IMPACT UPDATE health planner

SUMMER 2003

A publication of the Toronto District Health Council

Effecting system-wide improvements in health

In 2001, the TDHC adopted a new vision and mission. Our vision is to:

- Provide leadership in integrated health services;
- Have an impact on health outcomes;
- Influence health policy and;
- Enjoy a positive profile and high recognition.

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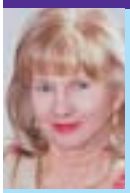
Message from Carole Kerbel, TDHC Council Chair



I consider it an honour and a privilege to sit as Chair of the Toronto District Health Council (TDHC). One of the great rewards of being involved with the Health Council, is the opportunity to plan for and effect system-wide improvements in health. As you will see from the articles in this Newsletter, the TDHC has been successful at doing so in areas such as Palliative Care, Homelessness and French Language Services. It is our goal, that these achievements make a positive difference in the lives of those who matter most: Toronto area healthcare providers and their patients. Our work, however, is far from done. The TDHC will continue to consult healthcare stakeholders and learn about the ever-increasing challenges they face. As we do, our commitment to making a positive impact on how healthcare is delivered in Toronto will grow even stronger!

Toronto Palliative Care Network Gets Own Office Space

Palliative Care is provided to individuals and families who are living with or dying from a progressive life-threatening sickness, or who are bereaved. With it, terminally ill individuals and their loved ones have a compassionate, dignified setting for coping with death and illness.

For ten years, the Toronto District Health Council (TDHC) has facilitated planning to improve access for Toronto residents to high-quality palliative care services. In particular, it has determined a need for these services being provided in a hospice or home-based setting. Throughout the 1990s, the TDHC closely consulted with healthcare providers and consumers on this issue. It used feedback from these consultations to advise the Ministry of Health and Long Term Care (MOHLTC) of the need to develop, implement and monitor a palliative care service delivery model in Toronto. This hard work paid off in November 2000, when the Ministry of Health and Long Term Care handed the TDHC the challenge of establishing an integrated palliative care network in Toronto. It was given no extra program funding to do so. Recognizing the importance of this issue to Toronto residents, the Council nonetheless managed to find the necessary resources within its existing operating budget to move forward.

A volunteer TPCN Transitional Steering Committee was established, which set to work developing the structure for a palliative care services network under the guidance of the TDHC. It developed the framework for a network composed of a central TPCN Steering Committee and four Regional Palliative Care Committees, one to represent each region in Toronto. As a result of its hard work, the first founding TPCN Steering Committee was formed in the fall of 2001. Over the course of the next year, this committee began the complex process of actually building the TPCN.

By March of 2003 over 36 Toronto area organizations across all health sectors, had successfully been recruited to lead the Network. These stakeholders provide human and financial resources to support the operation of the TPCN. The member organizations include 11 hospices, 16 hospitals, all six Toronto CCACs, two community organizations and one non-governmental organization.

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The TDHC and MOHLTC are ex officio members of the Steering Committee. Individual memberships are open to interested stakeholders at the regional level. The Chair and Vice-Chair of the Toronto Palliative Care Network (TPCN) sit on the Steering Committee. The Chair of the TPCN is Ms. Judy Filman, who is Manager of the Palliative Care Unit at Princess Margaret Hospital. Mr. Frank Wagner is the TPCN Vice-Chair. He is the Manager of Client Services and Co-chair of the HPCNet Project, Toronto CCAC/East York Access Centre.

Recently, the TPCN moved from the TDHC into its own office space. Next on the list, is the hiring of an Executive Director and Administrative Assistant. They will provide support to the network in implementing its vision. This vision is to ensure a full range of high-quality palliative care services will be available to the people of Toronto and their families across all care settings.

Thanks to over ten years of dedicated work by the TDHC, the TPCN is no longer just an idea. It has and will continue to evolve into an independent, self-supporting organization. One that will have a long-lasting and positive impact on palliative care service delivery in Toronto. ■

For the full story about the TDHC's work to establish a Toronto Palliative Care Network (TPCN), visit the Council web-site at www.tdhc.org. Click on the Impact Update icon, then click the Palliative Care Network logo.

