# Considering Housing Models for London's Aging Population

A Report Prepared for the Housing Working Group of the Age Friendly London Network



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## Housing in Older Adulthood

In Canada, the population is aging. Currently, the population of individuals who are aged 65 and older is greater than those who are aged 0 to 14 (Statistics Canada, 2014a). The changing demographics of Canada will have an impact on many aspects related to housing, such as what people desire and what they require (CMHC, 2008). Specifically, a trend towards wanting to age in one's home or community, or "age in place", will call for changes that facilitate housing and supports that adapt to changing needs individuals age (CMHC, 2008). Data from the most recent census indicates that a minority of older adults (7.9%) live in contexts, such as senior citizens residences or health care facilities, compared to the majority who live in private homes (92.1%) (Statistics Canada, 2011). Although there are many who wish to remain at home, it may not be feasible or the selected pathway for all aging individuals. Despite the above statistics, trends show that as people get older, the proportion who live in care facilities increases, while the proportion who live in single family homes decreases (Statistics Canada, 2011). As CMHC (2008) emphasized,

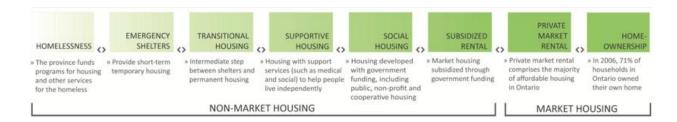
Given the diverse needs and preferences of the aging population, there will be a need to provide a full continuum of housing choices – in terms of location, forms of housing, types of tenure, living arrangements and range of services – which can enable older people to continue to live independently and participate in the community for as long as possible (p. 3).

Addressing housing needs in an inclusive manner is of the utmost importance, given that it is "...one of the most fundamental human needs" (Ministry of Municipal Affairs and Housing [MAH], 2011a, p. 2) and can be considered integral to health (Mikkonen & Raphael, 2010; Ontario Associations of Community Care Access Centres, 2013).

The government's role in fulfilling conditions that support health makes housing an issue to be addressed through public policy (Mikkonen & Raphael, 2010). A recommendation from a document that explored supportive housing in Ontario reinforces that you cannot put preference on one option over another, rather you need a range of options (Jones, 2007).

In Ontario, there is a spectrum of housing that encompasses non-market and market options. The range of non-market housing includes homelessness, emergency

shelters, transitional housing, supportive housing, social housing, and subsidized rental, while market housing includes private market rental and home ownership



#### (MAH, 2011a).

Figure 1 Ontario's Housing Continuum. Reprinted from Ministry of Municipal Affairs (2011a). Municipal tools for affordable housing. Toronto: ON: Ministry of Municipal Affairs. Permission for use will be sought.

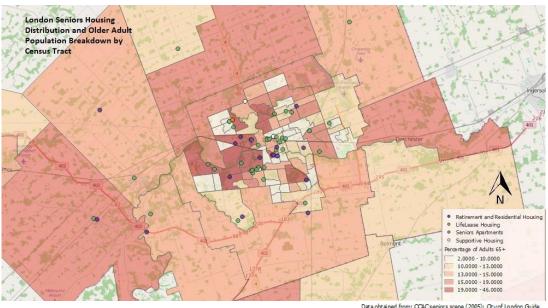
Creating a range of affordable options is an essential component of accommodating the financial needs of all individuals. A lack of affordable and secure options, for example, can lead to negative health impacts for individuals who live in these environments (Mikkonen & Raphael, 2010). Ensuring access to affordable housing may be particularly salient for older individuals who live alone, because 28.5% of these individuals fall into a low income range, opposed to 6.2% in households with families of two or more people (Statistics Canada, 2014b). Addressing affordable housing, however, is advantageous at a community level, not only for individuals who occupy lower/moderate income levels, but the community as a whole (MAH, 2011a).

## Older Adults in London

London is also a city that is aging. Earlier projections indicated that by this year, there would be a smaller proportion of individuals under age 15 than those 65 and older (City of London, 2014). Between 2011 and 2036, projections show that London's older adult population will increase by 7.8% (14.7 to 22.5%) (Age Friendly London, 2015). In London, older adults are distributed across several neighbourhoods throughout the city. Within London, there are 42 different neighbourhoods, which are grouped into Central London/Downtown, North East, North West, South East, and South West London. The proportion of the population who are over 65 differs in each neighbourhood; it is 9-14 % in Central/Downtown in North neighbourhoods, 7-26% neighbourhoods, 10-21% in North West neighbourhoods, 5-18% in South East, and <1%-48% South West in

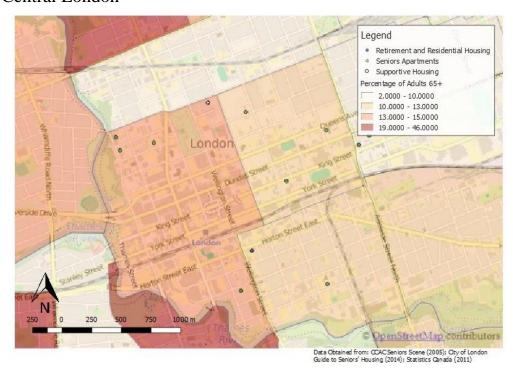
neighbourhoods (City of London, 2013). More households led by older adults in London are owned (69.1%), while a smaller proportion are rented (30.9%) (Age Friendly London, 2015).

