DELTA'S HEALTH HUB

Enhanced Connections to Health Services for AL/IL Seniors

Delta Division of Family Practice, Fraser Health, Augustine House and its Residents

Project Aim

To simplify, enable and enhance access to primary care services, provide education to support chronic disease self-management, and improve the continuum of care more generally for seniors living in Assisted Living / Independent Living (AI/IL) facilities

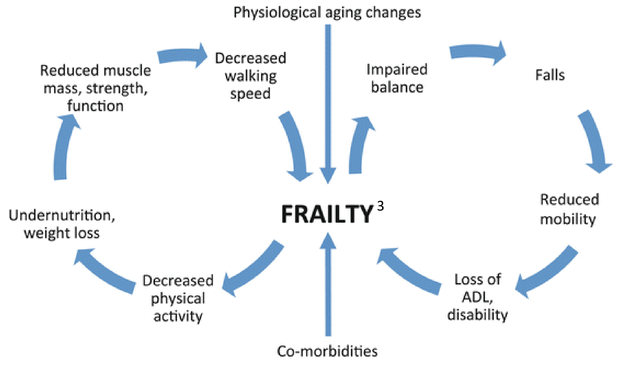
- Detect targeted medical problems early
- Provide fast and easy access to Primary Care services in one location
- Facilitate streamlined transition between available services
- Reduce the need for emergency room visits and hospital admissions
- Enable residents to remain independent longer by fostering healthy aging

Context

Delta's population is aging – It is expected that the percentage of seniors will rise from 15-20% of the population to 41% by 2024. This increase is significant given that seniors have a higher prevalence of chronic conditions than the rest of the rest of the population. In 2014, a survey of Delta's seniors found that:

- **47%** reported having high blood pressure
- **28%** were living with heart disease
- **22%** were living with diabetes
- **27%** reported living with multiple conditions[1]

Within AL/IL residences, there is an increasing number of seniors who have multiple conditions and who may be classified as being frail—a state of increased vulnerability associated with decrease in physical and mental capacities.[2]

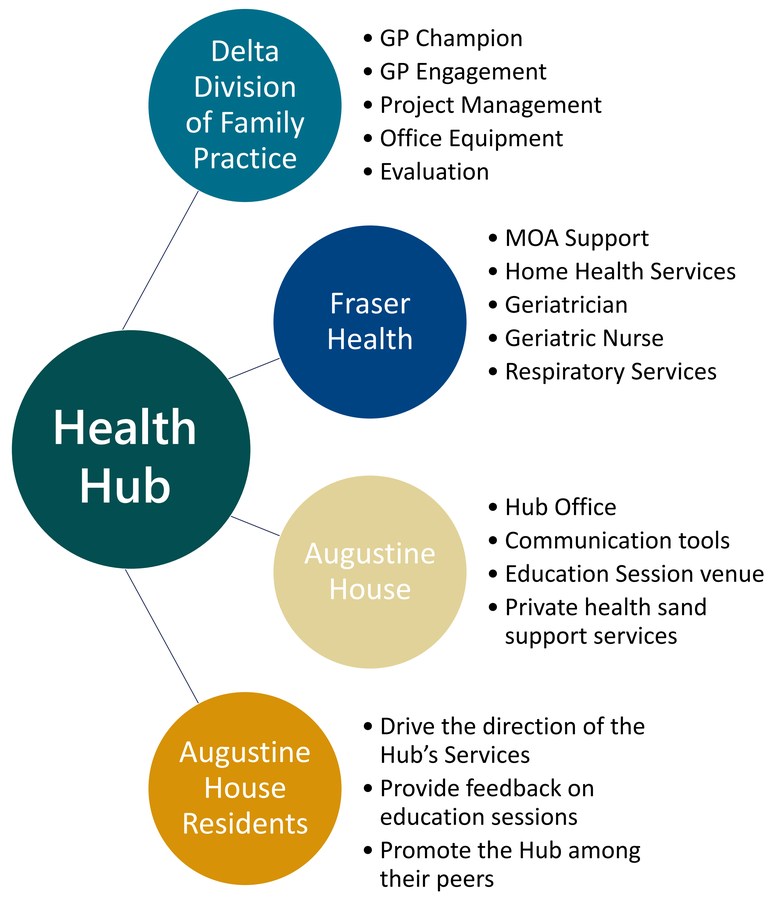


Emergency visits from this population are documented to be high and, as data from Fraser Health confirms, steadily increasing over time.[4] In order for seniors, in particular those living in these AL/IL residences, to be discharged back to their homes, there needs to be consistent ease of access to primary care services and allied health supports outside of hospitals to support their continued care.

