KFL&A COMMUNITY CARE ACCESS CENTRE

Fourth Annual Report

about home health care and long-term care admission

Welcome

Welcome to the KFL&A Community Care Access Centre's fourth annual report. The Access Centre provides case management and health-care services in homes, schools and other places outside of hospitals. We also arrange for people to live in nursing homes and homes for the aged and we provide information about community services. We work closely with family physicians and hospital specialists. We are one of 43 community care access centres in Ontario. Our services are paid for by your taxes through the Ontario Ministry of Health and Long-Term Care.

We know that the operations of the Access Centre are crucial to the health of the community. We hope that this report will enhance your understanding about the Access Centre and the ways in which we're managing local home health care on your behalf. If you would like to learn more or enquire about how the Access Centre might assist in your health care, call one of the Access Centre's three offices at:

Kingston	(613) 546-7090
Napanee	(613) 354-9755
Northbrook	(613) 336-8310

Home care
at home in the country

Ralph Melburn sits comfortably in his wheelchair at home, his dog at his side.

When Ralph Melburn needs to heat his place, he fills up an old wheelchair with wood from the pile in the shed and pushes it inside to the woodstove. That sounds easy, but it's really quite a challenge. Ralph is in a wheelchair himself, and he has some careful maneuvering to do. But he manages "just fine," he says.

Ralph has complex medical problems. But they don't stop him from living alone in his cabin in a forest and loving it. He's the first to acknowledge that he needs help to live alone. His neighbour down the road shops for his groceries and keeps an eye on him. Game wardens, loggers and others drop in to visit. And the Access Centre manages the design and delivery of his medical care.

Care Manager Monica Smith, who works with the Access Centre's Northbrook office, makes house calls to assess his condition and needs. She arranges for a laboratory technician to come regularly to test his blood and a nurse to visit weekly to organize his medications and to ensure his blood pressure is not out of control and his lungs are functioning adequately. Ralph does not pay for these services; they are paid for by the Access Centre.

Monica also helped him acquire the bathroom aids he needs so that he can live alone and arranged for a visit by a physiotherapist to see if Ralph could walk with help. Unfortunately, that wasn't possible.

"But I can see and hear well," he says. "I just love it out here. I never seem to get downhearted."

Monica says that Ralph is a joy to know. He is one of more than 1,000 rural clients who depend on the Access Centre for care on any single day. About 30 per cent of Access Centre clients live north of Kingston and Napanee, many in remote locations.

"I put 800 to 1,200 kilometres on my car every month going out to see clients all over the countryside," she says.

Ralph is happy. He can stay at home, thanks to all the help he gets from others.

"I love my home, my dogs, my country and the people who visit me."

Bringing **Health Care** Home™

Our accountability cycle goes two ways

People often ask us who pays for the health-care services that we arrange and manage. Our answer is, You do. Your taxes pay for them. This means we are accountable to you.

"Accountability" is today's buzzword when people are talking about public services. Accountability in this sense refers to circular links that join processes, obligations, actions and responses in a public undertaking.

The model that the Province of Ontario established for community care access centres in Ontario five years ago supports this accountability cycle. Moving clockwise, we see that:

The citizens of Ontario elect a provincial government to represent them. They also pay provincial taxes to fund this government and public services.

The government, as an elected body that represents the citizens, establishes health-care legislation and policies.

It has set up access centres to be responsible for carrying out the government's legislation and policies. The government also provides access centres with taxpayers' money to pay for services.

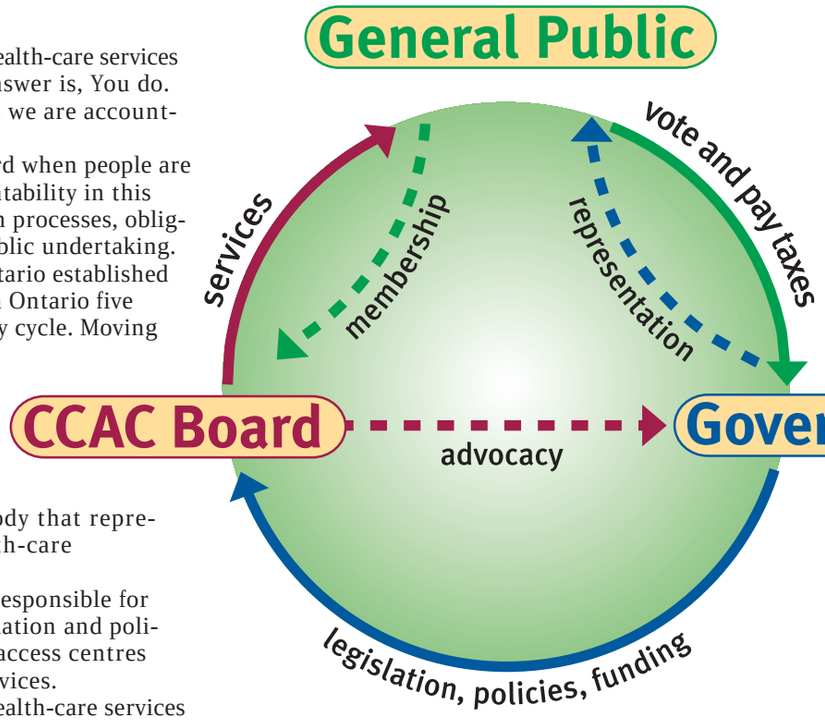
The access centres provide home health-care services to citizens who, in turn, vote and elect the next government, and pay taxes.