#### London

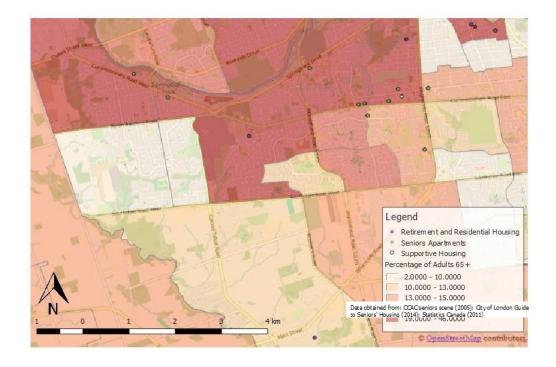


Data obtained from: COACseniors scene (2005); Otyof London (

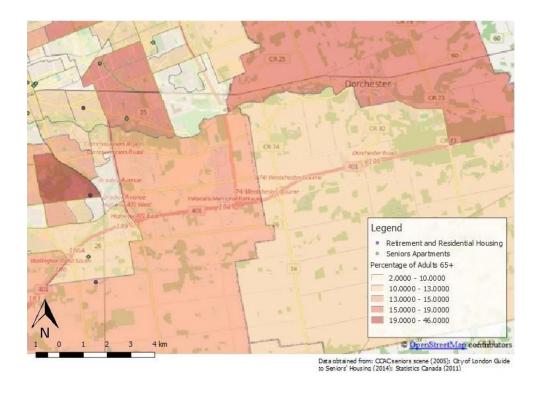
#### Central London



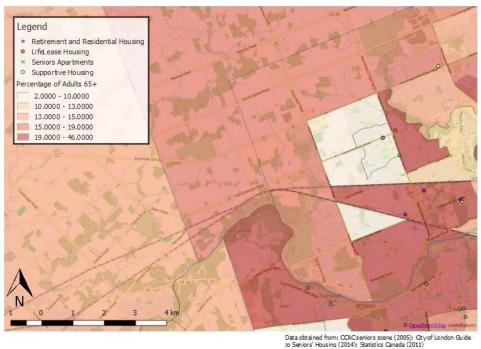
#### Southwest London



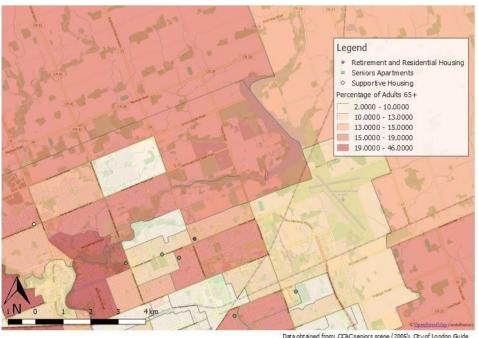
#### Southeast London



#### Northwest London



#### Northeast London



Data obtained from: CCAC seniors scene (2005): Otyof London Guide to Seniors' Housing (2014): Statistics Canada (2011)

The above maps illustrate that the population of older adults in London is the highest in the southwestern area of the city, where the greatest number of housing options are located. There is also a high proportion of older adults in the north part of the city, which has fewer housing options.

## Purpose of Booklet

Considering the aging population in London and the importance of a range of housing options, this booklet will outline a variety of housing models, the benefits and drawbacks of each model, and estimations of cost of living. Based on the findings, recommendations are made to the Housing Working Group of the Age Friendly London Network, regarding next steps towards implementing various housing models in London.

# Universal Design

## Universal Design

Universal design is "the design of products and environments to be usable by all people, to the greatest extent possible, without adaptation or specialized design," (The Center for Universal Design, NC State University, 2006). This idea has been applied to the design and development of universally designed houses and living spaces. The following main features that are recommended to be included:

- 1) No step-entry
- 2) Wide doorways and halls
- 3) One-floor living
- 4) Easily accessible controls and switches
- 5) Easy to use handles (levers instead of knobs)
- 6) Accessible bathrooms e.g. wall mounted sinks, curbless showers, grab bars

If these features were to be included from the beginning of designing new buildings, especially those designated as senior's housing, more people would be able to access the spaces without having to have specific 'accessible' entrances or apartments (Roden, 2015).

The Accessibility for Ontarians with Disabilities Act (2005) requires all public and private buildings in Ontario to be fully accessible by the year 2025 (Ontarians with Disabilities Act, 2005). In addition, new amendments to building codes for new housing facilities were enacted across Ontario in January 2015, requiring elevators in multi-story buildings, power door operators, and barrier-free washrooms in all new multi-unit residential buildings (MAH, 2013).

The City of Vancouver has also become the first city in Canada to enact a bylaw requiring all new homes to be accessible and adaptable for older adults and

individuals living with disabilities (Lee & Morton, 2013). Under this bylaw, all new single-family, townhouse, and multi-resident housing facilities must have wider doorways and hallways, lever handles on doors and plumbing fixtures, wheelchair-accessible building controls, wall reinforcements for grab bars to be added, and modified plumbing to allow for easy replacement of bathtubs with shower stalls if needed, in addition to other changes (Lee & Morton, 2013).

## **Benefits**

Adaptable housing models, such as the one enacted in Vancouver, benefit everyone by their implementation. For example, wider doorways not only make it easier for individuals using wheelchairs to enter and exit rooms, but they can also be helpful for moving furniture or other objects in the home (Office of Housing and Construction Standards, 2016). In addition, there is a wider cost-savings by implementing these modifications by preventing increased utilization of higher cost institutionalized care facilities (Office of Housing and Construction Standards, 2016).

# Market Housing Options

CMHC FlexHousing™

Market Value Life Leasing

Garden & Secondary Suites

## CMHC FlexHousing<sup>TM</sup>

FlexHousing<sup>TM</sup> is a model of housing introduced by the CMHC that aims to adapt to individuals as their needs change (CMHC, 2015). It can inform the construction of a variety of styles of new homes, not simply single family homes. The adaptations that can be made to the house are designed in a way to make them affordable. There is also the possibility of adding a secondary suite. The adaptability of this design makes it an attractive for all ages (CMHC, 2015). In addition to supporting aging in place, it offers "... practical, common-sense elements that appeal to a wide range of consumer needs and budgets while being energy efficient, healthy, safe and environmentally friendly—all under one roof" (CMHC, 2000, p. 1).

## **Benefits**

- Can apply to different types of new builds (e.g. townhouse; single family; multiunit residential buildings).
- Can be adapted to meet a variety of need and can be adapted if needs change over time (e.g. aging in place).
- Can enable the addition of a secondary suite for supplementary income or enable another occupant, if need be.
- Offers an "affordable, accessible, and adaptable" option in market housing.
- Has the option to add an elevator.
- Has features that enhance livability beyond simply mobility needs (e.g. placement of light switches).

(CMHC, 2000; 2015; 2016)

## **Potential Limitations**

- Design that is implemented into new builds.
- Does not address care needs outside of housing design (i.e. if other care needs are required, such as PSW support).
- Not a good option for individuals who are not able to secure a mortgage.

#### Cost

The estimated building costs for FlexHousing<sup>TM</sup> was determined in 2002 in Saskatchewan (CMHC, 2016a), which makes it somewhat difficult to determine the actual pricing as it would apply within London at this time.

The estimated cost described was for a 1,863 sq. ft. plan, which included a rough-in for an elevator, basement suite, and bonus room in the attic (CMHC, 2016a). The plan was adapted from a plan made in Ottawa that is described as a "good seller". The overall cost of FlexHousing<sup>TM</sup> with basic features was \$150,905.00 (taxes not included). The basic features of FlexHousing<sup>TM</sup> were \$7833.00, which was added to the cost of the original floor plan to reach the above figure (CMHC, 2016a).