The *Health Hub* Model

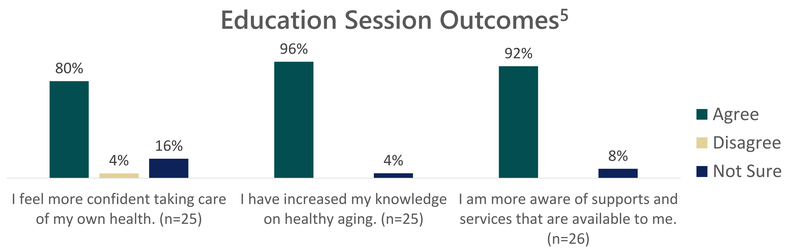
Based out of Augustine House in Delta, BC, the Health Hub is a service that connects residents to their family physicians and manages their referrals to geriatricians, pharmacists, and Fraser Health's Home and Community Services. The Hub is supported by three partner organizations—the Delta of Division of Family Practice, Fraser Health, and Augustine House—and is driven by input from Augustine House's residents.

In addition, the Health Hub organizes and hosts bi-monthly education sessions that empower Hub members, their families, and the wider Augustine House assisted living community on how to self-manage their health and wellness. Topics that have been hosted include falls prevention, successful aging, and how to make healthy food choices. As part of these sessions, the Hub hosted presentations by community partners including Breathe Well and Fraser Health's Home and Community Services.



Early Outcomes

- **37** Members
- **33** Physicians engaged through SBARs forms
- **18** Medication reviews with pharmacists scheduled
- **5** Appointments made with a Fraser Health geriatrician
- **2** Referrals to Home Health services



"Having the [education] sessions is useful. We don't know everything. There's so much to learn. And **we can learn as a community**. We have the opportunity to learn as much as possible so we can help ourselves."

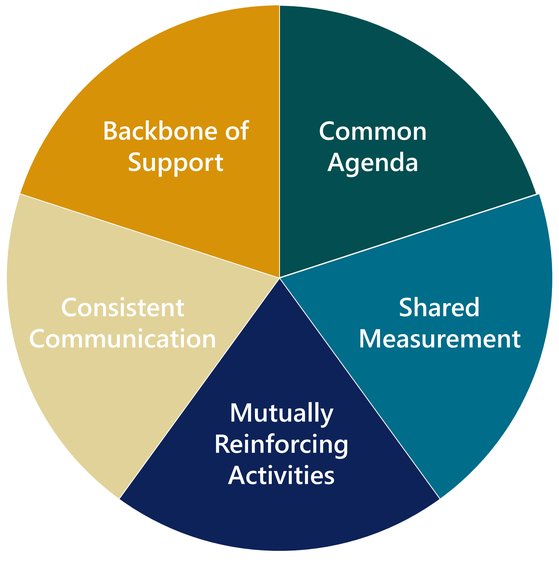
- Health Hub Participant

Sustainability

One of key pillars of this project is engaging residents at Augustine House to become active participants in their own health care. Through the education sessions, residents are now better equipped to self-manage their health and wellness.

Moving forward, the project partners are exploring opportunities to not only vertically expand the services available at Augustine House's Health Hub, but also horizontally to other AI/IL facilities within the region and beyond.

Collective Impact: The Importance of Partnership



One key factor that has enabled the successful implementation of the Health Hub is the strength of the partnership between Delta Division of Family Practice, Fraser Health and Augustine House. From interviews with representatives of each organization, project partners have felt valued and that their work is contributing meaningfully to the collaborative project.

The partnership fulfills the criteria set forth by the Collective Impact Framework (see diagram left). Each partner organization is committed to the Health Hub's vision and have collectively worked together to solve challenges as they have arisen.

"The biggest accomplishment was that we all **have one clear vision**. We are able to see the vision. Everything has come in place very nicely. There's cohesion and a unity of vision."

- Health Hub Project Team Member

Delta Division of Family Practice — A GPSC initiative

Augustine House

fraserhealth

SharedCare — Partners for Patients

Reichert & Associates — Program Evaluation & Research

References

1. Fraser Health (2017). *Delta Senior Community Profile*
2. CIHI (2017). *Seniors in Transition: Exploring Pathways Across the Care Continuum*
3. Binder, E (2015) Frailty in Older Adults In Sulivan GM, Pomidor AK (eds.) *Exercise for Aging Adults* (pp 123-129). Cham, Switzerland: Springer
4. Fraser Health (2017). *ED Visits and Admissions by Augustine House Clients*
5. Delta Health Hub (2018-2019). *Education Session Survey Data*