CHATHAM/KENT COMMUNITY CARE ACCESS CENTRE
CENTRE D'ACCÈS AUX SOINS COMMAUNAUTAIRES DE CHATHAM/KENT

2003 – 2004
ANNUAL REPORT
APRIL 1, 2003 – MARCH 31, 2004

SUBMITTED BY:
BETTY KUCHTA, EXECUTIVE DIRECTOR
KEVIN SABOURIN, CHAIR OF THE BOARD

750 RICHMOND STREET, BOX 306
CHATHAM, ON N7M 5K4
TELEPHONE: (519) 436-2222
TOLL FREE: 1-888-447-4468
FACSIMILE: (519) 351-5842
WEB SITE: WWW.CK.CCAC-ONT.CA

750, RUE RICHMOND, C.P. 306
CHATHAM (ONTARIO) N7M 5K4
TÉLÉPHONE: (519) 436-2222
SANS FRAIS: 1-888-447-4468
TÉLÉCOPIEUR: (519) 351-5842
SITE WEB: WWW.CK.CCAC-ONT.CA

YEAR IN REVIEW: KEY MESSAGE FROM THE BOARD CHAIR AND EXECUTIVE DIRECTOR

High quality and accessible service for residents of Chatham-Kent continued to be the key focus of the Board and staff in the 2003/2004 year. Diligent pursuit of this goal is evident in all aspects of our work – in front-line work with clients, in internal business process design, in collaborative efforts with health care partners, and in governance activities.

Case managers are key to the delivery of quality client service. Their collaborative work with clients, families, provider agencies and community groups resulted in co-ordinated access to a full range of services and improved health status and quality of life for clients. Case management services continually adapt to changing community and client needs. Enhancements were made in 2003/2004 through implementation of a common assessment tool for all long-stay clients. This comprehensive assessment provides our professional case management staff and the client with more information to assist in identifying an effective plan of care clearly focused on achievement of specific health goals.

High quality and accessible service for residents of Chatham-Kent continued to be the key focus of the Board and staff in the 2003/2004 year.

Efficiencies have been achieved through business process re-design. We successfully implemented a single service caseload model. Post-acute clients being discharged from the hospital and assessed by our hospital liaison case manager to require only one service at home are linked with a service provider, with case manager contact being maintained by telephone. This permits case managers to spend more time with clients and families whose care plan development is more complex.

Maximum utilization of technology supports all that we do. Automated solutions linking finance and client service permits on-going data analysis to ensure a proper balance between fiscal responsibilities and service utilization. Provincial initiatives such as Community Care Connects (C3), outcome based resource allocation, and conversion to Financial and Statistical Management System (FSMS) reporting continue to enhance accountability. All required activities to support these initiatives have been implemented in a timely fashion.

Benefits from co-management of the Chatham/Kent and Sarnia-Lambton Community Care Access Centres continue to accrue. A shared service management model was implemented fully this fiscal year. In addition to the Executive Director, all managers now work across both CCACs. This has resulted in the migration of best practices between CCACs, greater consistency of client service within the two service areas, and cost avoidance through elimination of duplication and the sharing of expertise.

A plan for the procurement of nursing and personal support and homemaking services was approved by the Board in October 2003. Implementation unfolded throughout the year with a Request for Proposal for both services issued in December 2003. The Request for Proposal was issued jointly with the Sarnia-Lambton Community Care Access Centre. This will result in the same providers for the combined Chatham/Kent and Sarnia-Lambton service area. This offers greater volume and sustainability for provider agencies and will result in increased consistency and efficiencies for client care. Contract awards, as a result of completion of the procurement process will be announced in May 2004.

Board leadership was exemplified through development and approval of an ambitious Business Plan, regular monitoring of organizational progress in meeting the Business Plan Goals and Objectives, development of a 3 year strategic plan and revisions to the Mission and Vision of the organization to identify quality of life as a primary goal for community-based care. The highlight of our year was the overwhelming success of our second Lifetime Achievements Awards event sponsored in collaboration with our area's long-term care

facilities. This event demonstrated our effective collaboration with community partners. Most importantly it offered recognition to those members of our community receiving community care whose heart-warming and significant achievements must never be forgotten.

