

2012 LOS Conference Notes

Responding to Our Aging Population

Common Agenda

creating high quality of life for seniors in Ottawa?

High level intent but then differing views of how achieve/ measure?

How will all partners support and change during the development of the collective impact ?

When arrive at new structure what happens to the original structures?

E.g. Orangeville all worked together but what happened with original parties/agencies

Community support organizations...do we create another agency? If we all contribute depletes our resources...

Are the funding organizations to become the backbone?

Do we need collective impact table on Aging?

Elements of a Common Vision:

- **high level, not defined**
- **make Ottawa a " Destination", example**
- **create an age friendly city**
- **strive to be the best**

Agreement that CI makes sense...no longer an opting

If create a CI table...could we use an existing organization ?

*** agreed that best choice: Council on Aging**

Or BIA – links to BBB

OCSA

Who needs to be at the CI Table

- funders, LHIN
- recipients, the experts/seniors, the lived experience
- independent business men
- Educational institutions
- Hospitals
- Representatives of “diversity” lens, GLBT,
- Primary care, health promotion, all those involved in Primary Care Plan
- Media
- Politicians
- Link to Gatineau, as models
- Research, academics, students
- Service providers
- Private “residences” & businesses specializing in care for seniors
- Data collectors, CIHI, CIHR
- Legal community
- Funeral homes

First tier and 2nd tier...e.g. housing providers

Faith groups

Disease related organizations

Critical success factors

- having discussions at the right level, having organizational support
- identifying champions
- identifying successful business men/women
- resourcing
- leadership

Are the funders having a similar conversation?