The cycle has a reverse direction as well. Citizens provide an access centre with a membership that is representative of the people who live in the region. The members elect a board of directors from among themselves. The board advocates on the community's behalf to the government, which is composed of representatives elected by the community's citizens.

Thus the cycle of accountability goes in both directions.

At the KFL&A Community Care Access Centre, we are doing everything we can to be accountable to the government in one direction and to you in the other. We are doing our best to carry out the government's legislation and policies. At the same time, we are advocating strongly to the government on your behalf about the issues that concern you about home health care and the funding provided to support it. We've had varying success, but we are pleased that this access centre is one of the best funded of the 43 access centres in Ontario and provides some of the most advanced home health care available.

We expect that home health care, as one part of the health-care continuum, will continue to be a turbulent issue. You can be assured that we will continue to do our best to provide this community with the best care possible.



Accountability for home health-care dollars and quality of service is achieved by interlinked responsibilities.

Charles Simonds, chair of the Access Centre's board of directors, and Nancy Sears, chief executive officer

We're partners in emergency care

Access Centre care manager Marianne Hunter (second from left) discusses discharge plans with KGH emergency-room colleagues: Michael O'Connor, physician and head of the department of emergency medicine, Mike McDonald, nurse manager of the emergency room, Kathy Mussell, charge nurse and Tracey Pierce, social worker.

Although Marianne Hunter is a community care manager, she works inside a hospital. Most of the time, she works in the emergency department of the Kingston General Hospital. After patients have received treatment in the ER, she helps decide where they'll go next. Will they be admitted to hospital? Will they go home? Or will they go to a nursing home? The answer often depends on what home health-care services they need and can get in order to be safe outside of hospital.

If patients do not have to be admitted to hospital, Hunter's job is to assess their eligibility and need for admission to the Community Care Access Centre. If she admits them, she prescribes a plan for their care and arranges for them to receive the services they need wherever they live.

Dr. Michael O'Connor is the head of the department of emergency medicine. The ER is increasingly dependent, he says, on the services the Access Centre provides.

"We continually express our appreciation for them," he says. "What they do is vitally important to patients and their families."

Hunter loves her job. She describes it as challenging, especially in these times of very tight budgets, but varied and interesting as well.

"I'm always learning," she says, "and I'm treated as a peer and a valued colleague in the emergency room. We have a collaborative approach."

Hunter is one of 18 of the Access Centre's 44 care managers who work inside Kingston General Hospital and three other local hospitals – Hotel Dieu, Providence Continuing Care Centre's St. Mary's of the Lake site and Lennox & Addington County Hospital.

Key statistics

Financial Summary

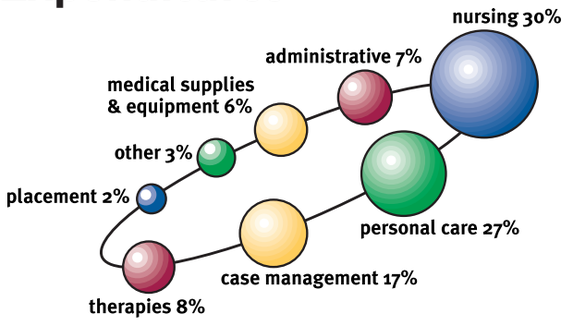
Financial position
for the 12-month period ending March 31, 2001

current assets	$3,012,133
capital assets	160,280
total assets	***$3,172,413***

Liabilities, deferred capital contributions and deficit

current liabilities	$3,115,501
(includes deferred revenue of $30,023)	
deferred capital contributions	160,280
deficit	(103,368)
total liabilities	***$3,172,413***

Expenditures



Expenditures totaled $27,350,772 — 76 per cent for purchased patient services, 17 per cent for case-management services and 7 per cent for administration.

The Public Sector Disclosure Act requires an organization such as the Access Centre to publish any individual income of $100,000 or more. The salary of the chief executive officer was $108,683.73 for the year 2000. The CEO also received a one-time pay-equity sum of $58,504 for service between 1993 and 1996.

Clients

The Access Centre served more than 8,500 people and their families. That's about one in every 21 people in our community.

