INTRODUCTION

The Windsor/Essex Community Care Access Centre (CCAC) is pleased to provide its *Annual Report for the Fiscal Year 2003/2004* to all stakeholders and community members. The purpose of this *Annual Report* is to share the achievements we have made in meeting our goals and objectives over the past year.

Incorporated on 12 August 1996, the Windsor/Essex CCAC is a charitable, non-profit organization fully funded by the Ontario Ministry of Health and Long-Term Care (MOHLTC). The CCAC is a Statutory Corporation under the Community Care Access Centre Corporations Act, and serves all of the Windsor-Essex area – a total population of 374,975 (2001 census) in both official languages of Canada. We have a primary office location at 5415 Tecumseh Road East, Windsor, ON; Case Managers are also located in each of Windsor-Essex's hospitals.

The Windsor/Essex CCAC dedicates itself to supporting and enhancing the quality of life, independence, health and well-being of our clients by offering a single point of access for community services and demonstrating leadership and excellence in community care.

MISSION

Seeking and embarking upon innovative partnerships in health, we provide seamless client-focused care and enhance quality of life by providing information and coordinating access to services for our communities, in both official languages of Canada within available resources.

VISION

Towards Health and Independence.

VALUES STATEMENT

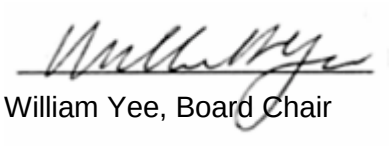
TRUST	Create an environment of trust by being understanding, open, honest, accountable and fair, and recognizing the diversity within our communities.
INTEGRITY AND RESPECT	Reflect personal and professional integrity, confidentiality, and respect in our communications internally and externally.
QUALITY	Support continuous quality improvement by evaluating our actions and those of service providers to ensure excellence.

KEY MESSAGES FROM THE BOARD & EXECUTIVE DIRECTOR

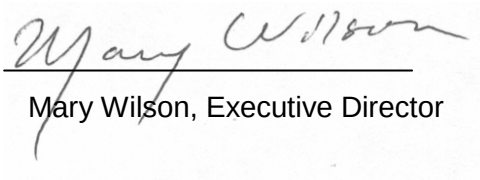
The Windsor/Essex CCAC had a remarkable year. Through all of the operational challenges and innovations, and in consultation with the staff, Service Providers, key stakeholders and the community-at-large, we continued to meet clients' needs, within available resources, and have a positive influence on the Windsor-Essex Community.

Ninety percent of our goals and objectives were met and/or exceeded for the 2003/04 fiscal year. We were unable to meet and/or implement some of our remaining objectives due to the lack of availability of software programs. A few of our significant achievements include strong partnerships with both Service Providers and Community Partners in terms of education, the creation of exciting new initiatives, such as Stroke Strategy, Ambulatory Pump, etc., and the revision of business processes. In the last year, the CCAC has worked with hospitals and long-term care facilities to find the most efficient ways for clients to be placed directly from hospital using a common assessment tool. Internally, staff at the CCAC have been working diligently on improving efficiencies, forging ahead with client-focused quality programs, committing to client-focused care, and remaining fully accountable to our clients, community and the Ministry of Health and Long-Term Care.

The CCAC has progressed through tremendous changes and transitions in assessment practices and placement needs. Case Managers had specialized lap top training in the use of a common assessment tool. This tool enables the Case Manager to develop a very thorough and detailed client service plan which enhances quality care to the clients in our community. Common procurement policies, procedures and templates were developed provincially enabling consistency in the RFP process. Our comprehensive Information and Referral data base is continually being enhanced and updated. The ultimate goal is to increase the Case Managers knowledge of our community health care services in order to assist clients to navigate through our local service systems. The Windsor/Essex CCAC maintains a close working relationship with the Ministry of Health and Long-Term Care, community partners, service providers, key stakeholders, staff and clients to preserve a focus on best serving clients' needs while also continuing to foster strong partnerships throughout the healthcare sector.



William Yee, Board Chair



Mary Wilson, Executive Director

LEADERSHIP APPOINTMENTS

The Windsor/Essex CCAC, is an approved agency under the *Ontario Long-Term Care Act, 1994*, operating under the leadership and guidance of an appointed Board of Directors and Executive Director.

