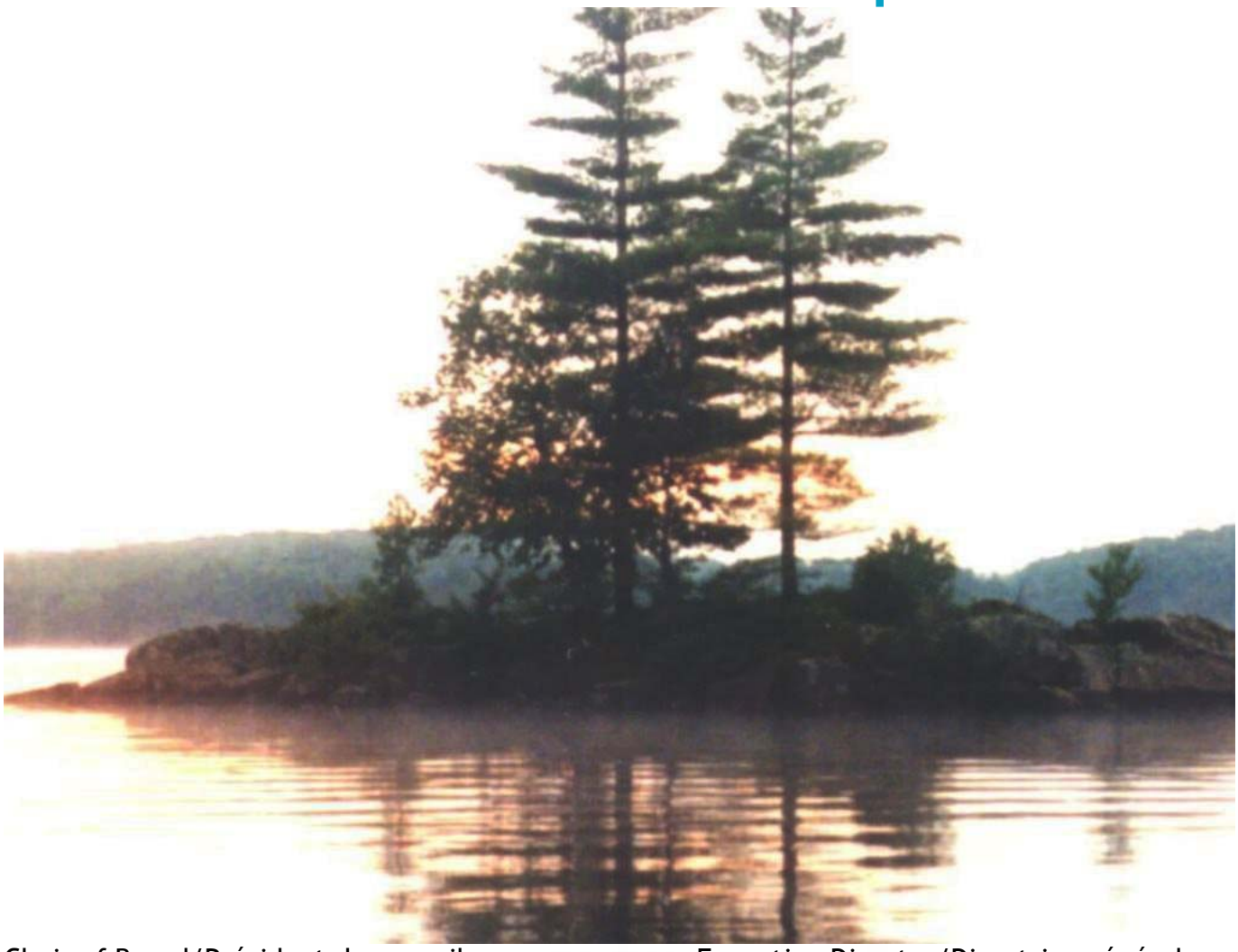
Community Care Access Centre Near North
Centre d'accès aux soins communautaires

2003/2004 Annual Report



Chair of Board/Président du conseil
David Youmans

Executive Director/Directrice générale
Lloy Schindeler

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Message from the Board Chair and Executive Director

NNCCAC/CASCMN provides community-based services to clients including nursing, nurse practitioner services, occupational therapy, physiotherapy, speech-language pathology, social work, dietetics, medical supplies, medical equipment, personal support and coordination of admission to long-term care facilities. NNCCAC is funded 100% by the Ministry of Health and Long-Term Care.

During 2003/04, significant momentum and synergies were realized as we built on the foundations of the CCAC. Foundations in the Community Advisory Council, plant and property, information management, fiscal management, and strategic planning formed an effective platform for continuous quality improvement.

