



DEMENTIA CARE NETWORK ALGOMA STEERING COMMITTEE

Tuesday, September 19, 2006
10:00 a.m. to 12:00 noon

Alzheimer Society of Sault Ste. Marie and Algoma District
633 Albert St. E.
Sault Ste. Marie, ON

MEETING SUMMARY

Present: Duane Buchanen
Hazel Yakich
Patty Greve
Sharon Swain
Arnelda Pine
Barb Forest
Carolyn Cybulski

1. Welcome and introductions.
2. Carolyn provided an update on the Alzheimer Knowledge Exchange (AKE). The AKE was initiated to support people and agencies and to link people to resources with respect to dementia care. The website is found on the ehealthontario portal (www.ehealthontario.ca) – click on Seniors Health. Users need an access code to go further into the site. Those wishing a password should contact Carolyn and she will get in touch with the AKE Coordinator Katherine MacDonald.
3. Physician Recruitment and Retention priority-setting session: Carolyn will be attending this event on Sept. 21, and can bring forward suggestions from this committee related to recruitment of specialists in geriatrics. Some comments from members are as follows:
 - It is recognized that geriatrics is not seen as an attractive speciality among physicians. A recent report stated that there are very few physicians currently training for this speciality, despite our aging population
 - Nurse practitioners who are trained in geriatrics would be helpful, but there must be enough GPs to supervise the NPs.
 - Residents from long-term care homes with dementia who present in Emergency are not well served by the lack of continuity among physicians.
 - Suggested that the city or hospital make available a bonus or scholarship for medical students/physicians from the North who are willing to train in a speciality area like geriatrics, in exchange for a committed length of stay in our community.

- Suggested that local physicians working in geriatric assessment clinic act as local champions for other physicians wishing to further their education/interest in this field.
 - Suggested that MOHLTC provide additional funds for physicians working in geriatrics, since patient visits are often more lengthy for this clientele and therefore less lucrative for physicians.
4. Memo from Alzheimer Strategy Transition Project Manager Scott Macpherson: Carolyn distributed a memo from Scott which presented the idea that dementia networks within LHIN regions should work collaboratively to have a common voice to the LHIN. Options include either one dementia network for the entire region, or maintaining the local networks but having each network provide a representative for a regional dementia network. Members preferred the latter option. Concerns included the vast geographic region of our LHIN, cost and time to attend regional meetings, coordination of the regional group, and the potential for local issues and local initiatives to get lost. Members recommended that Carolyn contact the chairs from the other Networks in our LHIN area to hear their thoughts, and also that she contact Scott Macpherson to discuss the issue. She will also let members know if a webcast/teleconference/meeting is scheduled regionally.
 5. Review of 2003 care map: No major changes were noted.
 6. Review of "Dialogue on Dementia Care" document: Members briefly reviewed this document prepared by the HKPR Dementia Network, and agreed that a similar document for our region would be useful to make LHINs aware of dementia care/elder care issues. A consultant would need to be engaged to carry out this study. Carolyn will investigate some options.
 7. Supportive housing: It was agreed that the lack of sufficient supportive housing units were placing additional pressures on all aspects of the long-term care system (community and facilities). The District Health Council document supports the need for increased resources in this area. It appears that the MOHLTC is revisiting this issue and may be willing to invest more money in supportive housing projects (proposal submitted by one community agency for a supportive housing project similar to the March of Dimes model). Supportive housing could be a component of the document referenced in point #6 if the resources became available to carry out this project.
 8. Circulation of reference materials: Information circulated on the Changing Melody conference for people with ADRD, and a guide for physicians on driving and dementia produced by the Kingston Dementia Network.
 9. Round table reports:
 - SMHS: Working on trying to increase time provided by visiting consultants. Also, Dr. Byers will be doing 3 presentations when she is here in October.
 - Red Cross: Accreditation process completed. Receiving funding for mental health and acquired brain injury training. Experiencing an extreme

shortage of PSWs – advocating for funding to train untrained workers to PA+2 level and eventually to PSW.

- Great Northern Nursing Centre: Currently at capacity with 83 residents and 25 on wait list. Still designated as interim beds.
- VON: Valerie Durnford new hospice coordinator. Day program operating at 3 days per week and experiencing some challenges with numbers attending. Have received 8 referrals from CCAC since the beginning of March.
- Alzheimer Society: March 8 2007 designated as date of annual education conference with Dr. Sandra Black as key note speaker. Other speakers yet to be confirmed. Proposal submitted to MOHLTC on behalf of Dementia Network Education Committee for training of community PSWs in Gentle Persuasive Approach.

10. Next meeting date: Tuesday, December 5, 2006 at the Alzheimer Society.

11. Meeting adjourned at 11:50 a.m.