If a house was constructed with basic features and then renovated (excluding the elevator), the renovations would cost \$49,605.00 and \$74,605.00 with the elevator (CMHC, 2016).

Again, these are estimates, but serve to illustrate an approximate cost for creating a home that can change based on your needs or features you want.

#### Resources

Below is a checklist that further describes the features of FlexHousing<sup>TM</sup>:

 $\underline{http://www.cmhc\text{-}schl.gc.ca/odpub/pdf/61943.pdf?fr} = 1421086550208$ 

The FlexHousing<sup>™</sup> website to see pictures and learn more about specific features:

http://www.cmhc.ca/flex/en/

## Life Leasing

In life leasing, the home is owned by a sponsor (non-profit or charitable organization) who typically oversees the its operation (MAH, 2014a). If an individual purchases a life lease, they buy the "right to occupy" or to live there, even though the sponsor is the owner. Within this model, there are different types of life leases including: Market Value, Price Index, Fixed Value, Declining Balance, and Zero Balance. Each of these has slightly different characteristics that can be beneficial or can serve as drawbacks, although the Market Value is the predominant one found in Ontario (MAH, 2014a).

Life leasing is an alternative model housing designed for older adults that differs from both owning and renting a home (Ministry of Municipal Affairs and Housing [MAH], 2014a). The available amenities, potential social connection, a reduced burden for home maintenance, or the cost may influence an older individual or couple looking to downsize to select this option. Some life leases are units within a building (like apartments), while others are free-standing homes in a community and, generally, are slightly less expensive than condominiums. You do, however, still pay a fee that is similar to a condominium fee each month (MAH, 2014a).

## The Gainsborough

In London, the only life lease option available to independent adults over 55 is the Gainsborough (Grace Communities Corporation [GCC], 2012). It is a Market Value model of life leasing, which means that they purchase and can sell at market value, and is sponsored by the Salvation Army. There are 120 suites in this community, with 10 different floor plans that offer one and two bedroom options. The units range in sized from 675 sq. ft. to 1140 sq. ft. They were also built with "Easy Living" elements, which enhance accessibility (GCC, 2012).

Some of the offerings of this community include underground parking, suites for guests to stay in, a chapel, an exercise facility, a whirlpool, a billiards room, and a surveillance system (GCC, 2012). Additionally, it is located close to amenities, which enables individuals to walk to them. The location also features gardens and 5 acres of grounds (GCC, 2012).

## **Benefits**

- Amenities available.
- Decreased burden of home maintenance.
- It can foster community (some also cater to certain religious denominations or nationalities).
- Do not carry the same liability issues as owning a large asset.
- The "life lease interest" can be passed to your beneficiaries, in the case you pass away.
- Market Value model allows for appreciation of the property, so a person can benefit at the time of a sale (including in situations if it is inherited).
- Provides an environment designed to serve older individuals (e.g. features that improve accessibility).
- Can be more affordable than other market options, such as condominiums.

(GCC, 2012; MAH, 2014a)

## **Potential Limitations**

- Require you to be independent; may have to move if you require more support in the future.
- Beneficiaries cannot necessarily move into the unit if you pass away (can sell).
- If you pass away, the costs associated with your life lease must still be covered until it sells (whoever inherits it must sell it and cover costs).
- You have the potential to lose money if the housing market depreciates.
- You do not own the unit or property.
- Requires you to pay money upfront for the purchase.

## Cost

In Market Value models of life leasing, you pay market cost for your unit, as well as monthly fees and property tax (MAH, 2014). At the Gainsborough, a one bedroom unit costs approximately \$100,000, while two bedrooms are around \$140,000 (these are estimates as there is a range) (The Gainsborough, personal communication, March 29, 2016). At this site, individuals are also responsible for a monthly fee, utilities, and property taxes (GCC, 2012). The overall cost of constructing this facility was \$11,200,000 in 1995 (D. Grant Construction Limited, n.d.).

## Other Models to Consider

Some life lease sponsors also have associated retirement homes or long-term care facilities (MAH, 2014a). These can be government funded, as well as privately funded. If a privately owned retirement facility is associated with the life lease sponsor, it is possible to apply to them directly for a space when care needs increase. Government funded facilities, however, require a person to go through the same process as other government funded facilities, which is overseen by the CCAC (MAH, 2014a).

An example of this is located in Collingwood, Ontario. Sunset Village features 40 units, with similar benefits discussed above, but is attached to Sunset Manor (Long-Term Care) (Simcoe County, 2014).

#### Resources

Below is an in-depth resource that reviews life leasing and would be beneficial for parties interested in this type of housing:

http://www.mah.gov.on.ca/AssetFactory.aspx?did=10455

## Garden & Secondary Suites

A garden suite is a self-contained, detached dwelling, with no basement, installed on the lot of an existing, permanent single-family home (CMHC, 2016b). Garden suites typically contain one or two bedrooms, a kitchen, a bathroom, and storage space (CMHC, 2016b; MAH, 2011b). These buildings are usually portable, temporary, and can be constructed in a modular manner, allowing for easy assembly. This type of housing is intended to be use by individuals or couples over the age of 65 who can live independently, or with little support (CMHC, 2016b). Generally, the owners of the existing home are the children or close relatives of the seniors, which enables them to provide care and support.

In regards to secondary suites, Ontario has legislation that requires municipalities to allow secondary suites in single-detached, semi-detached, and townhouse units (CMHC, 2016b). This legislation is intended to help provide more adequate and affordable housing. There are several considerations when looking at secondary suites, specifically within the building codes pertaining to entrances, fire safety, light, and moisture (CMHC, 2016b). Separate units within an existing building have extra requirements that must be met in order to be safe and secure.

## Considerations for London

The City of London (n.d) has a zoning bylaw surrounding this type of housing, Section 48: Temporary Garden Suites. According to this bylaw, a temporary garden suite must be built on a lot that is a minimum of 4000 square metres. Furthermore, the garden suite can be a maximum size of a 150 square metres, within 50 metres of the main building, and should be located in the interior side or rear yard. A garden suite is not permitted on the front or exterior side yard of a property (City of London, n.d).

## **Benefits**

- Garden and secondary suites provide an option for more affordable housing for seniors and allow for more aging in place (CMHC, 2016b; MAH, 2011b).
- Allow residents to maintain a level of independence while getting care, companionship, and security from their family members (CMHC, 2016b).

Potentially decrease the demand on community services because the family members can take on that role.