We have enjoyed working with all those who make service excellence a reality – Board members, CCAC staff, service providers, Ministry staff, and health partner agencies. We are indebted to our clients, their families and the general public, whose varied needs push us to new limits for innovation and from whom we continually learn to identify the real meaning of service excellence.

OUR MISSION

The Chatham/Kent Community Care Access Centre promotes quality of life for families and individuals by providing information and coordinating access, in both official languages, to community health and support services, in a responsible manner. *Revised 2003*

OUR VISION

Client confidence through service excellence and innovation.

OUR VALUES

The Chatham/Kent Community Care Access Centre is guided by the values of accountability, compassion, responsiveness and respect.

EXECUTIVE DIRECTOR AND BOARD OF DIRECTORS IN 2003/2004

(BY OIC APPOINTMENT DATES):

Betty Kuchta	Executive Director	02/08/2002 – 02/07/2005
Kevin Sabourin	Chair	02/16/2002 – 02/15/2005
Susanne Drew	Member	02/16/2002 – 02/15/2005
Lance Babcock	Member	03/05/2003 – 03/04/2005
Jean Paul Gagnier	Member	02/16/2002 – 02/15/2006
James W. Greenway	Member	02/16/2002 – 02/15/2004
Rose Scott	Member	02/16/2002 – 02/15/2006

DATED:

Kevin Sabourin, Board Chair

Betty Kuchta, Executive Director

MANDATE OF THE CCAC

The Chatham/Kent Community Care Access Centre is a statutory corporation under the *Community Care Access Corporations Act, 2001* with the following mandate:

- To provide, directly or indirectly, health and related social services and supplies and equipment for the care of persons.
- To provide, directly or indirectly, goods and services to assist relatives, friends and others in the provision of care for such persons.
- To manage the placement of persons into long-term care facilities.
- To provide information to the public about community-based services, long-term care facilities, and related health and social services.
- To cooperate with other organizations that have similar objects.

FRENCH LANGUAGE SERVICES COMPLIANCE PLAN

The Ministry of Health and Long Term Care approved our French Language Service Compliance Plan with notification on December 31, 2003. The Plan identifies the ways in which our organization ensures that service in French is available to our French-speaking clients. An important element is consultation with the French-speaking community – our first consultation was held in March 2004. Results from the meeting included submission of a Letter of Intent in collaboration with l'ACFO (Association canadienne-française de l'Ontario) régionale Windsor-Essex-Kent to access federal funds under the Primary Health Care Transition Fund, Official Languages Minority Communities Envelope for improved access to health services for our French community. The outcome is pending with a response expected in the summer of 2004.

COMMUNITY INITIATIVES, PARTNERSHIPS AND ACHIEVEMENTS THROUGHOUT THE YEAR

Partnerships continue to thrive as an important vehicle for improving client service. The Chatham/Kent Community Care Access Centre participates in many collaborative initiatives.

Regular meetings are held with representatives from all related health sectors: service provider agencies, long term care facilities, rest and retirement homes, community support service agencies, District Health Council, the hospital alliance, health unit, Children's Treatment Centre, physicians, cancer services, heart and stroke stakeholder groups, and special resource programs of the Boards of Education.

Partnerships continue to thrive as an important vehicle for improving client service.

Significant achievements include:

- Active Local Cancer Services Network initiated by the Chatham/Kent Community Care Access Centre with strong linkages to pain and symptom management services, the Chatham-Kent

Health Alliance and the London and Windsor Regional Cancer Centres.
- Continuation of positive health outcomes from the inter-sectoral Wound and Skin program.
- Life Time Achievement Awards sponsored jointly with Long-Term Care Facilities.
- Continued success of assessment protocol for senior day programs.
- Initiation of an interagency occurrence reporting protocol.
- Active participation in community fairs and seniors events.

Initiatives include collaborative work with Community Care Access Centres across the Province. A key Southwest initiative has been the development of the Southwest Resource Education Network (REN). This project utilizes a shared position to maintain and evaluate assessment tool competency through regional audits and regional education for refresh and new Case Managers. Outcomes include cost savings, consistency, and learning and growth across multiple agencies.