Jackie Whittingham

Tiiu Ambus

For ten years the Toronto District Health Council (TDHC) has facilitated planning to improve access for Toronto residents to high-quality palliative care services in all settings – particularly in a hospice and home settings. Thanks to the dedication of TDHC Health Planners such as **Jackie Whittingham** and **Tiiu Ambus,** the Toronto Palliative Care Network (TPCN) has been established to make this vision a reality. Tiiu is currently serving as the Acting Co-ordinator. Once only an idea, the TPCN will continue to evolve as an independent, self-supporting organization. One that will have a long-lasting and positive impact on palliative care service delivery in Toronto.

Feel free to contact Tiiu Ambus, Acting Co-ordinator of the Toronto Palliative Care Network (TPCN). She can be reached at:

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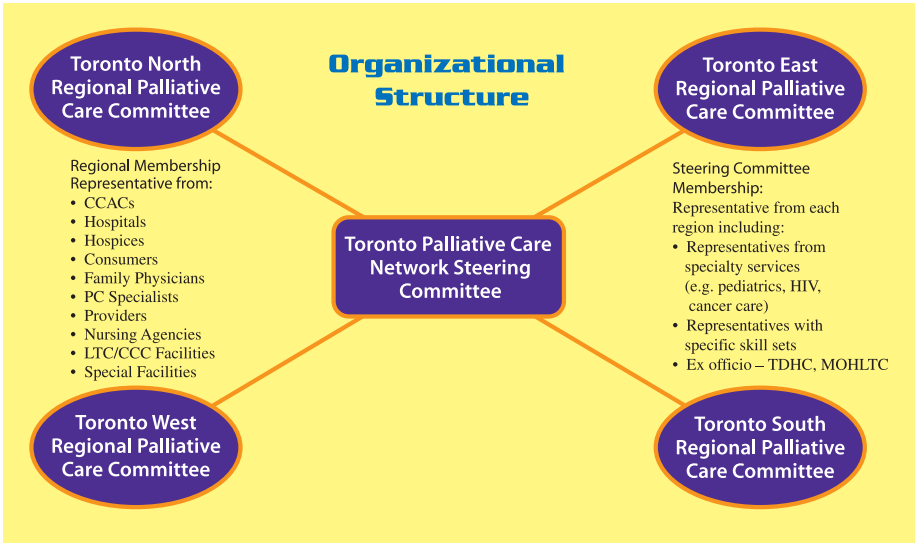

- Three out of five Toronto residents who died in 1995 did so in hospitals.
- About three-quarters of the people who die in Toronto are over the age of 65.
- Cancer causes about 27% of deaths in Ontario.
- Three-quarters of the 220,000 deaths in Canada each year occur in hospitals and long-term care facilities.
- Only about 5% of Canadians who die each year have access to palliative care, which can ease the end-of-life process for them and their families.

Sources:
Palliative Care in Metropolitan Toronto: Building on Our Strengths for the Future, Final Report 1997
Report of the Palliative Care Committee: A Model for the Delivery of Palliative Services in the City of Toronto, Final Report 1999

TDHC Homelessness Tool Kit Invaluable to Front-Line Health-Care Workers

The Toronto District Health Council (TDHC) has long recognized the close link between the plight of homeless people and a "healthy community". It has played a lead role in investigating ways to improve the health outcomes of homeless persons in Toronto once discharged from hospital. In 2002, the TDHC actively consulted with homeless people, staff from hospitals and community agencies. From this exercise, the Council developed an action plan to help homeless persons after being released from hospital care.

"I would like to take the opportunity to thank the TDHC on an excellent job in developing the tool kit… I would like to recognize the leadership role the TDHC has taken in identifying some of the barriers that exist for our clients. This work is generating interest both nationally and internationally. Thank you so much for your hard work and dedication in identifying some of the concerns the homeless face."