The Community Advisory Council of NNCCAC/CASCMN and related committees facilitated the development of a proposal spanning 14 local health care agencies and touching on many components of the health care continuum. The inter-agency energy and enthusiasm across local hospitals, long-term care facilities, CCAC and community support agencies has been truly outstanding. Leaders are united in their vision and commitment to strengthen the local continuum of health care for residents of this region.

In terms of Plant and Property, the head office of NNCCAC was relocated to 1164 Devonshire Avenue, North Bay in September 2003. This secured an office environment conducive to client accessibility, and staff productivity. Additionally, the head office came with its own generator capable of powering the entire facility in the event of an emergency power outage.

From a fiscal perspective, the NNCCAC/CASCMN diligently balanced client needs within financial resources throughout the entire year. This was done in concert with local hospitals, long-term care facilities, and other referral sources. A balanced budget was achieved by year end.

Information systems evolved in concert with SMART Systems for Health and within the broader context of the provincial eHealth Council. Health care providers throughout the province are being connected through a secure operating platform, striving for greater efficiencies and effectiveness of communication.

In terms of Strategic Planning, the Board of NNCCAC sets out specific strategic objectives each year. Together with the staff, there is a strong commitment to truly embrace, on a daily basis, the vision, mission, values and beliefs of the organization. We wish to formally acknowledge the work of community partners, staff, volunteers, and Ministry of Health and Long-Term Care officials as we collectively build a strong community health care system for Ontarians.

David Youmans, Board Chair

Lloy Schindeler, Executive Director

Leadership/Direction

(as of March 31, 2004)

Board of Directors

Rod Coles, Vice Chair
Order-In-Council: February 8, 2002 to February 15, 2005

Mike Gelinas, Director
Order-In-Council: June 25, 2003 to June 24, 2004

Angela Knight van Schaayk, Director
Order-In-Council: February 8, 2002 to February 15, 2005

David Thompson, Secretary
Order-In-Council: February 8, 2002 to February 15, 2006

David Youmans, Chair
Order-In-Council: December 11, 2002 to February 15, 2005

Lloy Schindeler, Executive Director
Order-In-Council: February 3, 2003 to February 2, 2006

Vision

People in our community will receive the services they require, in either French or English, to provide optimal health.

Mission

1. To provide, directly or indirectly, health and related social services and supplies and equipment for the care of eligible persons within available resources.
2. To provide, directly or indirectly, goods and services to assist relatives, friends and others in the provision of care for eligible persons within available resources.
3. To manage the placement of eligible persons into long-term care facilities.
4. To provide information to the public about community-based services, long-term care facilities and related health and social services.
5. To cooperate with other organizations which have similar objectives.

Reference: CCAC Act, 2001

Values

In carrying out our Mission and seeking to achieve our Vision, the following Values and Beliefs shall be respected and incorporated operationally:

- Empathy
- Sensitivity
- Employee empowerment
- Client empowerment
- Transparency
- Effective responsiveness
- Accountability
- Quality
- Professionalism
- Trust
- Inclusivity
- Resilience
- Respect
- Honesty
- Flexibility
- Open communication
- Knowledgeable
- Fairness
- Client-centred focus
- Equal access

Initiatives and Achievements

Integration

Community Advisory Council

Community Advisory Councils are legislated under the CCAC Act with the defined purpose of improving delivery and coordination of services to people as they move from one part of the system to another, and promoting better communication and integration with key partners, specifically CCACs, hospitals, long-term care facilities, and community support agencies. During 2003/04, the Community Advisory Council of NNCCAC, together with related committees moved through various phases of inter-agency work to develop a submission to the Ministry of Health and Long-Term Care entitled "*Building a Spectrum of Health Care Options in Nipissing and Northern Sections of Northeast Parry Sound*". The primary objectives of this work are to build local solutions and system capacity to "*support individuals in the most cost-effective setting that is most congruent to their health care needs; and provide for smoother transitions between the different levels of care*". Local leaders and Boards have endorsed this proposal and are united in their commitment and vision to collectively build system capacity.

Acute Care

Acute care represents a rapidly emerging need in the community health care sector. Same-day surgeries and shortened lengths of stay in hospitals have a domino effect in the system as individuals still need follow-up acute care for procedures such as post surgical wounds, intravenous therapy, and joint replacements. NNCCAC has implemented nursing clinics since June 2000 to provide a cost and time efficient setting for this acute care. Joint care pathways and group purchasing across hospitals, long-term care facilities and the CCAC have promoted integration across the continuum. Additionally, NNCCAC and North Bay General Hospital prepared a joint submission to the Northern Shores District Health Council and the Ministry of Health and Long-Term Care regarding "*Acute Ambulatory Nursing Services*" to address the needs in this area.

