



SIoux LOOKOUT
Meno Ya Win
HEALTH CENTRE

The Meno Ya Win Elder Care Continuum:

Supporting Our Elders Through Televisitation

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Isolation from Family & Community

For the most part the residents of our long term care facility come from communities which are at considerable distance from Sioux Lookout.

The residents are even further isolated from regular contact between residents and members of their families and communities because there is no year round road access to 24 of the communities. Costs of air travel to be with family members are prohibitive for the majority of people living in these communities.

Contact and visitation are major issues.



A Televisitation Link to our Home Communities

A pilot televisitation project using telemedicine links provided by Keewaytinook Okimakanak Telemedicine and Ontario Telemedicine Network was conducted for 10 months in 2006 and 2007. A total of 47 sessions averaging 57 minutes were conducted. One hundred forty-one family and community members in 16 First Nations were able to spend time with loved ones in visits that otherwise would not have been able to happen. Groups as large as 15 participated. The results were very positive. Residents' morale demonstrably improved. Feelings of isolation and loneliness decreased. Reported family satisfaction is higher.

The two issues raised were the lack of dependability in scheduling the hospital-based units (emergency diagnostics, etc. were accorded priority) and mobility issues meaning some residents could not participate because of the difficulties moving them to the hospital-based video conference setting.

A permanent video conferencing link is now being established on site in our long term care facility. The permanent on-site unit will be used to facilitate regular, frequent videoconferenced visits from our LTC facility in Sioux Lookout for all residents from 24 distant communities. It will also be used to

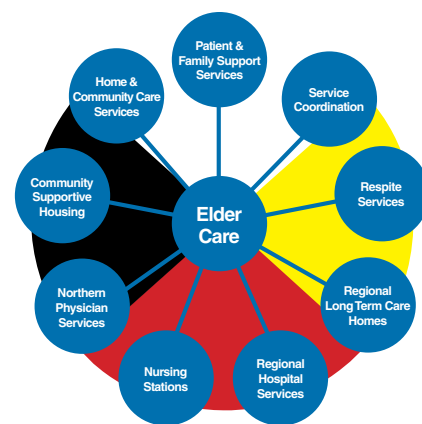
- Support remote family council meetings
- Facilitate Assessment and Placement of residents
- Pre-placement diagnosis and treatment of potential residents
- Training and support of local community Elder Care workers
- Provide video-interpretation support where needed





Aging at Home is the Strategic Longer Term Answer

The NW LHIN and MOHLTC strategy of “Aging at Home” presents another viable opportunity to address this very challenging situation on a collaborative basis.



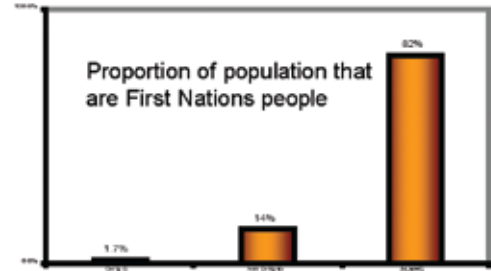
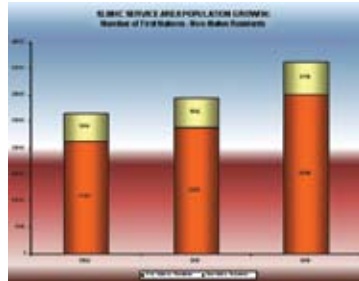
Our Collaborative Strategy

Multiple partners are working together to ensure a comprehensive set of linked Elder Care services is available to the people of all 28 communities in our area. These will provide appropriate care in the right place, adequate capacity and resources, repatriation of people at a distance, sustainable local capacity, culturally sensitive and appropriate care and supports. Continuing provider collaboration, mutual support and shared resources, and solid buy-in at the funding/policy level will ensure a full service continuum of linked Elder Care services close to home in the near future.

Service	Service Expectation
Home and Community Care Services	<ul style="list-style-type: none"> Community based nursing care Community based personal care support Meal preparation assistance <i>i.e. meals on wheels</i>
Patient and Family Support Services	<ul style="list-style-type: none"> Social Work Caregiver Support Dementia Care Support including Psychogeriatric assessment Palliative care support Occupational Therapy and Physiotherapy Nutrition Counseling Implementation of Elder Health Promotion Strategies
Support Service Coordination	<ul style="list-style-type: none"> Case management Facilitation of Equipment needs Completion of functional, social and physical assessments for service utilization Placement facilitation - Supportive housing, Respite and Long-term care
Respite Services	<ul style="list-style-type: none"> Relief services for family/caregivers In community and regionally
Community Supportive Housing	<ul style="list-style-type: none"> Accessible Elder friendly housing Personal Care support Medication administration support Meal preparation assistance <i>i.e. meals on wheels</i>
Nursing Station	<ul style="list-style-type: none"> Centre for medical care in community Telehealth access for specialist consultations Emergency health services
Northern Physician Services	<ul style="list-style-type: none"> Community based medical care
Regional Hospital Services	<ul style="list-style-type: none"> Inpatient Health services - Acute and Rehabilitative
Regional Long Term Care Homes	<ul style="list-style-type: none"> Residential Services Culturally appropriate care including interpreting services, traditional foods, recreation, foods and medicine and spiritual care Restorative Care Palliative Care
Education	<ul style="list-style-type: none"> TBD
Transportation	<ul style="list-style-type: none"> TBD

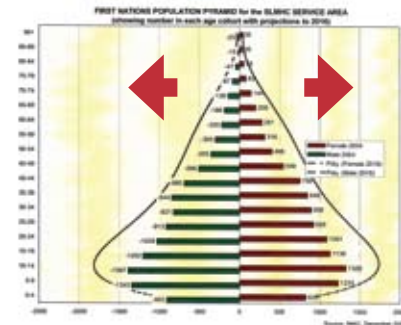
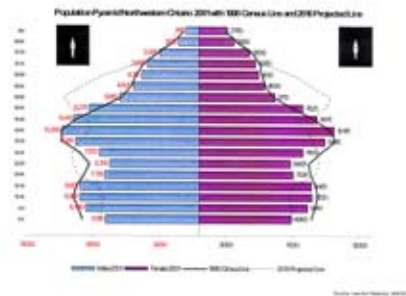
Massive Increase in Elder Care

The SLMHC service population is growing rapidly. It is approaching 85% of the population having Aboriginal origins.



The demographics of the Sioux Lookout Meno Ya Win Health Centre (SLMHC) service area also differ markedly from that of the mainstream Ontario population, and even that of the rest of Northwestern Ontario.

Our long term care facilities generally match the population split with between 80 and 90% of the residents coming from First Nations communities.



The population of our service area is aging rapidly, especially among First Nations people.

The Meno Ya Win Service Area

Meno-Ya-Win services almost 1/3 of Ontario's geography – ie. about 385,000 square kilometers populated by less than 30,000 people