Originally appointed to a two-year term on 16 February 2002, our Board Chair, Mr. William Yee, was reappointed in 2004 for a one-year term until 15 February 2005. Other Board Members (who were also reappointed in 2004) include: Mr. Rassan Jafar, Ms. Patricia Pacuta, and Ms. Ruth Stark.

Ms. Mary Wilson, Executive Director for the Windsor/Essex CCAC was originally appointed to the position on February 16, 2002 and was also reappointed in 2004 with her appointment extending until 15 February 2006.

PARTNERSHIPS WITH SERVICE PROVIDERS

HOME SUPPORT EXERCISE PROGRAM

This year, the CCAC took a leadership role in introducing a Home Support Exercise Program (HSEP) © developed by the Canadian Centre for Activity and Aging to complement personal support services for clients. Both CCAC staff and personal support Service Providers received training from the HSEP. The program consists of 10 simple, yet progressive, exercises designed to enhance and maintain functional fitness, mobility, balance and independence of homebound older adults.

ADULT DAY PROGRAMS

As part of a pilot project, the CCAC is now assessing for eligibility and maintaining the waitlists for all of the Adult Day Programs. Every applicant is assessed with a common assessment tool, and all program staff have been trained to interpret these assessments.

SYMPTOM RESPONSE KIT

As part of an ongoing project with community partners, the Symptom Response Kit (developed some number of years ago to help community nurses proceed with administration of medication for palliative clients, without having to wait for delivery from a pharmacy) is continually being reviewed. In the 2003/2004 fiscal year, changes were made to the process to ensure safety and accountability. In addition, some changes in the medications were also made, which reflect increased knowledge as well as changes/improvements in practice.

CARE GUIDES

Collaborating with a number of partners, the CCAC has established Care Guides (specified processes for Case Managers and Service Providers to follow when arranging care for specific treatments) for Radiation Therapy, Chemotherapy, Prostatectomy, and Palliative Care to add to an extensive list of previously developed guides. In addition, we continue to work with the Regional Pathway Group and are working towards the development for new pathways.

SIGNIFICANT COMMITTEES IN THE COMMUNITY

In accordance with the CCAC's mission, we are committed to seeking and embarking upon innovative partnerships in health. Throughout the past year, the CCAC has been involved with a number of committees with representatives from all of our community partners ranging from area hospitals, long-term care facilities, community agencies, and other professionals in the health care sector. Committees that the CCAC has participated in during the last year include:

- Regional Cardiac Care
- CCAC/Hospital VPs Group
- Regional Clinical Pathway Group
- Windsor/Essex Geriatric Assessment Network
- Southwest Regional Client Service Managers Group
- Mental Health System
- Council on Aging
- Southwest Regional Quality Group
- Regional Palliative Care
- Land Ambulance
- Emergency Services Community Partner Group
- Regional Stroke Strategy Steering Committee
- Community Advisory Council
- Essex County Health System Coordination Group
- Pandemic Planning Group
- Land Ambulance Committee (at Hotel-Dieu Grace Hospital)
- Council on Aging
- Falls Prevention
- FOG Facilities Operator Group
- Windsor/Essex Infection Control and Prevention Committee
- Windsor Area Elder Abuse Committee
- OACCAC Provincial Finance Committee
- Southwest Finance Committee
- Regional Placement Coordination Services Committee
- Health Care System Transformation Task Force
- Southwest Executive Directors Group
- South Essex Community Health Partnership
- Regional Cancer Planning Task Force
- Preschool Speech and Language Initiatives Subcommittee
- Regional Education Network (Case Management Group)
- Expert Resource Team
- Embracing Challenges During Life Threatening Illnesses Conference Planning Committee
- OACCAC Communicators Network
- French Language Health Services Network

Other community-wide initiatives with its community partners that the Windsor/Essex CCAC participates in include:

- The Windsor Essex Stroke Strategy Steering Committee to develop a system wide collaborative and seamless approach to the identification and treatment of stroke both in the acute care setting, in the community and in the transition of individuals who have experienced stroke to long term care.

- The United Way Seniors' Community Strategy Team – a mechanism to involve the community in a process that identifies and builds upon community assets and establish priorities in the impact area of Seniors.