## **Potential Limitations**

- As the garden suite is a separate building, building permits and municipal regulations will apply. This can increase the cost as well.
- The bylaw regarding garden suites detailed many restrictions on construction. An appropriately sized lot would need to be available in order to build a garden suite.
- Secondary suites are subject to different zoning bylaws and regulations than that of single-unit residences that create additional steps to implement.
- Addition of another unit or residence on a street can create issues surrounding street parking.
- Expectations of care and support from family increases the risk of caregiver burnout.

#### Cost

The cost to build a garden or secondary suite varies widely based on many factors. Those factors include: size and design, type of foundation, distance from the manufacturing plant, municipal permit fees and property taxes, removal and restoration costs, and connection to water and wastewater (CMHC, 2016).

## Resources

More detailed information from the CMHC about Garden Suites can be found below:

http://www.cmhc-schl.gc.ca/en/co/acho/acho\_013.cfm

More detailed information from the CMHC about Secondary Suites can be found below:

http://www.cmhc-

schl.gc.ca/en/inpr/afhoce/afhoce/afhostcast/afhoid/pore/pesesu/index.cfm

# Social Housing

Non-Profit
Rent-Geared-to-Income
Affordable Housing
Co-operative Housing

## **Social Housing**

Social housing for seniors is a larger umbrella term that covers different types of housing/support for older adults with low to moderate income (Ontario Association of Non-Profit Homes & Services for Seniors [OANHSS], 2016). These can include non-profit housing, co-operative housing, rent supplement, and housing allowances (OANHSS, 2016). In addition to having an important role in tackling homelessness, access to affordable housing may assist in removing barriers to meeting other needs (Ministry of Municipal Affairs and Housing [MAH], 2014b).

It is also the most economical way to address homelessness; for example, it costs ~\$613/month to cover a rent-geared-to-income subsidy, while shelter beds cost ~\$2,100/month, a bed in long-term care costs ~\$3,960/ month, and a hospital bed costs ~\$13,500/month (MAH, 2014b). It is a concern, then, that federal (MAH, 2014b) and provincial (Cheung, 2016) funding for this type of housing does not seem to be sufficient to meet needs.

## Non-Profit Housing &

## Rent-Geared-to-Income

Non-profit housing is provided by organizations that do not profit from the rent paid, for example the municipal government, while rent-geared-to-income works is a subsidized form of housing (30% of total income in the household) (OANHSS, 2016). These two types of housing, however, have some overlap. For example, some non-profits in London and Middlesex offer rent at 95% of market rate, while others are geared to income (30% total) (The Corporation of the City of London [CCL], 2016).

In London & Middlesex, non-profit housing, co-operative, and public housing is overseen by the City of London (Housing Division) (CCL, 2016). Individuals who is seeking subsidized housing needs to apply through the Housing Access Centre. There is a recognized requirement for more housing options that are affordable seniors, which is being addressed with the Investment in Affordable Housing Program. In these cases, housing is not offered through subsidy, but rather are market rate or below (CCL, 2016).

## Affordable Housing

London has made a commitment to increasing accessibility to affordable housing (City of London, 2016). They are adding new housing that meet criteria for affordable housing (not more than 30% of income) and have added 1200 units since 2005. In these units, the cost to inhabit on of these units is market value or lower. In private affordable options, there are some offerings specifically for older adults, while others target both adults and older adults (City of London, 2016).

## Co-operative Housing

Co-operative housing is as the name suggests. There is no external landlord that manages the housing complex. Residents vote for a board of directors that can make decisions for the entire co-op unit. A co-op is considered a self-regulated legal corporation that is governed by the provincial Co-operative Corporations Act, human rights laws, and principals of natural justice (CMHC, 2016c).

Co-operative housing can be a series of townhouses to large apartment complexes. Members do not own property and is equivalent to renting a unit. Once the resident move out, they can no longer vote or make decisions regarding the co-op (CMHC, 2016c). Co-ops are much more affordable than normally renting a unit. Part of the reason is because housing is *not-for-profit* and their initial developments are funded by the federal and provincial government (Agency for Co-op Housing, 2015). Some units are also subsidized by the municipal government where rent is further reduced and is on a geared-to-income policy. Eligibility is dependent on income in these cases. Not all co-operative housing in Ontario, however, is publically owned, however (CMHC, 2016c) and co-operatives are not exclusively geared to older adults. In London, there is a 50+ Housing Co-Operative, but many other options that facilitate all ages.

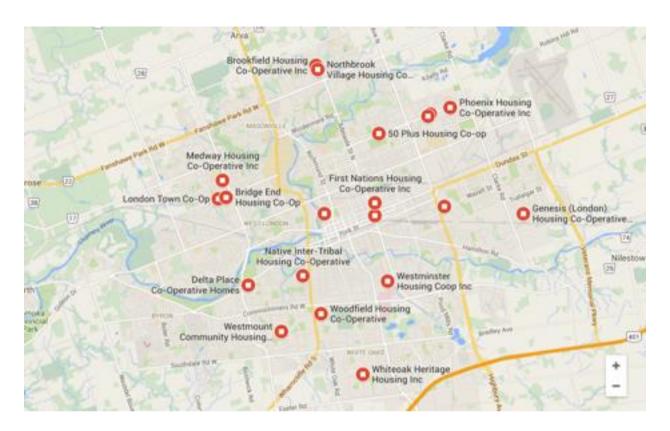
#### **Membership & the Board of Directors**

As a member, you can vote on how the annual budget is used such as how much money will be spent on certain upkeeps compared to others. You can also elect members or run to be part of the board of directors. As part of the board of directors, by-laws can be passed that all members of the co-op have to follow. By-laws then have to be voted by members and at least 2/3 of the members needs to agree before it is passed (CMHC, 2016c).

As a co-op, an annual meeting have to be held as part of the Co-operative Corporations Act. It is here that the annual budget, by-laws, and other issues can be addressed as a whole with its members. There must be a sufficient number of members present for co-ops to meet this requirement (CMHC, 2016c).

#### **Co-operative Housing in London**

Below is a map of London and all the known co-operative housing shown via Google Maps. Currently, there is 50+ Housing Co-operative that is aimed for an older population. It is an apartment complex made up of 56 units, with 27 1-bedroom units and 29 2-bedroom units. Only 10 units are considered as accessible units (South West Health Line, 2015).



## **Benefits**

- Support the housing needs of older individuals who have low or moderate income.
- Housing available in London & Middlesex directed towards individuals 60+. This may help facilitate social connections.