Mr. Art Manuel
Program Manager – Annex Harm Reduction
Co-ordinator of Health Services At Seaton House

Central to this plan was the step of providing front-line hospital staff with tools for more effectively identifying patients not having adequate shelter.

With the assistance of a working group of hospitals and community care agencies, the TDHC developed a "Homelessness Tool Kit". The Tool Kit was carefully designed to assist front-line hospital staff, through four critical steps associated with discharging a homeless person from hospital care. The toolkit is appropriately divided into four sections, one for each of the following steps:

- Identifying a Homeless Person
- Matching Homeless Patient Needs with Available Community Agencies
- Sharing Important Homeless Patient Information with Community Agencies
- Ensuring a Smooth Transition for Homeless Patients to a Community Agency

This kit was distributed to acute care facilities in Toronto for evaluation. A focus group and interviews were conducted with hospital discharge planners and nurses soon after as part of an evaluation process. The feedback gathered from this process was quite positive, resulting in recommendations that the kit be distributed to all Toronto area hospitals. Approximately 100 front-line hospital workers were issued a complimentary "Homelessness Toolkit" binder, as part of their participation in a November 2002 Workshop hosted by the TDHC. Included with the binder, was a free CD-ROM version of the kit for printing off additional copies as required. According to Lynne Lawrie, the TDHC Director of Planning: "Our Homelessness Toolkit, is a small example of how committed the TDHC is to making it easier for Toronto area front-line healthcare sector workers to do an increasingly difficult job." ■

Approximately 100 front-line hospital workers were issued a complimentary "Homelessness Tool Kit" binder, as part of their participation in a November 2002 Workshop hosted by the TDHC. The Tool Kit's creation reflects a core TDHC value of working to develop innovative solutions to assist front-line healthcare workers in Toronto. This initiative was led by Lynne Lawrie, Director of Planning for the TDHC.

For more details about the TDHC's work regarding the Homelessness Tool Kit, visit the Council web-site at www.tdhc.org. Click on the Impact Update icon, then click on the Homelessness Tool Kit binder icon.

- Between 30 and 35% of the homeless population, on average, suffer from severe mental illness;
- 75% of homeless single women have mental health problem;
- Approximately 19% of the homeless population in Toronto (or 5,300) were children in 2001.

Sources: Taking Responsibility for Homelessness: 1999 Report of the Mayor's Homelessness Task Force Report Card Homelessness: 2001 City of Toronto.

TDHC Recommends Better Access to "Special Needs" Long-Term Care Beds

In the year 2000, the Government of Ontario announced funding for the development of 5,000 new long-term care (LTC) facility beds in Toronto. At the time, many of these beds were yet to be built. It was also unclear what the distribution of beds would be, in terms of meeting the needs of the various segments of the seniors' population. Despite the announcement, a number of challenges facing the long-term care sector remained unresolved. They included issues such as longer waiting lists, increased waiting periods to enter these facilities; and the difficulty of keeping pace with demand for special needs services.

The Toronto Regional Office of the Ministry of Health and Long Term Care (MOHLTC) required help in understanding the scope of these problems in Toronto. It therefore turned to the Toronto District Health Council (TDHC) and other healthcare stakeholders for assistance in finding answers. In response, a group of 16 stakeholders were brought together to study the issue of long-term care bed placement in June 2001. This Long Term Care Facility (LTCF) Bed Placement Task Force, was charged with developing strategies for improving the bed placement process in Toronto. Members of this task force included individuals from Toronto area hospitals, long-term facilities, Community Care Access Centres (CCACs) and the TDHC. It was co-chaired by the TDHC Executive Director, Mr. Scott Dudgeon and Ms. Julie Foley, Executive Director of the Scarborough Community Care Access Centre (CCAC).