SIGNIFICANT COMMITTEES IN THE COMMUNITY

The Joint Community Advisory Council is a Committee of the Boards of the Chatham/Kent and Sarnia-Lambton Community Care Access Centres, mandated by the *Community Care Access Corporations Act, 2001.* The Council achieved significant results in its second year of operation including the completion of a study to gather feedback on the client's perspective of continuum of care. The information will be used to identify priority areas for local health system improvements. The primary goal of the Joint Community Advisory Council is to improve the delivery and co-ordination of services to people requiring care as they move from one part of the health and community support system to another.

The Chatham/Kent Community Care Access Centre also contributes to the work of the following committees either as Chair or active participant:

- Acquired Brain Injury Committee
- Alzheimer Society Working Group
- Community Support Service Operators Group (COG)
- Facilities Operators Group (FOG)
- Rest and Retirement Home Operators Group (ROG)
- Systems Coordination Group (District Health Council)
- Chatham-Kent District Health Council Diabetes Work Group
- Chatham-Kent Information Providers
- Chatham-Kent Pre-school Speech and Language Advisory Committee
- Chatham-Kent Stroke Strategy Working Group
- Complex Continuing Care Committee (District Health Council)
- Community Health Safety (Falls and the Elderly)
- Community Infection Control
- Coordinated Access to Developmental Services
- French Language Health Services Network Group (District Health Council)
- Prevention of Elder Abuse Committee
- Kent Inter-Disciplinary Support Team
- Local Cancer Services Network
- Pain & Symptom Care Team
- Pain & Symptom Local Advisory Committee
- Specialized Geriatric Services Committee

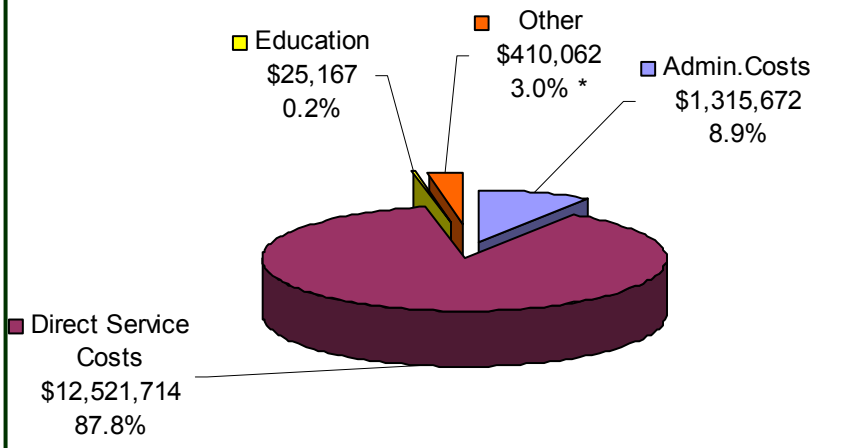
DONATION INFORMATION

Donations were received for the fiscal year April 2003 to March 2004 in the amount of $6,835.00. Donations, though not actively solicited, are used to purchase equipment for loan to families such as comfort mattresses and to support direct service education for staff.

FINANCIAL/STATISTICAL INFORMATION (AUDITOR'S REPORT FOR YEAR ENDING MARCH 31, 2004 ENCLOSED.)

