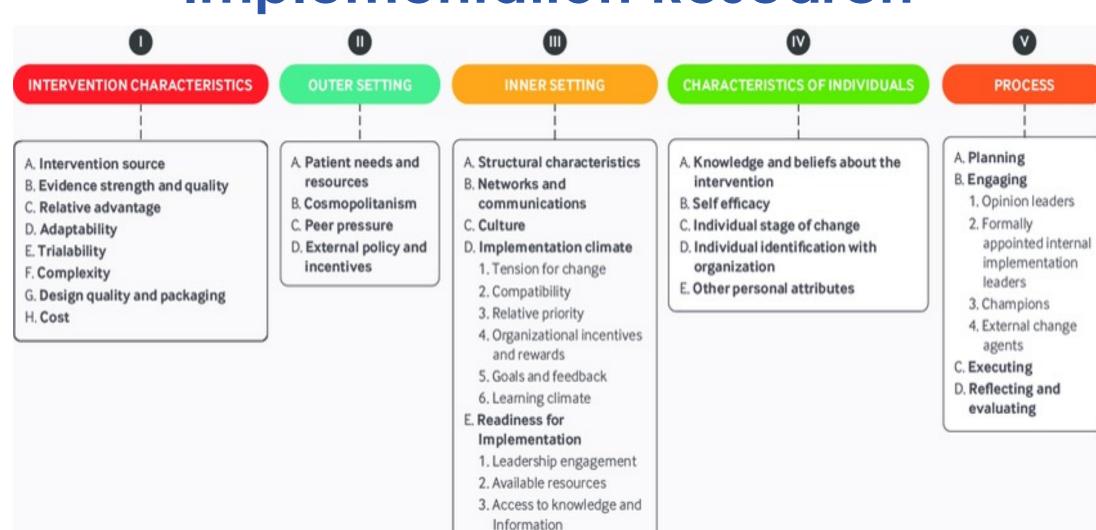
Consolidated Framework for Implementation Research

• CFIR (https://cfirguide.org/) specifies a list of constructs within general domains that are believed to influence (positively or negatively, as specified) implementation

• Implementation is the **critical gateway** between an organizational decision to adopt an intervention & the routine use of that intervention (Damschroder et al., 2009)



Consolidated Framework for Implementation Research



1-STAKEHOLDER MAPPING

Identified relevant stakeholders







3 - ACTION PLAN DEVELOPMENT

Host consensus meetings to cocreate action plan

5 – KNOWLEDGE TRANSLATION

Create an age-inclusive seniors housing tool-kit to that is scalable to other cities

2 - EVIDENCE GENERATION

Generated evidence to support the planning of the ISM



- Develop an evaluation plan
- Survey of tenants
- Follow-up interviews with tenants & Staff





Approach: Embedded Researcher

 A key decision early on was to get a member of the research team 'out of the lab' & 'embed' them with the City of Toronto to better understand & to rapidly respond to their needs.







Evidence Generation

Gathering Evidence to Support the Creation of the Integrated Service Model





Key Questions

1

What are the characteristics and needs of older adult tenants who live in social housing?





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What is it like to **live** & work in the buildings?

What are the **current challenges** & how can they be addressed?





Key Questions

1

What are the characteristics and needs of older adult tenants who live in social housing?

2

What is it like to live & work in the buildings?
What are the current challenges & how can

they be addressed?

3

How do other affordable housing providers promote successful tenancies for their older adult tenants?



Gathering the Evidence to Inform Decision Making

Environmental Scan

Literature Review Interviews with tenants & service providers

Consensus meeting

Provision of Community Support Services





Generating the Evidence Environmental Scan

ENVIRONMENTAL SCAN OF SENIORS SOCIAL HOUSING MODELS



In Support of 'An Age-inclusive Approach to Housing for Vulnerable Older Adults'



PREPARED FOR:

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Canadian Urban Institute 30 St. Patrick Street, 5 Floor Toronto ON M5T 3A3 DATE:

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- Partnership with Canadian Urban Institute
- Scan of 34 international seniors housing models
- Successful models:
 - Ongoing tenant engagement
 - On-site staff key for building trust & identifying needs
 - Collaborative partnerships with health partners to offer flexible programs





Generating the Evidence Literature Review

Matthew Yau, Christine L. Sheppard, Carol Kwon, Jorge Rios, Andrea Austen, Sander L. Hitzig

INTRODUCTION

- Access to affordable housing is rising concern for many older adults.
- Government-sponsored housing programs are one approach to support low-income older adults.
- · There are multiple modalities of social housing.