Beginning in July 2002, the Government of Ontario made a series of announcements regarding funding for three new long-term care facilities in Toronto to service special needs patients. These announcements were in keeping with our vision, of improving access to long term care for special needs patients. This vision was expressed in March 2002 by the Long Term Care Facility (LTCF) Bed Placement Task Force. It was co-chaired by the TDHC Executive Director, **Mr. Scott Dudgeon** and Ms. Julie Foley, Executive Director of the Scarborough Community Care Access Centre (CCAC).

Among other things, the task force identified the short supply of long-term care beds for individuals with "special needs". In doing so, it confirmed the findings of two previous TDHC studies in the area of long-term care. The first one, entitled Interim Advice from the Toronto District Health Council on 2200 New Long-Term Care Beds for Toronto, had been released in 1998. Two years later, the TDHC Long-Term Care Task Force released a report entitled Long-Term Care Populations in Toronto, outlining its multi-year plan for long-term care services in Toronto. Both studies hi-lighted the need for more beds to service special needs patients.

Special needs patients may require treatments such as dialysis; suffer from chronic mental illnesses; be unable to communicate in English; or have ethnic and religious backgrounds requiring unique diets and the observance of certain rituals. As of September 2001, 43% of individuals waiting for a special needs bed in Toronto did not speak English as their first language. Over 20% had special religious and/or cultural needs.

The addition of a new 128 bed facility at Hellenic Home for fhe Aged on Winona Drive in Toronto, is to be completed by the Spring of 2004. It will serve "special needs" patients of the Greek-Canadian and other ethnic communities in Toronto.

Armed with much supporting research, the Long Term Care Facility (LTCF) Bed Placement Task Force made a clear recommendation to the Ministry of Health and Long Term Care (MOHLTC). In its March 2002 final report Improving LTC Facility Bed Placement In Toronto, the task force firmly stated the importance of ensuring:

"…there is a match between the requirements of clients needing placement in Toronto (i.e. care, accommodation and ethno-cultural/linguistic/religious requirements) and the capacity of the LTC facility system in Toronto to meet these requirements."

The report went even further to suggest implementation of "Best Practices" by all health care sector long-term care service providers, in serving special needs patients. The importance of

Construction to add 250 new long-term care beds at the Yee Hong Centre for Geriatric Care in Scarborough, is scheduled to finish by April 2004. The facility will serve Alzheimers and Dialysis patients within Toronto's Japanese and Chinese communities.

When it opens in the Fall of 2003, the new 228 bed facility being built at Copernicus Lodge in west Toronto will serve the Polish and Eastern European communities. These beds will meet the needs of Alzheimers and Continuing Care patients.

long-term care facilities being kept informed – by hospitals, community care access centres and community service providers – about the special needs of applicants was emphasized. Ways for long-term care facilities to inform other providers of available beds to meet specific client needs, were also put forward. Having hospital staff provide training to staff these facilities on how to handle special needs patients was deemed critical.

Beginning in July 2002, the Government of Ontario made a series of announcements regarding funding for three new long-term care facilities in Toronto to service special needs patients. In total, the funding would mean over 600 new beds for Toronto area residents and several dedicated to "special needs" patients". These announcements were in keeping with of the Long Term Care Facility (LTCF) Bed Placement Task Force's vision, of improving access to long term care for special needs patients. The three facilities, Copernicus Lodge; Hellenic Home For The Aged; and Yee Hong Centre for Geriatric Care are profiled below.

Copernicus Lodge

In July 2002, funding was announced to build a new 228 bed facility expansion at Copernicus Lodge (www.copernicuslodge.com) long-term care facility. Located on Roncesvalles Avenue in west Toronto, its stated mission is: "Providing quality housing care and services for Polish seniors". When it opens in the Fall of 2003, the facility expansion will serve the long-term care needs of Polish and Eastern European residents. Initially, 36 beds will be set aside for Alzheimers and Complex Care patients, with another 52 added at a later date. There is currently a list of patients waiting to occupy these beds.