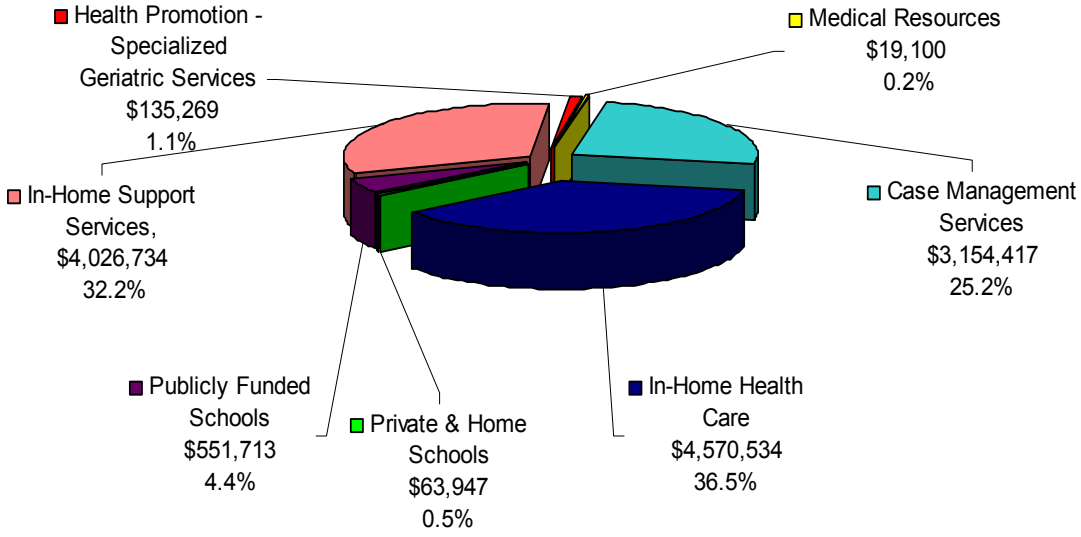
- The approved budget for 2003/2004 was $ 14.6 M.
- In 2003/2004, the Chatham/Kent Community Care Access Centre provided 6,367 clients with case management and in-home services. Of these, 599 were children. 497 individuals were assisted in the transition from home to long-term care facility living.
- The Chatham/Kent Community Care Access Centre, in partnership with contracted service providers, provided 92,104 nursing units, 219,650 personal support and homemaking hours and 13,726 therapy visits.
- The allocation of spending in 2003/2004 is illustrated in the charts following:

Chatham/Kent CCAC Expense Allocation



* Other: represents shared staff expenditures, offset by external revenue recovery from other CCACs.