METHODS

 Scoping review methodology was used to identify relevant studies from seven peerreviewed databases

RESULTS

- A total of 140 articles spanning five decades of research met inclusion criteria
- 86.4% examined sociodemographic and health characteristics of older tenants
- 68.6% presented characteristics of social housing service models (e.g., staff, policies, onsite services)

DISCUSSION

 There is an acute need for more research on key tenancy issues (e.g., unit condition, safety, rental management) to identify new opportunities for social housing landlords to help older tenants age in place.

FINANCIAL DISCLOSURE

 This work is supported by Canada Mortgage and Housing Corporation (PIDN [NHS9-11]).
 The views expressed are of the authors and the funding entity accepts no responsibility for them. Government-Funded Affordable
Housing Models for Older Adults:
A Scoping Review

There is a **high level of**

vulnerability among older

adults in social housing; co-

located support services with

on-site staff to identify

vulnerable tenants and link them

with services are key for

promoting aging in place.

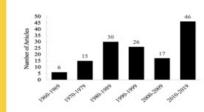


Figure 1. Year of Publication

- Surges in publications in the 1980's and again in the 2010's coincide with unprecedented increases in the proportion of adults age 65+
- Some housing topics (e.g., tenant health characteristics, access to on-site services) have been consistently present in the literature; others have fallen off (e.g., safety) or emerged (e.g., functional status) over time

Role of On-Site Services

- Declining mental health, poor physical functioning, and inability to carry out daily tasks were 3 top reasons older tenants moved out of their units
- Key on-site services to help tenants manage their health and their units included primary care and mental health services, housekeeping, meal preparation and transportation
- Most providers facilitated access to on-site services through partnerships with community agencies; these partnerships were sometimes difficult to coordinate, and in some cases, tenant associations played a key role in coordinating and promoting these services
- Future research is needed to explore how additional on-site services (e.g., legal clinics, tax clinics) can help address other issues impacting housing stability, such as rental arrears or failure to complete the annual rent review.



Generating the Evidence Community Support Service Provision







WHO, WHAT, WHERE?

Access to Community Support Services Among Older Adults

Claire Semple, Christine L. Sheppard, Matthew Yau, Candy Lee, Jocelyn Charles, Andrea Austen, Sander L. Hitzig

STUDY BACKGROUND: TCHC'S BUILDINGS FOR SENIORS

Access to **community support services** is critical for helping older adults remain safely in their home for as long as possible. In **social housing**, older adult tenants struggle to access these services due to the siloed nature of housing and health services. Recently, **Toronto Community Housing Corporation** has been working collaboratively with the **City of Toronto** and the **Toronto Central Local Health Integration Network** (TC LHIN) to enhance access to support services for tenants living in their seniors designated buildings.

The Toronto Community Housing Corporation (TCHC) is the second largest social housing landlord in North America. Around 25% of TCHC's 110,000 tenants are over age 59 and approximately half of that population live in one of 83 buildings designated specifically for seniors. Older adults living in TCHC buildings are among the most vulnerable in the city, and many experience poor physical and mental health outcomes that intersect with other vulnerabilities such as racialized and gender-based poverly, systematic racism, language barriers and unequal access to resources and services.²

TCHC Portfolio Characteristics



85 buildings designated for seniors 57 buildings in the TC LHIN Catchment Area 26 buildings outside the TC LHIN boundary



14,778 tenants in total
9,061 tenants in TC LHIN Catchment Area
7,717 tenants outside the TC LHIN boundary



13,904 units in total
8,671 units in TC LHIN Catchment Area
5,233 units outside the TC LHIN boundary

RESEARCH QUESTIONS

- What community support services are provided to seniors living in the TCHC's 83 seniors designated buildings, and by what organizations; and
- How access to community support services varies across seniors' buildings and neighbourhoods



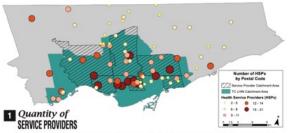
THE APPROACH

This study examined the delivery of **LHIN funded community support services** to the seniors designated buildings within the **Toronto Community Housing Corporation's** portfolio.