The Executive Director of Copernicus Lodge is Ms. Gisela Styka. When asked, she rated hospitals and Community Care Access Centres as being "Good" at communicating the special needs of applicants they release to her facility. They do so, by providing enough advance notice allowing for the purchase of special equipment and staff training for meeting the special needs in question. Ms. Styka also indicated there has been an improvement over the

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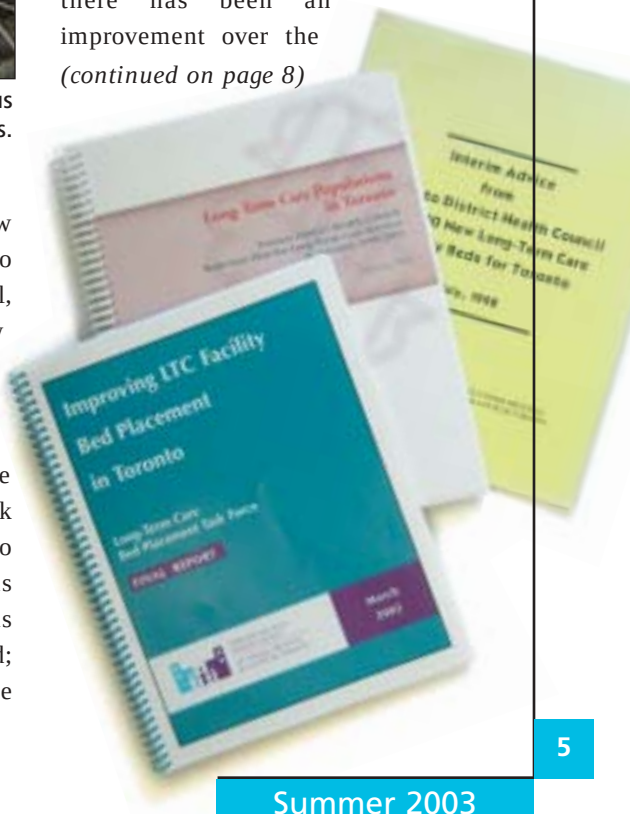
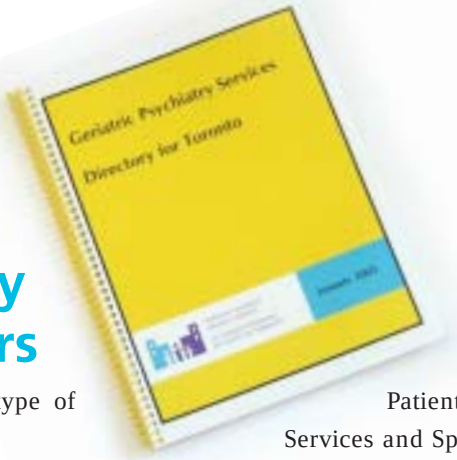


TDHC Releases "At Your Fingertips" Geriatric Psychiatry Services Directory for Providers



Over the past five years consumers, policy-makers and service providers to seniors, have identified a need for information about programs and supports for seniors with mental health needs in Toronto. Most recently, members of the Seniors Working Group, a working group of the System Responsiveness Sub-Committee of the Toronto-Peel Mental Health *Implementation Task Force*, emphasized that there remained a critical lack of this type of information in Toronto.

Recognizing this need, the TDHC took immediate action on what it considered to be an issue most worthy of attention. In the Spring and Summer of 2002, the Council designed and administered a survey to Toronto organizations providing geriatric psychiatry services. This questionnaire asked for a description of each organization's program; the target population it served; types of services provided; cost to clients; as well as the average length of waiting list time. In total, over 70 institutions completed the survey and returned it to the Health Council. Information was compiled into an easy to reference Geriatric Psychiatry Services Directory for Toronto. Each organization and its services are categorized into one of five program types: Community, In-Patient Care, Out-Patient Care, Outreach Services and Special Programs.