Children's Rehabilitation Services

In January 2004, NNCCAC began working in concert with the new Northern Shores Children's Treatment Centre exploring opportunities for integration of rehabilitation services for children with special needs. It is envisioned that the children's rehabilitation service providers will collectively make significant strides forward together in the next fiscal year.

Client Services

Common Assessment Tool

As of March 31, 2004 CCACs across the province will have completed the largest implementation of the Resident Assessment Instrument-Home Care (RAI-HC) by a single jurisdiction in the world. This is a significant milestone accomplished in concert with the Ministry of Health and Long-Term Care and the 42 CCACs across Ontario. This initiative means that one common assessment tool, administered by Case Managers on a laptop is used across the province for individuals going into long-term care facilities or using CCAC services on a long-term basis. It has contributed to care planning, joint goal-setting with clients and identification of high risks. We applaud the Case Managers in particular, for the immense effort and tremendous resolve in achieving success in this area.

Approval of French Language Services Compliance Plan

The French Language Service Compliance Plan of NNCCAC was approved by the Ministry of Health and Long-Term Care in January 2004. This plan affirms NNCCAC's commitment to deliver client services in both official languages. On admission, clients are asked their language of choice, and service providers and staff are matched to this request.

Teaching: University Affiliations

Affiliation agreements are in place with many colleges and universities to support student internships. In 2003-04 students from Queen's University, McMaster University, Ottawa University and Nipissing-Parry Sound Catholic District School Board completed placements with NNCCAC.

In high schools, staff of NNCCAC provide presentations encouraging students to explore opportunities in various fields such as speech-language pathology, occupational therapy, physiotherapy, social work, and nursing.

Head Office Relocation Project

The head office of NNCCAC was relocated to 1164 Devonshire Avenue in September 2003. This setting provides ample parking, and ground floor, wheelchair accessibility for clients. The new head office supports a Nurse Practitioner Clinic for CCAC clients, and medical supplies department which is now fully accessible to clients and caregivers.

Information Management

Smart Systems for Health and the eHealth Council of Ontario are transferring the information system infrastructures. In the province, CCACs, provincially, made excellent progress in 2003/04 embracing these developments. The vision is to expand the secure connectivity currently in place between the 42 CCACs to a broader system linking hospitals, long-term care facilities, service provider agencies, and physicians.

Community Partnerships

NNCCAC has developed valuable partnerships with other providers, agencies and various ministries. These partnerships form a foundation for effective planning and solution building focused on improving services for clients. The primary objective is to build practical, functional strategies to maximize the local capacity of the health care system. Together, we strive towards meaningful outcomes that truly improve the quality of community health care services.

Close working relationships have been established with the four local hospitals, Northern Shores District Health Council, North Bay & District Health Unit, Community Support Agencies, seven local Long-Term Care Facilities, children's service providers, and other related ministries.

Various committees were actively pursuing common objectives throughout 2003-2004. Some of these committees include:

- Interim Strategies to Support Patients in Transition through Hospitals, Long-Term Care Facilities and Near North CCAC;
- Community Advisory Council;
- Wound Management Task Force;
- Home Infusion Task Force;
- French Language Services Committee;
- Network 6 – Hospitals/CCACs Committee;
- Nurse Practitioner Advisory Committee;
- Contracted Service Provider Agencies Committees;
- Co-location Feasibility Committee-Children's Services.

Donations

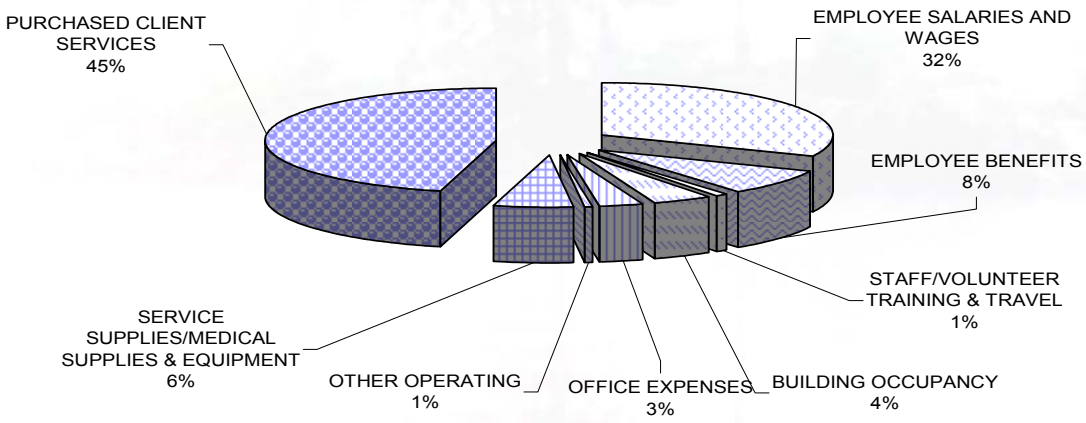
NNCCAC sincerely thanks all in the community who have given support to improve community health care services.