Chatham/Kent CCAC Direct Service Costs

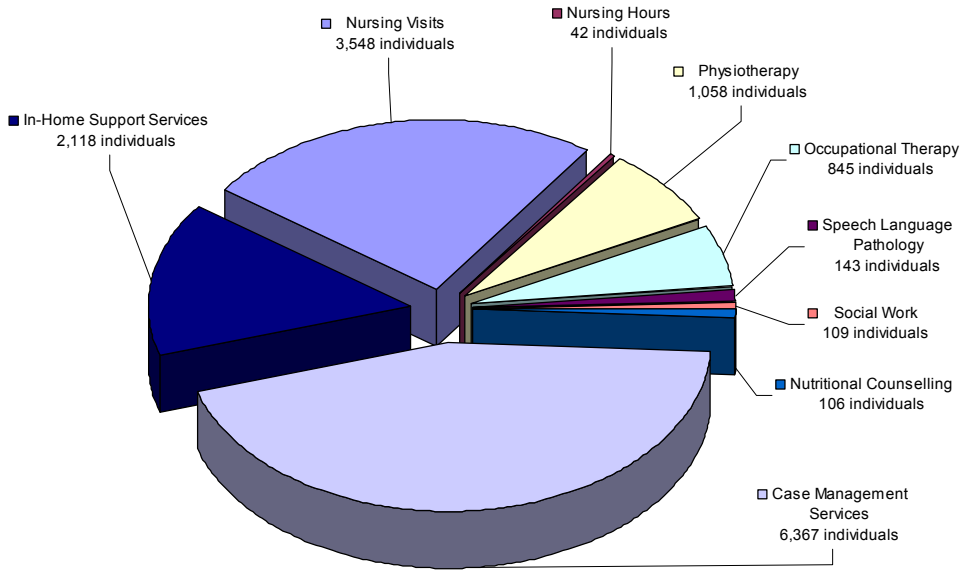


PERFORMANCE INFORMATION

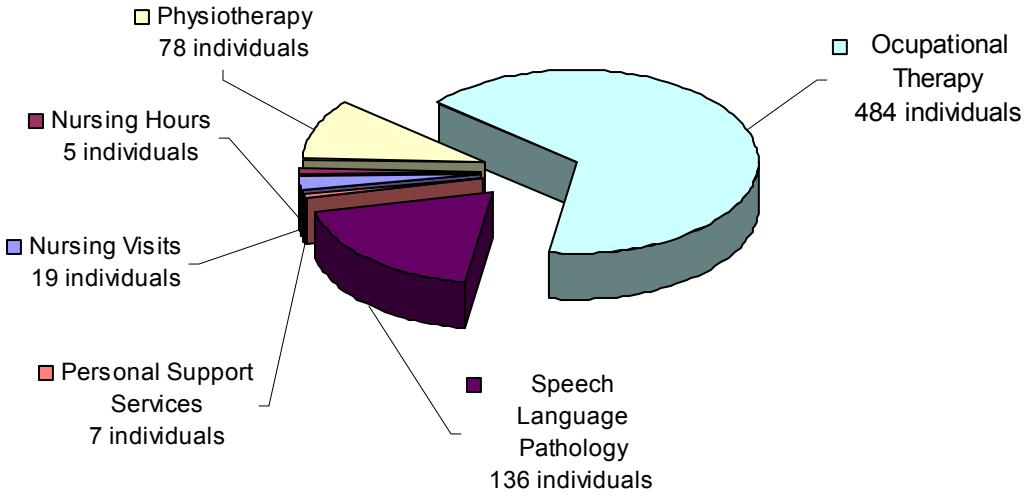
SERVICE HIGHLIGHTS

The number of clients served by discipline and type of service is illustrated below:

In-Home Health Care
Number of Individuals Served by Type of Service

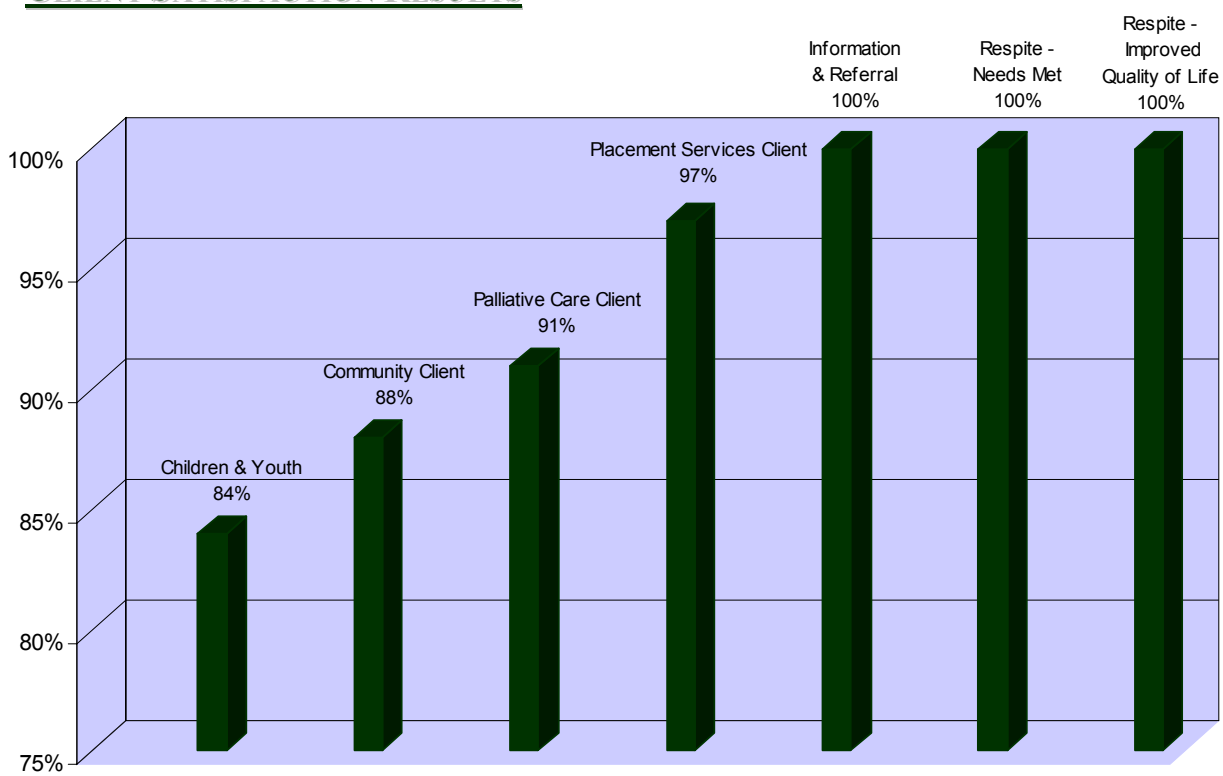


Private/Home and Publicly Funded Schools
Number of Individuals Served by Type of Service