The Toronto District Health Council (TDHC) printed and released 350 copies of the Geriatric Psychiatry Services Directory in January 2003. The entire stock of directories ran out out quickly. Extra copies must be printed to meet the demand for extra requests the Health Council is receiving for it. The Geriatric Psychiatry Services Directory for Toronto is part of the TDHC *Seniors Project*. This is an ongoing initiative that is examining different health sectors and their ability to meet the needs of current and future generations of seniors. ■

For more details about the TDHC's Geriatric Psychiatry Services Directory, visit the Council web-site at www.tdhc.org. Click on the Impact Update icon, then click the Geriatric Psychiatry Services Directory report icon.

The Toronto District Health Council (TDHC) printed and released 350 copies of its Geriatric Psychiatry Services Directory in January 2003. The Geriatric Psychiatry Services Directory, is one example of how the TDHC constantly works to improve awareness and access to healthcare services for Toronto residents. **Fern Teplitsky**, a Senior Health Planner with the TDHC, was instrumental in the development of this directory.

"It is great!…The map (of geriatric service sites across Toronto) is a step forward and generally useful…"I receive requests daily for information on Geriatric Psychiatry services in Toronto from family doctors, hospital doctors, the general public, social workers and community agencies. The directory provides a quick and easy reference for providing this information… I have used the directory often since receiving it."

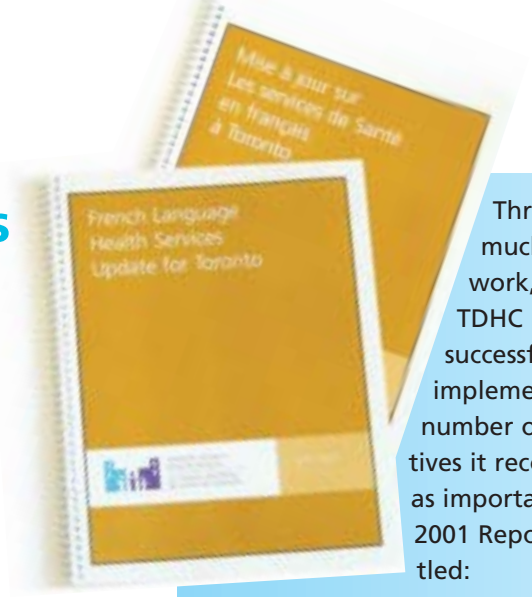
Andrew McClure
Administrative Assistant to Dr. Carole Cohen
Sunnybrook & Women's College Health Sciences Centre

TDHC's Newest Council Member – Jane Pitfield

Jane Pitfield joined the Health Council just under eight months ago.

She is a Councillor for the City of Toronto, representing the Don Valley West Ward 26, Jane has extensive experience with community related activities. In 1994, she was elected as Trustee to the East York Board of Education. In 1998, Jane joined Toronto City Council. Her business experience includes ten years with Procter & Gamble in sales and marketing. Jane wrote a book entitled "Leaside" about the rich history of her community. ■

TDHC Works for French Language Health Services



Under the Ontario French Language Services Act passed in 1986, the Toronto District Health Council (TDHC) is required to provide all of its services in French. As well, the Council has a planning role with respect to the delivery of services in French by public health care providers in Toronto. Under the Act, providers are required to meet four key criteria in delivering health care services: Permanency and Quality of Services, Access to Services, Effective Representation of Francophones and Accountability for French Language Services.

In 1989, the Ministry of Health and Long Term Care (MOHLTC) asked the TDHC to undertake a study to establish a Delivery Plan for French Language Services in Toronto. The results of the study indicated that approximately 70% of Toronto francophone residents preferred to receive health services in their own language. This was the case, provided the level of care was of equal quality to what could be obtained in English and was located in reasonable proximity to their home. In June 2001, the TDHC again looked at the issue of french language services and issued a report entitled: French Language Health Services Update for Toronto. In this report, the TDHC made a number of recommendations which are listed below. Through the dedicated work of TDHC staff, many of these recommendations have been implemented to the benefit of Toronto area french-speaking residents. ■