- Community. Co-ops can have facilities or projects that facilitates a sense of community such as producing monthly newsletters. Maintenance tasks such as lawn care can be divided among its members.
- Offer affordable ways for older adults to live in the community independently.
- Cost of living. As mentioned above, co-ops are not-for-profit corporations and units are subsidized based on income. Rent is much more affordable than typically renting an apartment.
- Some available for wheelchair accessible units.
- Self-governance. Unique to the co-op is its identity as a self-regulated corporation. Members and board of directors can advocate for change directly in the community they live in as opposed to challenging external landowners. The system is also democratic and hopefully allows budgets to be used effectively.

## **Potential Limitations**

- Long wait lists (CCL, 2016). A recent report shows an increased in older adults on waiting lists for housing geared-to-income (Ontario Non-Profit Housing Association, 2015). In relation to co-operative housing, a member can live there as long as they like as long as by-laws are followed and rent is paid on time. For prospective members, this can mean a very long wait time (Canada Mortgage and Housing Corporation, 2016).
- While there are wheelchair accessible units available, the proportion is rather small in some of the housing offered in London (CCL, 2016). In 50 plus co-op, only 10 units are considered accessible. This means the waitlist for these units will be even longer (South WestHealth Line, 2015). Co-ops are generally catered to a population that is fairly physically independent.

## Cost

Private affordable options are market or below cost (City of London, 2016). Other social housing falls is subsided, so costs 30% of the total income in the house, while others (e.g. some non-profits) are 95% of the market rent (CCL, 2016).

## Resources

Social Housing for Older Adults London:

https://www.london.ca/residents/Housing/Finding-Housing/Documents/A%20Guide%20to%20Seniors%20Housing-Booklet%202016.pdf\

Private Affordable Housing:

 $\underline{http://www.london.ca/residents/Housing/Finding-Housing/Pages/Affordable-Housing.aspx}$ 

Co-operative Housing:

Canada Mortgage and Housing Corporation: http://www.cmhc.ca/en/co/buho/gucoho/

The Co-operative Housing Federation of Canada: http://www.chfcanada.coop/eng/pages2007/about\_1.asp

The Agency for Co-operative Housing: <a href="http://agency-public.coop/">http://agency-public.coop/</a>

Contact information for 50+ Housing: http://www.southwesthealthline.ca/displayservice.aspx?id=12994

## Housing that Includes Health Services & Community Supports

Home and Community Care
Assisted Living
Supportive Housing

# Housing with Health & Community Supports

As adults age, loss of functional abilities becomes more common. After age 85, 25% of individuals report at least a moderate limitation in functional abilities (CIHI, 2011). As functional abilities decrease, assistance in daily activities is required. For this reason, housing that includes health services and community supports is essential for communities with aging populations.

## Home and Community Care

Home and community care refers to health care and other supportive services that individuals can access in their own home to help them live independently in their own community (Government of Canada, 2006). In Ontario, home and community care is currently coordinated by Community Care Access Centres (CCACs) who provide information to help individuals identify their needs, access private local service agencies who will provide care, and help individuals in need apply for long term care, supportive housing, or day programs (Ontario Ministry of Health and Long Term Care, 2008). While the home and community care sector is well resourced in Ontario, there have been concerns that the distribution of services through third party agencies, as well as outdated funding practices, has created a lack of quality in these services across the province (Born & Laupacis, 2012). In addition, Canada-wide, 15% of individuals requiring home and community care reported that they did not receive all of the care they needed in 2012 (Statistics Canada, 2012). For these reasons, it is imperative that best practices are examined for access to and provision of home and community care services, worldwide.

Research has shown that the majority of older adults worldwide, and across Canada, would prefer to retain their independence in their own homes if they can (CIHI, 2011). For this reason, several areas around the world have begun innovative home

care programs to improve the independence of older adults (Province of British Columbia, 2014). Certain countries with highly effective home care systems for older adults, such as Italy, Japan, and Germany, offer government funding for private home care services to allow older adults to remain at home with assistance in daily activities (Province of British Columbia, 2014). In addition, these best-practice programs tend to be tailored to the unique needs of individual clients, rather than assume that a single care model will effectively serve every person (Province of British Columbia, 2014). Finally, when informal caregivers are included in the care process, evidence has shown that the client, health care professional, and informal caregiver, all benefit (Province of British Columbia, 2014). In Canada, some provinces and regions have integrated some of these best practice procedures into their home care programs. For example, Fraser Health's Home is Best program in British Columbia, as well as Prince Edward Island's Integrated Palliative Care Program have had numerous benefits for their provinces' populations (Accreditation Canada and The Canadian Home Care Association, 2015).

## Cost

Home and community care is offered both through the public health care system by referral from a health care provider, as well as through private pay (Ontario Ministry of Health and Long Term Care, 2008).

## Recommendations

Due to Ontario's proposed changes to the CCAC system and provision of home care services, LHINs across Ontario, including South West LHIN, may have the opportunity to enact changes that may include some of these best practices in the near future (Church, 2015).

## **Assisted Living**

Assisted living refers to forms of supportive housing for older adults requiring minimal to moderate assistance with managing their health, household, and personal care (Bruin, 2012). Unlike traditional supportive housing, assisted living does not provide round-the-clock availability of services, and is utilized by older adults who can direct their own care and are able to continue to engage independently in a range of meaningful activities and social events (Bruin, 2012). While assisted living facilities are common in London, and across the country, they remain relatively unstudied. Best practices in assisted living facilities have revolved around maintaining residents' independence and quality of life, while providing choices for them to engage in meaningful activities in a number of ways (Park, 2007; Bruin, 2012).

## **Benefits**

Less costly than traditional supportive housing or nursing homes, assisted living provides a more affordable option to allow older adults to live with some supports in a setting that allows maintenance of autonomy and independence (Bruin, 2012).

## **Potential Limitations**

There is limited research on assisted living in general, as several models fall under the 'assisted living' umbrella that are examined in more detail. Balancing the ability to maintain independence while ensuring health care and safety needs are met is a key challenge in this housing type (Bruin, 2012).

#### Recommendations

Assisted living facilities should be widely available as an option for older adults looking for minimal to moderate care supports. These facilities should have a strong focus on maintaining residents' independence and quality of life (Park 2007; Bruin, 2012).

## Cost

Cost is determined by individual facilities. Many of the facilities are private pay, with additional fees depending on services provided (South West Health Line, 2015).

## **Supportive Housing**

Supportive housing refers to housing that is available for those living with severe physical, mental health, or cognitive disabilities, and is offered in residential settings throughout Ontario (South West CCAC, 2014). Supportive housing allows for those with greater needs than can be served through typical home and community care services to access a 24-hour availability of personal support and homemaking (Ontario Ministry of Health and Long Term Care, 2000). This type of housing contributes to the community need for a broad availability of housing options for seniors of varying abilities to age in place (Boydell, 2007). Currently, there are over 100 supportive housing programs in Ontario, and four of these programs exist in the London area (Boydell, 2007). Funding for the services offered in supportive housing are funded partially through the LHIN (Ontario Non-Profit Housing Association, 2013).

