



Saskatchewan Seniors Mechanism: Aging in Place

*Practical Aspects for Maintaining the
Continuum of Care*



May 2011

Healthiest people ~ Healthiest communities ~ Exceptional service

Practical Aspects for Maintaining the Continuum

Questioning the Continuum

- Who is the system designed for?
- What is the greater meaning underlying the definition?
- Are we emphasizing the elements of **CARE** while neglecting the elements of **HEALTH**?



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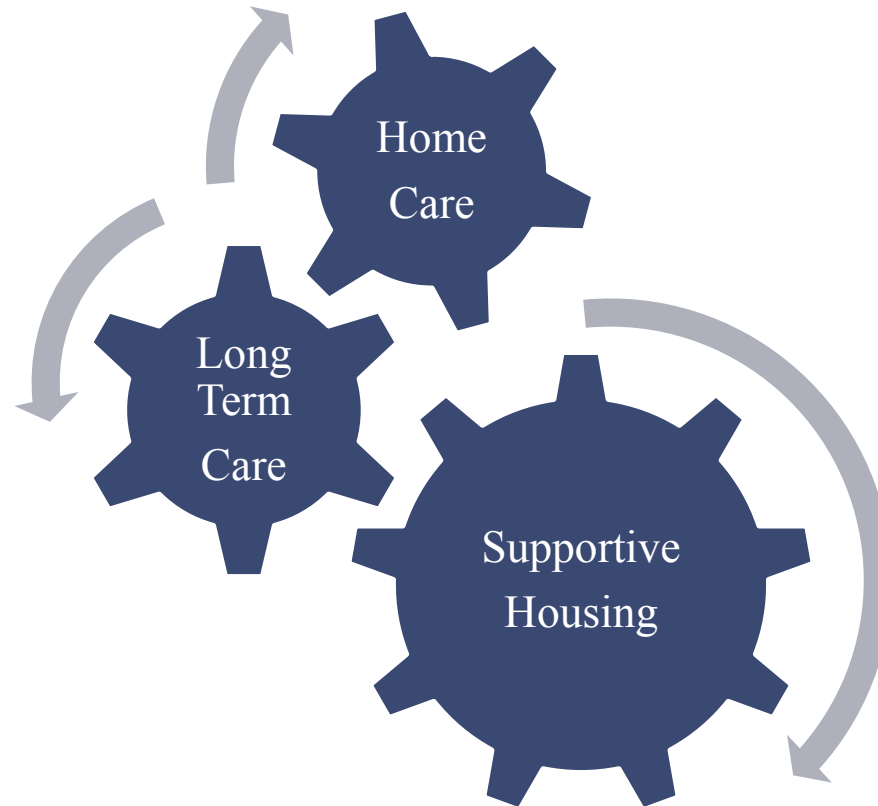
Building Blocks of the Continuum



OR?

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Interdependent/ Interlocking Blocks



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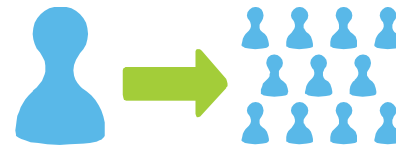
1. FUNDING

- Who Pays? How much do they pay?
- Value for Money
- Affordability- Whose responsibility is it anyway?
- Partnerships:
 - **Private**
 - **Profit**
 - **Purpose**



2. GOVERNANCE

- Who organizes and Operates the “system”
- What barriers set the parameters of what can be achieved?
 - Developmental versus Maintenance
 - Organized labour force
 - Professional Standards and boundaries



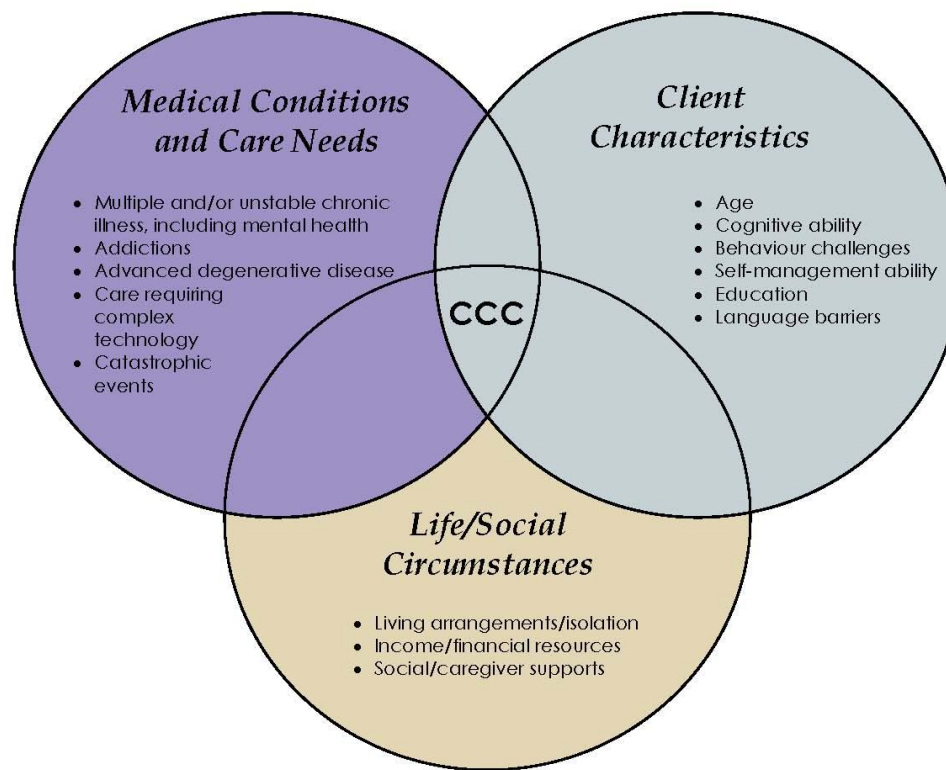
3. ONE SIZE DOESN'T FIT ALL

- Choice
- Taste
- Knowing ourselves and knowing others



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Three C's of Service/Living



4. CAPACITY AND ENGAGEMENT

- People buy in to what they “own”
- People buy-in to what they share
- People buy-in to what they create