Through much hard work, the TDHC has been successful at implementing a number of initiatives it recognized as important in its 2001 Report entitled:

French Language Health Services Update for Toronto. The following is a checklist of what has been achieved to date, thanks to the dedication of **Anne-Marie Couffin**, Co-ordinator of French Language Services at the TDHC:

- Hospital admission departments have added "preferred language" to inpatient registry forms
- Admission forms capture the number of French-speaking and preferred language patients
- Agencies using the translation services provided by the MOHLTC make brochures available to others
- A list of French brochures have been developed and made available through the Internet
- New material has been automatically translated into French and added to the list of French brochures
- The TDHC maintains its web site with French Language Services at: www.francosantetoronto.ca and www.francohealthtoronto.ca

For more information on other initiatives by the TDHC to improve French Language Services in Toronto, visit the Council web-site at www.tdhc.org. Click on the Impact Update icon, then click the French Language Services report icon.

Thanks To Our 'Healthcare Heroes'

The Toronto District Health Council (TDHC) works to make a positive impact on how healthcare is delivered to residents of Toronto. Nothing, however, can compare to the difference made by Toronto doctors, nurses and front-line healthcare workers each and every day. In the best of times, these "Healthcare Heroes" work exhausting hours; under incredibly stressful conditions; at tremendous risk to their own personal well-being. Through this un-selfish dedication, individuals in all sectors of the healthcare workforce aim to help Toronto residents live healthy, happy and rewarding lives.

With the recent SARS outbreak, this seemingly never-ending task became even more difficult. Front-line Toronto healthcare workers have been required to work longer, more stressful hours at greater risk to their own personal health than ever before. As usual, however, these heroes rose to the occasion as only true professionals can. Through their diligent work, the rest of us have been able to go about our daily lives free from harm. On behalf of all Toronto residents, we at the TDHC simply want to say: **Thanks For Taking Care Of Us. You Make Us Feel So Great!**

TDHC Recommends Better Access to "Special Needs" Long-Term Care Beds

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past year in terms of how this is done. Hospitals and community care access agencies have become better at directly contacting the Lodge's doctor to make her aware of individual special needs. From her experience, hospitals have become much better at providing special "wound care" training to her staff.

Hellenic Home for the Aged

Hellenic Home for the Aged (www.hellenichome.org) also received good news from the provincial government, in the form of funding for 128 new beds at their Winona Drive long-term care facility in Toronto. Its' stated vision is of "uncompromising personalized quality-care and service delivered with dignity and excellence" to members of the Greek-Canadian and other ethnic communities.

Construction of the new facility is now underway. When it opens in the Spring of 2004, it will serve the Greek community. While the precise mix has yet to be determined, several of these beds have been earmarked to serve "special needs" patients. There is currently a list of clients waiting to occupy these new beds. Danny Theodorou, the CEO of Hellenic Home for the Aged, rated hospitals and other healthcare providers as "Good" at providing information about the "special needs" of applicants to his facility. He also pointed out the importance of "ongoing good communications" as a key to further improving how this is done.

Yee Hong Centre for Geriatric Care

In August 2002, the Ministry of Health announced funding to add 250 new long-term care beds to the Yee Hong Centre for Geriatric Care (www.yeehong.com) in Scarborough. This Centre provides high quality and culturally appropriate services to enable seniors to live their lives to the fullest – in the healthiest, most independent and dignified way. Once the expansion is complete in April 2004, 25 of the new beds will service the Japanese community while the rest will service Chinese seniors. Five beds will serve dialysis patients and another 50 will be set aside for those suffering from Alzheimers. The CEO of the Yee Hong Centre, Florence Wong, rated hospitals and other agencies as "very good" at informing her facility about the "special needs" of applicants. ■

For a more complete history of the TDHC's efforts to secure more long-term care beds for "special needs" patients in Toronto, visit the Council web-site at www.tdhc.org. Click on the Impact Update icon, then click the Long-Term Care Beds reports icon.

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A publication of the
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Publications Agreement # 4005484