In Alberta, Smithfield Supporting Housing, built in 2003, is an assisted living and supportive housing facility for seniors that is located directly next to a large regional health services centre which provides residents access to specialized health services including dialysis (Boydell, 2007). Affordable monthly rent at this location includes a daily lunchtime meal, and every suite has a wheelchair accessible washroom (Boydell, 2007). This project began as a joint effort between the regional health authority and regional housing management organization (Boydell, 2007).

## **Benefits**

Supportive housing provides independent living for older adults with severe functional limitations and disabilities (Boydell, 2007). Homes that provide accessible units, such as Alberta's Smithfield Supportive Housing, allow individual age in place as their care needs and functional abilities change (Boydell, 2007). In addition, safe and easy access to required community resources such as health care centres, allows a decreased risk of falls or other safety issues occurring during outings from the home (Boydell, 2007).

## **Potential Limitations**

Not all supportive housing locations are affordable to potential residents. For example, the Smithfield Supportive Housing facility has a set fee of up to \$1000 for individuals per month to live in its apartments (Westlock Foundation, 2013).

## Cost

Current cost of supportive housing in the London region varies depending on the program (South West Health Line, 2015). Medically necessary support services are covered, however, rent varies (South West Health Line, 2015). Cheshire homes, Victorian Order of Nurses (VON), and Trinity Place Community Support Services, in London have rent geared to income for their residents (South West Health Line, 2015). Trinity Place offers compulsory meal plans for residents for \$197.50 a month for thirteen meals. All meals are made on-site in the Trinity Place kitchen and the staff serve the tenants. Four Counties Community Villa, located in Newbury, ON, has set rental rates of \$826/month for a 1-bedroom unit, and \$902/month for a 2-bedroom unit (South West Health Line, 2014).

## Mixed Needs Dwellings

Mixed Needs Dwellings
Senior Campus
Village Model

## Mixed Needs Dwellings

Mixed-needs dwellings consist of a continuum of care available to seniors based on their individual needs (Krout & Pogorzala, 2002). For example, Schlegal Villages offers full service retirement living, assisted care, and memory care depending on the time and needs in a persons life. Examples of mixed-needs dwellings here in London are Glendale Crossing and Chelsey Park. Another similar model in Vancouver is Haro Park that has more specialized options such as palliative support

## **Benefits**

- Internal transfers are available for residents from independent living-retirement as their needs change.
- Staying in the same continuum of care allows consistency for residents, whether it's with physicians, location, etc.

#### **Potential Limitations**

- Waitlists to get placed into one of the facilities.
- Although internal transfers are available for residents that are not quite at the long-term care level, to transfer into long-term care at the Ontario facilities requires externally using CCAC. CCAC is the gatekeeper to long-term care and this eliminates the internal transfer to long-term care from a more independent setting within Ontario.

## Cost

Chelsey Park: Independent living: \$1050/month

Assisted care (between long-term care home and retirement home) all meals, laundry, etc included: \$3400/month

Long-term care: \$1,774.81/month

## Senior Campuses

Seniors Campuses consist of housing for seniors available in residences of colleges and university (Krout & Pogorzala, 2002). This model is a type of intergenerational housing. In Ontario, an example of this type of housing is the partnership that Schlegal Villages and Waterloo University have developed. In this model, a long-

term care facility has been built on the Waterloo Campus. Another example of a senior campus is Lasall Boston in the United States. It's an intergenerational living

## **Benefits**

- Assistance, learning and enjoyment for both seniors and students.
- Age-peer companionship and supportive environment.

accommodation in the residence of a college.

- Connectedness to community and can help reduce isolation from the larger community.
- Intergenerational bonding.

(Krout & Pogorzala, 2002)

#### **Potential Barriers**

- People with a surplus of family within the area are less likely to move into seniors campuses.
- Homeowners (less likely to relocate, more likely to age in place).
- Tends to attract predominantly women and people previously associated with the university.
- Can be expensive.

(Krout & Pogorzola, 2002; Ward, Spitze, & Sherman, 2005)

## Cost

Schlegal Villages: long term care facility at University (cost the same as any long-term care)

Lasall Boston: residents must purchase square footage (\$300,000-\$800,000)

- residents receive 90% of this back once they move out.
- around \$4,000/month and residents must commit 450 hours per year in academic, volunteer or paid work endeavours

## Village Models

Village models/ continuing care retirement communities provide residents with a continuum of housing, health and social services as required to support aging in place. Some examples of village models are: Boston's Beacon Hill Village and

## **Benefits**

- Homeowners more likely to move to retirement villages due to access to funds.
- Age-peer companionship.
- Member driven (members helping members).

Supporting Active Independent Lives in Wisconsin

- Pre-screen vendors.
- Arrange group discounts.

(Ward, Spitze, & Sherman, 2005)

### **Barriers**

- Homeowners typically are more likely to age in place.
- Affordability.
- Family resources may prevent seniors from relocating into a retirement community.

(Ward, Spitze, & Sherman, 2005)

### Cost

Cost of initially buying residency:

▶ \$600 annually per person (available discounts for lower income residents)

# Ottawa Aging in Place Model

## Ottawa Aging in Place

The idea behind aging in place is to provide seniors with supportive services where they live so that they can remain in their own homes longer instead of having to move to a new facility every time an increase in care or support is needed. The Ottawa Aging in Place project focuses on providing health care services and linking residents to community supports; this also results in fewer emergency room visits or hospitalizations. The idea is to ensure services are available to older adults where they live, which in this program, means they are connected with a CCAC case manager and an on-site Support Outreach Coordinator. Support Outreach Coordinators are on site five half days a week to facilitate health and housekeeping services, social events, and to foster good relationships with tenants wanting their services. Coordinators are staff of a designated senior's community agency and funded through the LHIN. Many services are free of charge. The individuals who receive these services live in certain buildings of Ottawa Community Housing (11 buildings in total) (Ontario Ministry of Health and Long-Term Care, 2010).

### **Benefits**

- Provide a variety of services from meals and transportation to crisis intervention
- Liaise with CCAC case managers
- Support Outreach Coordinators are available on site to answer questions and coordinate services
- Many services are provided free of charge
- Enable individuals to remain where they live longer.