- Partnership with the University of Windsor, which gave the CCAC the opportunity to precept four senior nursing students and facilitate the placement of ten or more students in community nursing agencies in the past academic year.

- Ambulatory Pump Initiatives – the CCAC currently has between 35 and 45 pumps per month on average in the community, and we anticipate that number to grow. Collaboration with all partners continues to achieve the goal of one ambulatory pump for use in all settings.

- Collaboration with "Senior Moment" in response to frauds and other crimes against the senior population in Windsor and Essex County. This year the Windsor/Essex CCAC struck a collaborative effort with the local "Senior Moment" program, which jointly run through the Windsor Police Department and Citizen Advocacy.

BREAKDOWN OF SERVICE EXPENDITURES

	Expenditures
Administration & Support Services	$3,305,304
Case Management & Clinical Services	$8,627,202
Placement Services	$391,189
Referred out – Nursing	$14,310,655
– Personal Support	$11,050,793
– Physiotherapy	$1,489,544
– Occupational Therapy	$1,003,535
– Social Work	$131,500
– Speech Language Pathology	$932,658
– Dietetic	$154,521
	$41,396,901

TOTAL NUMBER OF INDIVIDUALS SERVED

Windsor/Essex CCAC clients may benefit from a variety of services; clients may receive community care, community care in addition to placement services, or may require placement services only. In 2003/2004, the total number of discrete individuals served totaled 13,950.

NUMBER OF CLIENTS SERVED BY DISCIPLINE & SERVICES PROVIDED

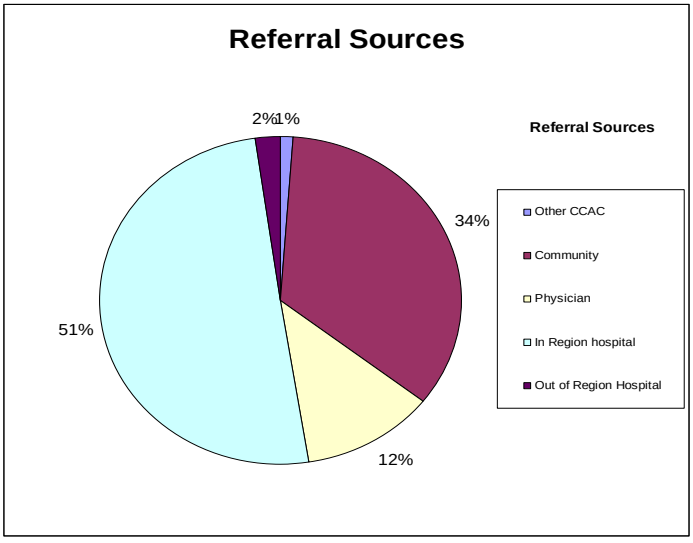
CCAC clients may receive services in a variety of disciplines. In addition to district case management, the Windsor/Essex CCAC has an Oncology program dedicated to assisting palliative and oncology clients, a Facilities Placement Department, which assists with placement into long-term care facilities and manage wait lists for all community facilities, as well as a School Health Support Services program dedicated to working with our paediatric clients and their families. Below, a breakdown of categories outlines the number of individuals served in the past year and the types of services they received.

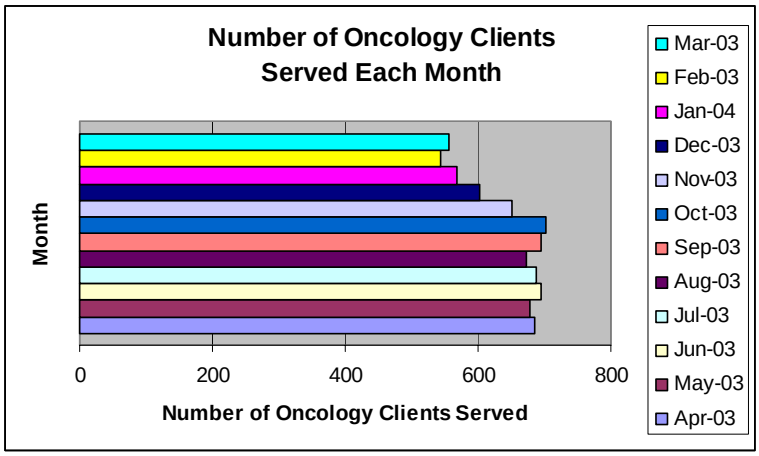
	Number of Units	Individuals Served
Nursing	307,382	8,024
Personal Support	496,443	4,653
Physiotherapy	20,656	3,013
Occupational Therapy	12,488	2,934
Social Work	1,315	225
Speech Language Pathology	11,065	778
Dietetic	1,514	418
Placement Services	2,096	2,096