- 97% of client achieved identified health care goals at time of discharge from service.
- 100% of client service plans were consistent with identified need.
- Print media is used to promote the availability and benefits of short-stay beds on a monthly basis to increase utilization. This is a collaborative venture between the Chatham/Kent Community Care Access Centre, area long-term care facilities, and a local seniors' newspaper.
- Compliance with guidelines for implementation of the common assessment tool for long-stay clients was 72%. Chatham/Kent Community Care Access Centre as an early adopter of the common assessment tool did not have the benefit of "lessons learned" and therefore, full compliance is not expected until fiscal year 2004/2005.
- 100% of information required for the Chatham/Kent Community Care Access Centre information and referral data-base has been input and the annual update of information is 100% complete.
- 85% of staff were trained on the use of the Information and Referral data-base to ensure quick access to information for case coordination and client options.
- Clients who presented as eligible for Long-Term Care Facility placement were placed within 4 days following completion of all placement processes.
- On average 26 individuals per month were successfully placed in available Long-Term Care Facility beds.
- The vacancy rate in Long-Term Care Facilities decreased from 40 available beds at the beginning of the fiscal year to 20 by the end of fiscal year.
- 2.5% of clients identified concerns with service. No clients proceeded with appeals.
- Our employee absenteeism rate is 6.6%. This compares favourably with the rate of 7.2% reported in 2000 for Canadians in full-time health occupations, as reported by the Canadian Institute for Health Information, in its News Release dated November 26, 2001.

CLIENT SATISFACTION RESULTS



Good or excellent rating.

CONTINUOUS QUALITY IMPROVEMENT PLAN AND ACHIEVEMENTS; BALANCED SCORECARD QUALITY DIMENSIONS

A comprehensive Performance Management System was implemented this fiscal year. The Board approved a system which measures organizational performance against Memorandum of Understanding requirements, Board-established Strategic Directions, Leadership Objectives, and Business Plan Goals and Objectives.

The Balanced Scorecard is used to identify key performance indicators for this review of organizational performance. Quality and accountability are measured in four key areas: Client and Community; Internal Business Processes; Learning and Growth; and Financial/Resources. Managers report monthly on achievements in each of these key areas. Structural Tension Charts or Action Plans are developed annually and continually revised throughout the year to measure progress, to reflect risks which may prevent goal attainment and to identify corrective action to stay on track.

Quality and accountability are measured in four key areas: Client and Community; Internal Business Processes; Learning and Growth; and Financial/Resources.

The system will be continually refined to focus on the most significant performance indicators. Plans for the next fiscal year include preparatory work for future accreditation and launch of a Quality Council to shape and define our organization's continuous quality improvement plan.

INFORMATION ON SERVICE PROVISION AND STAFF

NAMES OF SERVICE PROVIDERS BY SERVICE

Nursing Service Providers	Personal Support and Homemaking Service Providers
♦ Comcare Health Services ♦ ParaMed Home Health Care ♦ Victorian Order of Nurses	♦ ParaMed Home Health Care ♦ Respiron Care Plus Inc. (Care Plus) ♦ The Canadian Red Cross Society
Rehab Therapy Services	
Occupational Therapy ♦ Clare Latimer ♦ ParaMed Home Health Care ♦ Physical Relief ♦ Prism Centre ♦ Susan Schaafsma ♦ Sunnyside Rehab	**Physiotherapy** ♦ Judith Page ♦ ParaMed Home Health Care ♦ Physical Relief ♦ Mary Louise Pinsonneault
Speech/Language Therapy ♦ Ellen MacDonald-Beacock ♦ ParaMed Home Health Care ♦ Karine Pépin ♦ Physical Relief	**Nutritional Counselling** ♦ Seasons Care Consultants **Social Work** ♦ Diane Lozon

Contracts with Private Schools for funding to provide professional and support services to eligible children in Private Schools.

- Dresden Private Mennonite School
- Eben-Ezer Canadian Reformed
- Maple City Montessori
- Montessori The Place to Grow
- Old Colony Christian Academy
- Wallaceburg Christian School
- Chatham Christian School

STAFF DEVELOPMENT AND ACHIEVEMENTS

The Chatham/Kent CCAC supports learning and growth within the organization. Health care is dynamic; changes in health care service delivery and standards are supported through a comprehensive program of leadership development, skills upgrading, performance evaluation and change strategies.