Financial donations are managed by a Donations Committee which diligently reviews client situations where all other financial resources have been exhausted.

Donations in 2003-04 assisted with purchases of wheelchairs, hospital beds, and medical equipment for clients with complex, urgent needs with limited financial resources. Donated medical equipment from clients was redirected to other clients most in need. These donations are sincerely appreciated.

Financial/Statistical Report

2003-2004 Expenditure Summary



Revenue: $12,971,776 **Expenditures: $12,797,833**

2003-2004 Expenditures by Type

EMPLOYEE SALARIES AND WAGES	4,053,175
EMPLOYEE BENEFITS	1,023,319
STAFF/VOLUNTEER TRAINING & TRAVEL	121,934
BUILDING OCCUPANCY	512,196
OFFICE EXPENSES	404,816
OTHER OPERATING	72,227
SERVICE SUPPLIES/MEDICAL SUPPLIES & EQUIPMENT	711,961
PURCHASED CLIENT SERVICES	5,898,205
Total	**$12,797,833**

Number of Individuals Served by Service

Service	Units Provided	Individuals Served
Nursing	60,494	2,493
Social Work	2,549	334
Nutrition	284	116
Speech Language Therapy	3,500	501
Physiotherapy	5,588	1,098
Occupational Therapy	9,181	1,491
Respiratory Therapy	12	12
Personal Support	110,478	1,161
Case Management	6,470	5,720
Placement Services	699	305
Nurse Practitioner	710	245

Revenue and Expenditures for Year Ending March 31, 2004

Revenue		
Province of Ontario	$12,952,250	
Interest & Miscellaneous	$19,526	
		$12,971,776
Expenditures		
Salaries & Benefits	$5,076,494	
Purchased Client Services, Supplies & Equipment	$6,610,166	
Operating	$1,111,173	
		$12,797,833
Excess of Revenue over Expenditures		**$173,943**

(Surplus includes MOHLTC funding received after year end)
*Audited Financial Statements are available upon request.

Performance Information

Service Highlights

During 2003/04, 5,711 individuals received community-based health services through NNCCAC. The previous charts illustrate the number of individuals that were served by each of the services. Throughout the year, client services were carefully balanced within fiscal resources.

Client Satisfaction Surveys

Continuous quality improvement is important to ensuring that the highest possible quality of services is provided to clients. Measuring client satisfaction surveys is one method of getting input and developing quality improvement plans.

The 2003/04 client satisfaction survey results illustrated:

- ✓ An outstanding level of client satisfaction in Therapy Clinics provided to children and their parents.
- ✓ High levels of satisfaction in the Placement Coordination Service.
- ✓ High levels of satisfaction for in-home services (Nursing, Therapies, Personal Support).

Based on survey results of the previous year (2002/03), we targeted improvements in ensuring clients understand "who to call" for case coordination. Significant improvements were achieved in 2003/04 with 89% of clients stating they knew "who their Case Manager was and how to contact her".

Information of Service Providers and Staff

Client services are provided to clients by both contracted service provider agencies and clinicians employed directly by NNCCAC.

Contracted Service Provider Agencies

SERVICE	COMPANY
Nursing	Para-Med Home Health Care-North Bay Branch
	Victorian Order of Nurses-North Bay Branch
	Paracare Wholistic Health Services
	Caring Together Home Health
Personal Support/Home Support	Para-Med Home Health Care
	Community Health Services (Red Cross)
Occupational Therapy	Nipissing O.T. Associates (L. Patterson)
	Nipissing O.T. Associates (S. Tempio)
	Occupational Therapy Services d'Ergothérapie
Speech-Language Pathology	Community Rehab North
	Rena Lavoie

Contracted Service Provider Agencies Continued

Dietetics	Calhoun Dietetic Services
	West Nipissing General Hospital
Respiratory Therapy	Shoppers Home Health Care
Medical Supplies	Shoppers Home Health
	Smith & Nephew
	Trout Lake Pharmacy
Medical Equipment Rental	Shoppers Home Health
	Home Medical Supplies/ Pharmalee
	Medigas
	Trout Lake Pharmacy

Clinicians Employed Directly by NNCCAC/CASCMN

Speech-Language Pathologists	5.1 Full-time Equivalent
Occupational Therapists	9.2 Full-time Equivalent
Physiotherapists	6.6 Full-time Equivalent
Nurse Practitioner	1.0 Full-time Equivalent
Social Workers	3.3 Full-time Equivalent
Therapy Assistant	1.0 Full-time Equivalent
Case Managers	22.8 Full-time Equivalent

Client services are provided in clients' own home, in schools, clinics and other community settings that support care.