

Hub and Spoke Model

Some believe that we need to go outside of Ontario or even Canada to find innovative ways of maintaining older adults in their own homes and communities. But some of these models already exist right here at home



What Is Hub and Spoke?



- Services and support are provided in supportive housing buildings (the hubs) and also to the communities around the buildings – the spokes.
- Different staffing and scheduling configurations are required for each with travel time being a key factor in determining how many people can be appropriately served

How It All Began



- In 2008 the LHIN started discussions between Nucleus Independent Living, Peel Senior Link, and Oakville Senior Citizens Residence.
- While two of the partners had experience in supportive housing, Peel Senior Link brought in the psycho-social model of on-site in-home support to address care needs on an individualized basis – which it had been doing in various locations since 1993.
- In 1993 this meant support 12 hours on-site in buildings and 12 hours on call.
- In 1996 that became 24 hours on-site in Peel Living buildings and Turtle Creek Manor

Why Were Services Expanded?

- A growing older population 85+ with complex needs
- An agency-based review of priority needs and challenges to develop a model tailored to those using the services
- Older adults wanted to stay independent and avoid institutionalization
- Caregivers needed additional support
- Government was, at the time, looking for cost-effective, community-based service solutions as alternatives to institutions



The Aging At Home Strategy 2010 and the Assisted Living for High Risk Seniors Policy, 2011

- Focused planning on those at risk of hospitalization or institutional care
- Nucleus Housing created mobile services for older adults being discharged home from hospital as Alternate Level of Care (ALC) patients to get them home as quickly as possible, and transition them to more permanent assistance offered by Peel Senior Link and others.
- The plan was to expand the service to all 12 supportive housing services with intake/assessment workers on-site in hospitals in Halton and Peel – later transitioned to a centralized process.
- Referrals came from CCACs, hospital discharge planners, primary care providers and family/caregivers.

A Winner Approach



- The Supports For Daily Living Model won the 3M National Award for Health Care Quality and the Ontario Minister's Medal Honoring Excellence in Health Care award.
- In 2020/21 the Ministry of Health funded 182 non-profit organizations to deliver assisted living services.
- IT IS NOT ENOUGH! We need to advocate for the expansion of these services all over Ontario for older adults and people with disabilities
- More details can be found on SSAO's website:
<https://www.seniorsactionontario.com/files/ugd/50033db5214dc0d4d24a83a7fd22a12e74f742.pdf>

Lessons Learned



- Site supervisors and staff visited older adults in their homes and at local community centres to promote the program
- Training to meet the needs of ‘at risk’ older adults with multiple and complex chronic health conditions who needed medication assistance was a vital part of the program.
- Supports for Daily Living is a viable alternative to Alternate Level of Care provision in hospitals and institutionalization in long-term care facilities.
- Critical components need to be end of life/palliative care including pain control and symptom management, behavioral support, medication management, and outreach mental health and addiction support.