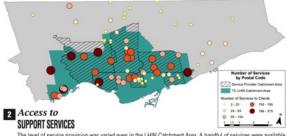
A secondary analysis of **baseline community support service utilization data** collected in the **Toronto Central LHIN Community Business Intelligence database** from the 2018-2019 (April 1, 2018 - March 31, 2019) fiscal year was conducted.

The mapping and analytical software, ArcGIS Desktop, was used to visualize and interpret re-

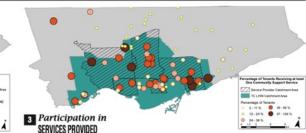
KEY FINDINGS



The number of service providers operating in each building varied widely and instances of more than one agency offering duplicate services on site was common. A total of 56 different community support service agencies provided services in the 83 buildings (74 postal codes). Six multi-service organizations were the lead agency for 33 buildings (21 within the TC LHIN catchment area). Within the TC LHIN catchment area, each building had an average of 10 agencies providing services.



The level of service provision was varied even in the LHIN Catchment Area. A handful of services were available in over 80% of the buildings, including caregiver support, congregate dining, meal delivery, transportation, and hearing/vision care. However, certain programs such as case management, assisted living services, and adult day services are only available in approximately half of the buildings.



A sizeable proportion of tenants within each building were linked to at least one community support service, but the number of services these tenants received was quite low. For most buildings within the TC LHIN catchment area, between 20% and 60% of tenants were linked to at least one community support service.

RECOMMENDATIONS

- Align multi-service agencies to specific buildings and designate them as "lead agencies" to increase coordination among service providers
- 2. Enhance awareness of support services on site through educational resources to increased participation in community support services
- 3. Creation of a centralized agency referral library for housing staff which could provide up-to-date referral information and eligibility criteria
- Implementation of monitoring and follow up procedures within the referral process to ensure services are functioning properly and assess whether additional services may be needed³

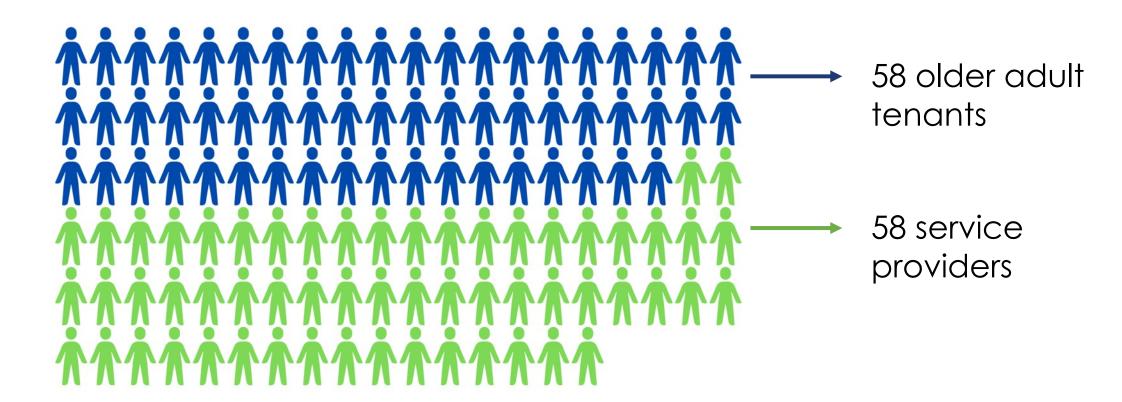
Reference

[1] City of Toronto. (2019). Implementing Tenants First: A New Seniors Housing Corporation and Proposed Changes to Toronto Community Housing's Governance (EX7.1). https://www.toronto.ca/legdocs/mmis/2019/ex/bgrd/background-file-134973.pdf

[3] Ploeg, J., Denton, M., Hutchison, B., McAiney, C., Moore, A., Brazil, K., Tindale, J., & Lam, A. (2017). Primary care physicians' perspectives on facilitating older patients' access to community support services: Qualitative case study. Canadian Family Physician, 63, e1, 43.