An ambitious Leadership Development program was launched by the Executive Director. A primary goal of the program is to develop a high performance and high energy management team capable of accomplishing the organization's vision of client confidence through service excellence and innovation. The program includes a monthly education series, development of Leadership Principles for the organization, communication strategies based on personal responsibility and accountability, and specific deliverables to meet organizational goals and objectives.

Health care is dynamic; changes in health care service delivery and standards are supported through a comprehensive program of leadership development, skills upgrading, performance evaluation and change strategies.

Our organization supports educational upgrading through fellowships. With the support of Registered Nurses Association of Ontario (RNAO), one palliative case manager completed a four month nursing education fellowship for palliative care – oncology. Her experience in working with our Regional Cancer Centres and experts in the field have strengthened our local work with clients and enhanced key partnerships for system improvements.

A new performance evaluation tool for all employees was implemented. The performance mapping process is now more comprehensive yet takes less time to complete. Efficiencies and consistency with overall organizational performance were both achieved. 100% of employees will have their performance evaluated every two years – our goal was met in this fiscal year.

The rapid pace of change within the health care and CCAC environment must continually be addressed. A comprehensive strategy was successfully utilized to help employees adapt to change. Change strategies included: a Change Team structure, Changing Times newsletter, software training, intranet messaging, email and help desk approaches to Qs and As, regular de-briefing on change implementations, and open communication with Bargaining Units representing CCAC staff.

OTHER INITIATIVES

PHYSICIAN COLLABORATION

The Chatham/Kent Community Care Access Centre enjoys a collaborative relationship with area physicians. In addition to a well-developed working relationship between Case Managers, visiting nurses and physicians, Dr. Colin Bryan, Medical Advisor, serves as a formal link between the physician community and the Community Care Access Centre. Communication with physicians is transparent and open. A Physician Newsletter provides updates on services available and home care treatment protocols. In addition, as required, meetings are held to identify improvements for service delivery and to facilitate implementation of effective treatment.

SPECIALIZED GERIATRIC SERVICES

Specialized geriatric services are provided using a local partnership model between the Chatham/Kent Community Care Access Centre, two local physicians and the Alzheimers Society with linkages to Regional Geriatric Services provided by Parkwood Hospital in London. This team provides geriatric assessments, case coordination, and education for clients and families in the community and for residents to long-term care facilities. The work of the team includes regular case reviews and audits to evaluate the effectiveness of resolutions of identified medical issues.

PALLIATIVE CARE SERVICES

Palliative care in the community is delivered using specialized palliative case managers working collaboratively with service providers, area physicians, the Regional Pain and Symptom Coordinator and the Community Care Access Centre Medical Advisor. The program includes advanced care planning, expected death plans, enhanced services, and pain and symptom management.

The Canadian Home Association in its June 2004 report entitled "Home Care: A National Health Priority," states: "While over 60% of Canadians choose to die at home, only 35% reported a family member receiving palliative care services in their home." Of individuals in Chatham-Kent requiring palliative care services, 50.4% were supported by the Chatham/Kent Community Care Access Centre in their choice to remain at home while 49.6% received services at the hospital. This noteworthy achievement, well above the nationally reported figure, was first achieved by the Chatham/Kent Community Care Access Centre in 2001/2002 and continued throughout this fiscal year.

CONTACT INFORMATION INCLUDING REFERRAL AND CHARITABLE REGISTRATION

OFFICE HOURS AND DAYS OF OPERATION

Normal Business Hours

- We are open from 8:30 am to 4:30 pm Monday to Friday. For referral information call (519) 436-2222 or 1-888-447-4468 and ask to speak to Intake.

After Normal Business Hours

- On-call Case Manager from 4:30 pm to 8:30 pm Monday to Friday.
- On-call weekend Case Manager from 8:30 am to 8:30 pm Saturday and Sunday.
- On-call after hours Administration staff available from 8:30 pm to 8:30 am, 7 days per week.

Call (519) 436-2222 or 1-888-447-4468

CHARITABLE REGISTRATION

For the purposes of charitable donations the Chatham/Kent Community Care Access Centre has charitable status under the Income Tax Act.