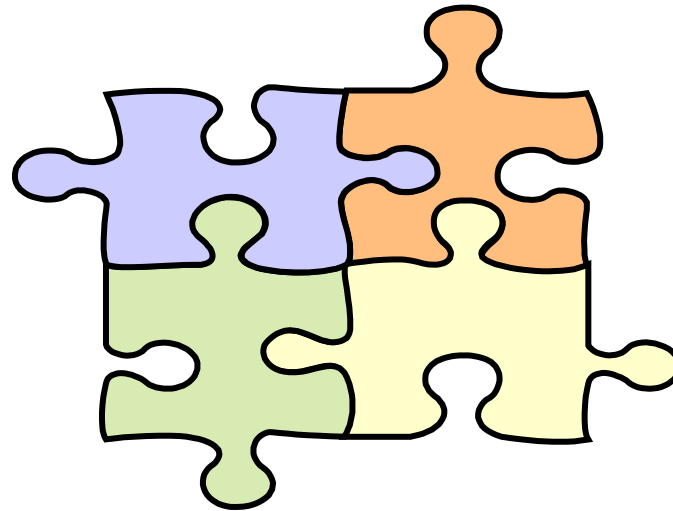


Creating Health

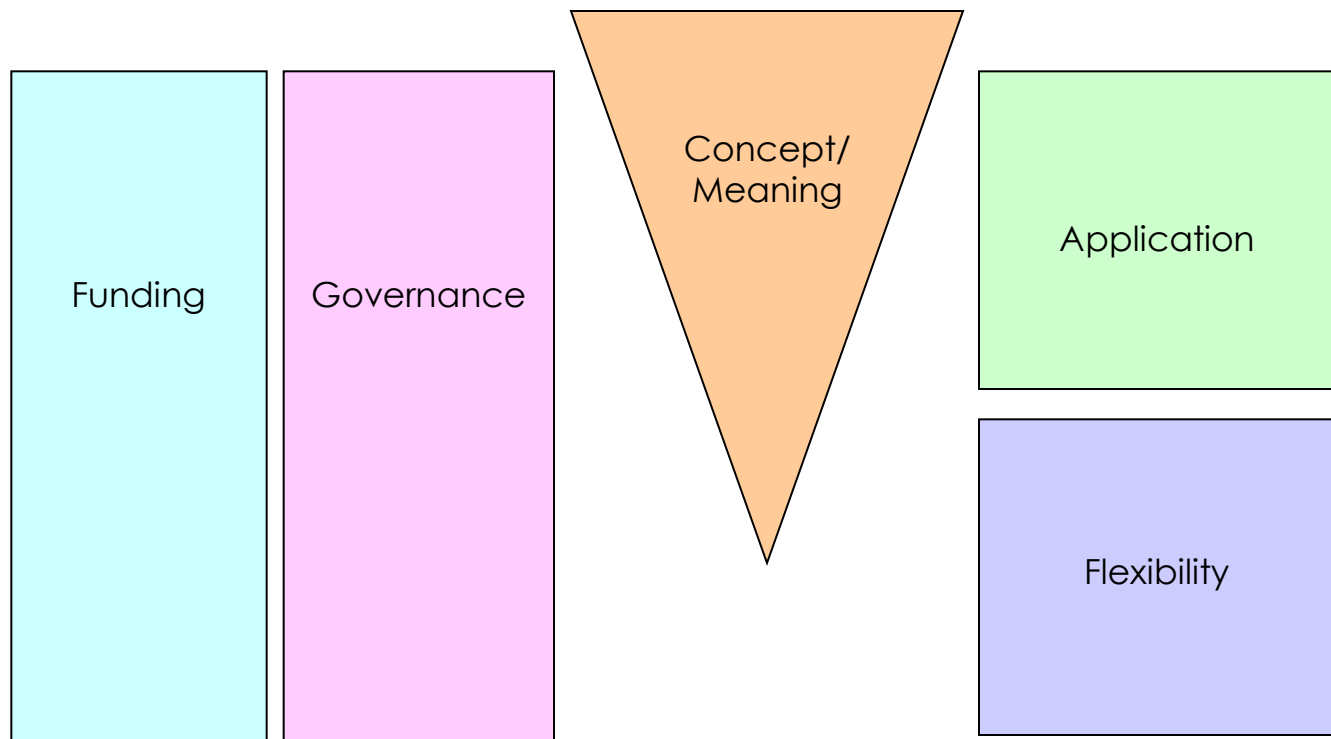
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Four Core Considerations of Continuum

1. Funding
2. Governance
3. Application (one size doesn't fit all)
4. Flexibility (Capacity and Engagement)



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Conclusions

The practical aspects of the continuum of life has meaning if we consider:

- WHO we are /WHERE we are
- WHAT we WANT
- HOW we participate in developing the WHO and the WHAT
- WHY- fundamental perspectives of our society/community

“What we desire for ourselves we desire for all”



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“If the future road looks ominous or unpromising, and the roads back uninviting, then we need to gather our resolve and, carrying only the necessary baggage, step off that road into another direction.”

Maya Angelou



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Slide Title



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