Generating the Evidence Qualitative Interviews







3 Overarching Issues:

- Pest control
- 2) Evictions
- 3) Access to Services



Generating the Evidence Consensus Meeting





- 72 stakeholders from:
 - Toronto Community Housing
 - Library, community & social services
 - Health & primary care
 - Municipal & provincial government
 - Advocacy groups
- Recommendations to:
 - Improve unit condition
 - Increase access to services
 - Prevent eviction





A New Way Forwards

The New Integrated Service Model





What Senior Tenants Want

- To have a home where older tenants can live safely, comfortably & with dignity.
- To be part of vibrant communities that support meaningful engagement & participation among older tenants.
- 3) Respectful and senior-friendly communication with housing staff that is based on **trust**, **transparency** & **accountability**.
- 4) To have access to health & community services that help older tenants remain independent in their home.





What Service Providers Want

- 1) For housing staff to have **greater awareness & appreciation** of the support services available to help tenants
- 2) To use a simplified, consistent partnership process
- 3) To have access to to community spaces to run programs on site
- 4) To have more opportunities to work collaboratively with housing staff to identify tenants that need supports & link them to services





Integrated Service Model



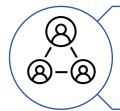
New Staff Model



Seniors Specific Policies



Seniors Health & Wellness Hubs



Designated Care Coordinators





Impacts

From Our Stakeholders







"If the objective of the project has been to develop a broad overview of where the system strengths and failures lie, in order to improve it, you've hit the mark. [We have] been heard - staff, management, service providers and mostly tenants. This project has opened some of the doors to true communication. This is the very first-time, tenants' collective voice - frustrations and solutions - have been listened to and valued."

- Senior Tenant







"Can we do this every year? The [Gift Card] means nothing to me but the opportunity to speak and upgrade the value system"

"Can we do more things like this? Things like this, where we're actually given the opportunity to speak. The experience I find is that when we had meetings, [...] they would come to tell us all the good work that they were doing for us [...] instead they should come to our house and completely listen. Instead, it felt like they were coming to our house to tell us how things are."







"[This Project] has been instrumental in facilitating stakeholder engagement with our tenants, staff, and our health and social support partners. Sunnybrook's contributions have better enabled us to understand the needs of our stakeholders. As a result, we are striving to better align our services for our senior tenants to live independently and thrive within their communities."

- Manager, TCHC







"The CMHC Grant has supported capacity building among key project partners. The ability to collaborate with [academic partners] has enabled me to develop [skills related to] tenant and community engagement, research and evaluation, data analysis and knowledge translation. Through this partnership, public servants like me can hone and develop our skills, allowing us to perform to a higher standard."

- Management Consultant, City of Toronto





Recommendations

Promoting success in research-policy-practice partnerships







Cheat Sheet

- 1) Identify needs, prioritize & build in opportunities for consensus
- 2) Balance respective needs of the different groups involved
- 3) Find processes to facilitate communication
- 4) Beware of barriers







Build a Strong Foundation

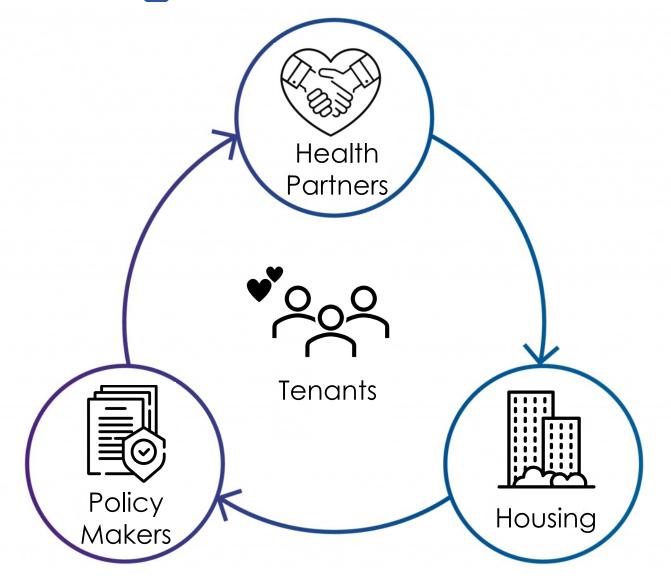
 Opportunities for identifying priorities of different stakeholders & putting in processes to obtain consensus are critical for getting everyone focused on the end goal as well as the process for achieving those goals.