### **Potential Barriers**

- The program is only provided to people who live in Ottawa Community Housing apartment buildings
- There is a long wait-list to be approved to live in those buildings

### (Ontario Ministry of Health and Long-Term Care, 2010)

## Resources

Below is a pamphlet which describes the Ottawa Aging in Place model in detail:

http://owcs.ca/wp-content/uploads/AIP-Brochure.pdf

This is a link to the Ottawa West Community Support website, which describes the model as well:

http://owcs.ca/aging-in-place/

# Congregate Dining

## Congregate Dining

Congregate dining is when people come together to a communal dining room for meals. This type of dining is commonly used in Independent Living Facilities, where an individual may not need much assistance with day-to-day activities, but may want a more simplified lifestyle with more companionship or support. In these facilities, there is generally a kitchenette, not a full kitchen, available in the units. However, congregate dining an also be used in facilities that offer more support, such as supportive housing and long-term care homes. Residences that offer congregate dining generally provide at least one communal meal per day, with many providing more than that (Caring.com, 2016). A few places in London that offer congregate dining are: Trinity Place, Ashwood Manor, and Longworth Retirement Residence.

#### Other Potential Ways to Implement this Model

Congregate dining could also be used in places such as existing apartment buildings or co-housing situations. There is a co-housing complex in Ottawa that reconfigured seven townhouse units to have a shared, communal dining area (CBC News, 2014). This type of model allows the individual to live independently, but also gain the benefits of congregate dining. This can also allow for diverse, intergenerational relationships to form (CBC News, 2014). It may be valuable to look into other programs, such as one in Georgetown and Acton (Links2Aging, n.d.) and a 'culturally appropriate' program in Hamilton (Hamilton Niagara Haldimand Brant LHIN, n.d.), which seem to facilitate this model in different ways<sup>1</sup>.

### **Benefits**

Congregate dining offers many benefits to seniors. An individual who has the option of eating meals in a dining room no longer has to worry about preparing full meals for themselves. As well, the will be no concern regarding a person's safety in the kitchen if they are not cooking meals. Congregate dining also provides increased social interaction for residents. A study by Myer (2004), found that eating with

<sup>&</sup>lt;sup>1</sup> More information required to determine how the programs are organized.

others promoted socialization between individuals, an increased nutritional intake, and overall improved the quality of life of seniors.

### **Potential Limitations**

- Not all residences that offer it provide three meals a day. This means that the individual will need to buy and prepare food for the other meals.
- Most units have kitchenettes, but not full kitchens, which makes it difficult to prepare a full meal if the person would like to do so.

### Cost

The cost of residences with congregate dining ranges from \$1000-\$2000 a month on the low end in Canada, although places that offer more care, more luxury, or are in more expensive locations with cost more (Comfort Life, 2014).

Trinity Place: Price varies widely, as Trinity Place offers geared-to-income rent to assist those with low-income.

Ashwood Manor: Studio apartments range from \$2549-\$2980/month. One-bedroom apartments range from \$3351-\$4000/month

Longworth Retirement Residence: Studio apartments start at \$2955. One bedroom apartments range from \$3650-\$6000/month.

# Shared Housing/Home Sharing

## **HomeShare**

HomeShare is rooted in the concept of Aging in Place and aims to be an affordable housing alternative to what's currently in place. The Burlington Age-Friendly Council recognized a large portion of income for seniors is spent on rent, but rental apartments have a very low vacancy rate of 1-2% in their location (Community Development Halton, 2014). The council also recognizes over ¼ of households are one-person households and that themes of isolation and decreased mental health are issues for certain parts of the population (Community Development Halton, 2013). HomeShare is an alternative solution that can provide benefits for the people involved.

The idea is very similar to a landlord renting out rooms to a group of students. In the house, each person has their own private bedrooms, but will share common areas, such as the kitchen, laundry rooms, bathrooms, etc. What is unique about HomeShare is the agreement can be catered to benefit both parties. The landlord, also known as the home provider, can lower the rent of living provided the tenant, also known as the home seeker, if he/she is able to fulfill certain duties such as lawn care and house chores (Burlington Age Friendly Seniors Council, 2015).

In relation to the aging population, the older adult can be the home provider or home seeker. As the home provider, the older adult may seek out other older adults to share their home, perhaps, they may seek out a young adult who is able to help out with tasks around the house (Burlington Age Friendly Seniors Council, 2015). In general, this allows the older adult to remain in his/her home, even if he is starting to require more assistance with managing the house. At the same time, this can generate some income for the home provider for other needs. As a home seeker, the older adult can benefit from a lower cost of living and perhaps form a stronger sense of community as opposed to living by themselves.

#### Things to consider

When it comes to sharing a home, whether you are the home seeker or provider, it is important to communicate initially to see if it's a good fit. As a home provider, you will want references to know more about the home seeker. You will likely arrange a home visit where you can interview the person to see if he or she is a good fit. As a home seeker, you will want to know the exact responsibilities you will be engaged in and if the home provider is a good fit with you (Burlington Age Friendly Seniors Council, 2015).

Currently, identifying prospective home sharers is rooted in networking and advertising. You may want to ask the people in your community first, such as churches, leisure groups, etc. When it comes to advertising, there really isn't a streamlined specific method to go about doing so. You may post an advertisement in the local university or colleges, senior centre, the local newspaper, online websites such as Kijiji, or various community groups (Burlington Age Friendly Seniors Council, 2015).

# Benefits as outlined by the HomeShare Toolkit (2015)

- HomeShare can allow individuals to form a community within the home when they could be living in isolation.
- Cost of living would benefit both parties as they come to share the house and provide benefits to each other.
- HomeShare promote the concept of Aging in Place. When an older adult may require more assistance around his or her home, they can find tenants that helps them out more and fulfill their needs.
- More autonomy and choice is available for people who may otherwise live alone.

### **Potential Barriers:**

Advertisement can be difficult without a streamlined process for older adults.

- There might be no suitable home providers or home sharers for you, whether it is due to value differences or by experience.
- Potential conflict and lack of trust can steer people away from sharing their home. It is important to be aware of policies such as the Landlord and Tenant Act in order to prevent conflicts.

### Cost

The cost will vary depending on the home provider and the properties of the house. It should generally be cheaper than renting an apartment or a house, because the complex is being shared (Burlington Age Friendly Seniors Council, 2015).