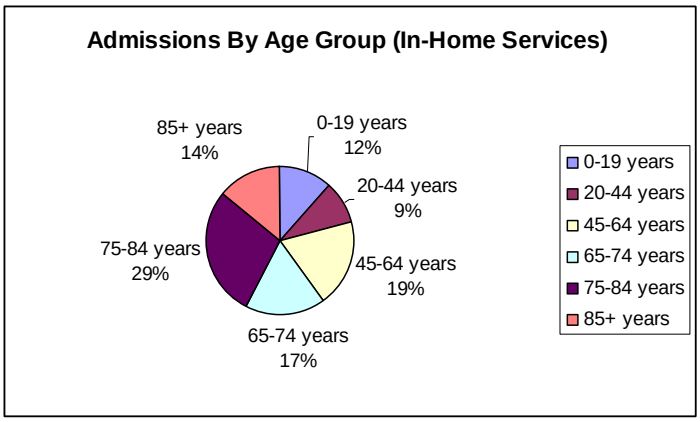
AUDITED FINANCIAL STATEMENTS

Please see attached documents.

SERVICE HIGHLIGHTS







CLIENT SATISFACTION SURVEY RESULTS

This year, the Windsor/Essex CCAC worked with NRC+Picker Group and administered a satisfaction survey to CCAC clients. 877 clients responded to the survey: 62.1% rated the overall quality of CCAC services as “excellent” with 31.27% rating services as “good.” Areas of strength and areas for improvement were duly noted through the survey process, and the CCAC is committed to improving areas identified as needing enhancement.

CONTINUOUS QUALITY IMPROVEMENT PLAN

Last year, our direct focus in our commitment to continuous quality improvement, was our participation in the Ministry of Health and Long-Term Care’s Priority Project. As part of the Priority Project, a new Acute Care Team was developed. Also as an element of our continuous quality improvement, the CCAC underwent team reorganization and process redesign to ensure that our business practices and clients’ needs were being met in the most efficient ways while remaining client focused in our service delivery.

In addition, our internal Expert Resource Team (ERT) – made up of CCAC Case Managers, designed to provide peer-to-peer guidance and education in terms of the Priority Project – remains committed to sustaining the gains the CCAC staff have made in the past year.

LIST OF CONTRACTED SERVICE PROVIDERS

Nursing:

- Bayshore Health Care
- Comcare Health Services
- Paramed Home Health Care
- St. Elizabeth Health Care
- Victorian Order of Nurses

Personal Support:

- Bayshore Health Care
- Comcare Health Services
- Community Health Services
- Paramed Home Health Care
- St. Elizabeth Health Care

Adult Therapies:

- Community Care Therapy

Paediatric Therapies:

- Children's Rehabilitation Centre

Social Work:

- Catholic Family Services

Nutritional Counselling:

- Nutritional Management Services

Medical Supplies and Equipment:

- Amherstburg Pharma Plus (Coram Healthcare Ltd.)
- At Home Oxygen
- Ingram's Home Health
- Shoppers Home Health

STAFF DEVELOPMENT/ACHIEVEMENT

One of the CCAC's most valuable assets is its staff. In the past year, they have achieved great accomplishments. Among their successes are: Respiratory Training and Fit Testing (for emergency outbreak purposes such as SARS), completion of MDS-HC education and successful adoption of the common assessment tool, conducting caseload reviews, as well as developing and adhering to effective utilization strategies.

As part of the CCAC's commitment to providing seamless transitions of care, staff, at all levels, have excelled in their drive to provide continuous quality care for all clients.

Other significant achievements the CCAC has attained internally include:

- redesign of an extensive orientation and training program for new staff
- identification of Key Performance Indicators and a constant commitment of meeting those standards
- adoption of the MDS-HC common assessment tool