'Nothing About Us Without Us'







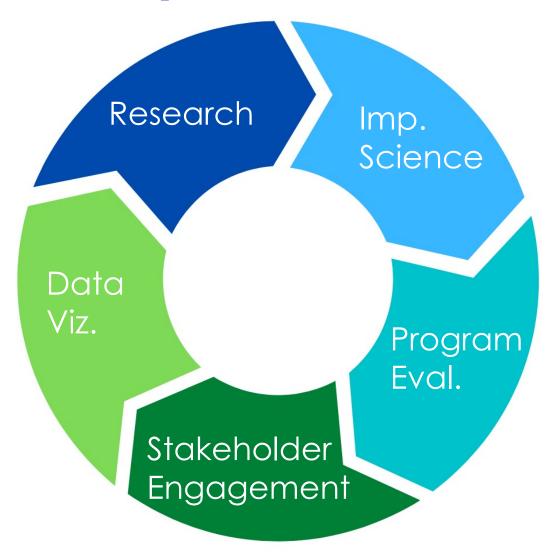
Embedded Researcher

- Researcher immersed within the policy or practice team to facilitate ongoing communication
 - Ability to rapidly respond to requests for support
 - Better understanding of the pressures being faced
 - Hands on practice translating research to various audiences (senior leadership, government colleagues, staff)
 - Teach about academic processes & partnerships
 - Ability to identify other opportunities to expand the research partnerships





Required Skills







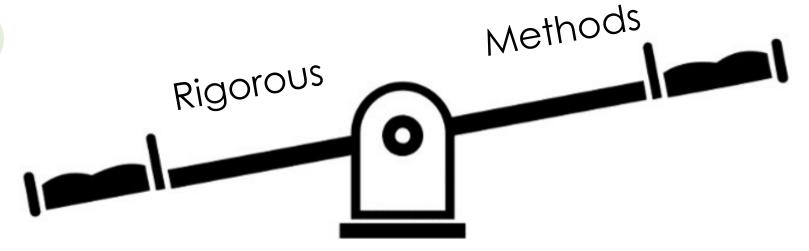
Balancing Needs

Rapid Decision-Making Diverse information needs

Pressure for Change

Publications

Research Ethics



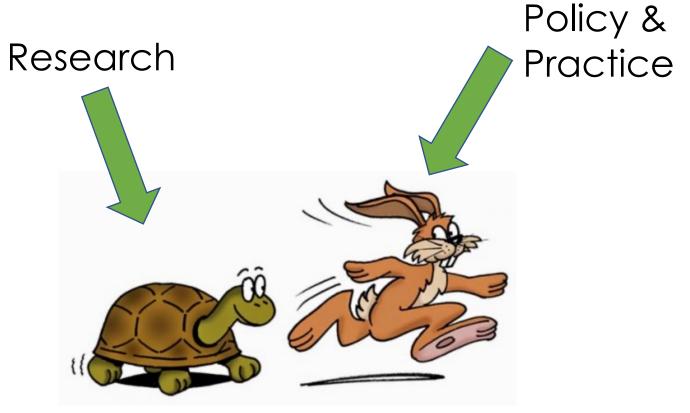




Multiple Pressures & Timelines

Beware of Bureaucracy







TEWE =

Find your Policy or Academic Unicorn









- Barbara Liu RGP of Toronto
- Jocelyn Charles, Rajin Mehta Sunnybrook Health Sciences Centre
- Sara JT Guilcher Leslie Dan Faculty of Pharmacy, University of Toront
- Amanda Mayo Ontario Association for Amputee Care
- Elizabeth Linkewich North & East GTA Stroke Network
- Seong-gee Um, Greg Suttor, Brenda Roche, Ivy Yip & Thrmiga Sathiyamoorthy - Wellesley Institute
- Reza Yousefi-Nooraie University of Rochester
- Stacy Landau & Vonnie Barron SPRINT Senior Care
- Lilian Wells Toronto Council on Aging
- Margery Konan, Kristin Legere, Madeleine Morgenstern, Gillian Bone
 Toronto Central LHIN
- Ivy Wong BeACCoN & Ryerson's NIA
- Dorina Simeonov AGE-WELL NCE
- Glenn Miller Canadian Urban Institute
- Joe Bornstein Health Innovations Group
- Tamara Daly YU-CARE
- Kerry Kuluski Trillium Health Partners Fdn.
- Jen Recknagel UHN Open Labs
- David Burnes FIFSW, University of Toronto
- Debra Walko, Will Shin LOFT
- Paul Raftis City of Toronto
- Emma Helfand-Green City of Toronto