### Resources

HomeShare in Ontario: http://www.homesharecanada.org/ON

The Burlington Age-Friendly Seniors Council: http://burlingtonagefriendly.ca/

The Halton HomeShare Toolkit: http://torontoist.com/wp-content/uploads/2015/04/The-HomeShare-Toolkit-Final.pdf

## Other Resources

## Resources for Accessible and Adaptable Homes:

The CMHC has a variety of PDF resources available that address accessibility of a home. There are found on their website (<a href="https://www.cmhc-schl.gc.ca/en/co/acho/acho/index.cfm">https://www.cmhc-schl.gc.ca/en/co/acho/acho/index.cfm</a>)

House Design:

http://www.cmhc-schl.gc.ca/odpub/pdf/66093.pdf?fr=1441919676959

Living Spaces:

http://www.cmhc-schl.gc.ca/odpub/pdf/66095.pdf?fr=1441919698084

Bathrooms:

http://www.cmhc-schl.gc.ca/odpub/pdf/65686.pdf?fr=1443199043832

Kitchens:

http://www.cmhc-schl.gc.ca/odpub/pdf/65588.pdf?fr=1441919731396

Outside Spaces:

http://www.cmhc-schl.gc.ca/odpub/pdf/67572.pdf?fr=1441919768871

Ramps:

 $\underline{http://www.cmhc\text{-}schl.gc.ca/odpub/pdf/65023.pdf?fr}=1441919794286$ 

Appliance Design:

 $\underline{http://www.cmhc\text{-}schl.gc.ca/odpub/pdf/65080.pdf?fr}=1441919751021$ 

A Guide to Home Adaptations (self-assessment):

http://www.cmhc-schl.gc.ca/odpub/pdf/61087.pdf?fr=1442318489140

## Funding Resources:

While it was not within the scope of this project to deeply explore funding options, below are possible sources to be explored. Most of these options are directed towards individuals who need housing, while there are some available that may fund larger program goals.

Various Sources that Fall under the Investment in Affordable Housing for Ontario Program (Rental Housing Component, Ontario Renovates, Off-Reserve Aboriginal Housing):

http://www.mah.gov.on.ca/AssetFactory.aspx?did=9288

Examples from other places in Ontario:

http://www.simcoe.ca/SocialHousing/Documents/JC\_OR%20-%20Urgent%20Repairs%20application%20package%202016-17.pdf

 $\frac{http://www.simcoe.ca/SocialHousing/Documents/Application\%20Requirements\%}{20Secondary\%20Suites\%202016.pdf}$ 

https://www.cityofkingston.ca/residents/communityservices/housing/programs/secondary-suites

Home Adaptations for Seniors Independence Program (First Nations):

http://cmhc.ca/en/ab/hoprfias/hoprfias\_005.cfm

Residential Rehabilitation Assistance Program for Persons with Disabilities (First Nations):

http://cmhc.ca/en/ab/hoprfias/hoprfias\_011.cfm

Seed Funding for Affordable Housing:

http://cmhc.ca/en/inpr/afhoce/afhoce/upload/cmhc-seed-funding-affordable-housing.pdf

Healthy Homes Renovation Tax Credit:

https://www.ontario.ca/page/healthy-homes-renovation-tax-credit

Home and Vehicle Modification Program:

http://www.marchofdimes.ca/EN/programs/hvmp/Pages/HomeandVehicle.aspx

# Recommendations

The recommendations section is meant to outline some of the preliminary suggestions for the housing in London, which are based on the information analyzed in the creation of this booklet. Multiple recommendation are presented, so that the Housing Working Group is able to select those that seem to fit best with the group's goals and resources.

## Overarching Recommendations

The information found in the booklet can be used for three main purposes: 1) to educate older adults in London about types of housing available currently, 2) advocate/educate builders and developers about potential areas for expansion, and 3) advocate to the municipality for changes to current programs, or for funding. These overarching recommendations can guide general use of the information provided, while specific recommendations are below.

## Market Housing Models

- 1. Create and distribute education about adaptable housing, such as the FlexHousing<sup>™</sup> model, throughout the community to raise awareness of this option. This could impact individuals who are planning on building a house throughout the lifespan.
- 2. Discuss FlexHousing<sup>TM</sup> with local builders to educate about this option and advocate for accessible housing construction.
- 3. Explore the option of connecting Life Leasing housing with Long-Term Care facilities (e.g. Sunset Village and Manor in Collingwood).
- 4. Explore funding options available for the development of garden or secondary suites, to support translation of this knowledge to interested parties.

## **Social Housing**

1. Connect with the Peel Advisory Working Group on Older Adults' Housing, contact: Patricia Chrisjohn (Region of Peel Housing and Property Department; 905-453-1300 ext. 356). Peel region appears to have strong strategies in place

in terms of increasing social housing options for older adults (32 buildings for seniors, as well as units in other family based buildings) (Region of Peel, n.d.). Additionally, there are 289 units that are identified as supportive housing, which delivers supports within the housing facility for those residents who require them, such as seniors (Region of Peel, n.d.).

# Housing that Includes Health Services and Community Supports

- 1. Home and Community Care: Due to Ontario's proposed changes to the CCAC system and provision of home care services, LHINs across Ontario, including South West LHIN, may have the opportunity to enact changes that may include some of these best practices in the near future (Church, 2015).
- 2. Assisted Living: Assisted living facilities should be widely available as an option for older adults looking for minimal to moderate care supports. These facilities should have a strong focus on maintaining residents' independence and quality of life (Park 2007; Bruin, 2012).
- 3. Supportive Housing: Supportive housing facilities should consider access to required medical services for residents, much like Smithfield Supportive Housing does in Alberta. In addition, supportive housing organizations should have affordable options, as those in most need of these services are often also financially vulnerable (Federation of Canadian Municipalities, 2015).

## Mixed Needs Dwellings

1. It may also be beneficial for the Housing Working Group to make contact with Schlegal Village to further discuss the direction that they will take with their London location.

## Ottawa Aging in Place

1. Currently, London does not have a program that mirrors the Ottawa Aging in Place model. The unique inclusion of support services to facilitate aging in place would be a beneficial addition to housing offered in London. Further research is needed to determine the feasibility of developing a similar program in London.

## **Congregate Dining**

1. Based on interest expressed by the Housing Working Group, some programs that appear to offer congregate dining in a somewhat untraditional way were provided. From here, it would be beneficial to follow-up with these groups to determine how they are organized, funded, and delivered to determine if untraditional delivery of congregate dining is possible in London.

## Home Sharing

1. Currently, there does not seem to be an appropriate venue or formal process for older adults in London to find individuals other individuals to homeshare with. The Housing Working Group could explore how to distribute the toolkit or develop a program that facilitates home sharing. It is recommended that the toolkit (provided in the resources of the above section) be reviewed and, if necessary, contact be made with the group who developed it to assist with future directions.

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