Funding

Provincial funding	$ 27,191,666
Other revenues	159,056
(including deferred capital contributions)	
Total revenue	***$27,350,722***

Provincial funding includes one-time operating deficit funding of approximately $1.5 million and one-time special-project funding of $595,432

Services

Donations

Every day our staff encounter people who have unmet health-care needs that the Access Centre cannot cover with public funds. For that reason, we created a charitable fund. As a non-profit agency and registered charity, we are able to accept donations and issue tax-deductible receipts. A committee of the Access Centre's directors and members considers requests and allocates money from our fund to those who are most in need. This year, with your contributions, we provided:

- extra nursing for patients dying at home
- special tilt commode for privacy and safety in the washroom
- doorknob grips to increase independence
- hammock sling for a shower
- urostomy supplies for a palliative patient
- compression stockings to promote healing
- long-handled reachers to increase independence
- urinal for nighttime convenience
- push gloves for wearing with a manual wheelchair
- orthopedic shoes
- special writing books for children at summer occupational therapy clinic
- special boots to prevent slipping during transfers
- raised toilet seat to make transfers safer
- special poles, tub-rails and handrails to provide safety
- pole and tub-transfer bench for safety for an amputee

We are most grateful to the following who made donations to the KFL&A Community Care Access Centre during the year.

Shirley Amey • Bombardier Transportation • M. Carr • The Davies Charitable Foundation • Rita Donovan • Donna L. Gallagher • Lin Good • John Heaman • Gyles Johnston • Kingston and District Civitan Club • Francis Manion • Catherine McGrath • Theresa Miller for the Miller family • Tom Newton • Ted and Olive Robbie • Hazel (Bonnie) Sears • Sears Ladies Wear Staff • Charles Simonds • Fern Isabell Stoliker • Reinolde Vanweringh • Katherine Wheeler • Joan Williams

Some additional donors wished to remain anonymous.

Thanks

The board of directors of the Access Centre is grateful to staff for their continued dedication to ensuring that the people in Kingston, Lennox & Addington County and the Frontenac municipalities have the best home health care possible. The board thanks the Access Centre's health-care partners — the four hospitals and 10 long-term care facilities in the area — for their co-operation. It also thanks the organizations with which the Access Centre had contracts and from which it purchased services. In the fiscal year 2000/2001, these were:

All-Care Health Services	*$3,531,000*
Canadian Red Cross Society	*1,435,000*
ComCare Health Services	*1,300,000*
Carpet Care Kingston	*35,000*
Hotel Dieu (pediatric services)	*188,000*
Hospice Kingston	*106,000*
K0 2 Medichair	*750,000*
Ongwanada	*700*
ParaMed Home Health Care	*3,126,000*
Providence Continuing Care Centre	*2,030,000*
Respircare	*838,000*
VON	*5,700,000*

Q&A

Who does the Access Centre serve?

The Access Centre serves the 180,000 residents of Kingston, Lennox & Addington County and the municipalities of North Frontenac, Central Frontenac, South Frontenac and Frontenac Islands.

What services does the Access Centre provide?

- case management
- nursing
- physiotherapy
- occupational therapy
- speech therapy
- personal in-home support
- caregiver respite
- medical social work
- diagnostic laboratory services
- medical supplies and equipment
- medical transportation
- nutritional counseling
- Ontario drug benefits
- Information about and admission to nursing homes and homes for the aged
- admission to some adult day centres
- information about health-care and support services in the community

Who pays for the services?

The Access Centre's services are funded by the Ontario Ministry of Health and Long-Term Care and provided by the Access Centre free of charge to residents who are admitted for care.

How do I get care?

Call one of the Access Centre's three community offices, or have a friend, family member or physician call on your behalf.

Kingston (613) **544-7090**
Napanee (613) **354-9755**
Northbrook (613) **336-8310**

A care manager, who is a registered health professional with community-nursing or rehabilitation expertise, will determine whether you are eligible for care and prescribe the health-care services you need.

Who governs the Access Centre?

The Access Centre is governed by a volunteer board of directors made up of local people who are interested in health care. The board makes policy decisions and determines the Access Centre's bylaws according to the policies, guidelines and procedures established by the government of Ontario. It has equal representation from rural and urban areas throughout its jurisdiction.

Board and members 2000/01

Back row, from left, Harold Clark, Joan Flieler, Rod Hughes, Tom Plunkett, Cathy Hunter, John Langton, Elizabeth Staples. Front row, from left, Lin Good, Shirley Marsh, Charles Simonds, Gaye Hill, Barb Marlin.

The Access Centre is governed by 12 volunteer directors who are elected from its membership. The members are:

Fim Andringa
Janette Atwell
Jamie Lynn Babcock
Scott Batson
Sandra Baxter
Barry Boardman
Harold Clark
Audrey Cobden
Jean Cummins
Will Cybulski
Dennis Dressler
Stephen Edmiston
Dennis Ellis
Richard Fleming
Joan Flieler
Helen Forsey
Kathryn Foster
Lucile Fowler
June Fox
Wilma Francis
Lin Good
Helen Goodall
Jacqueline Heath
Gaye Hill
Dagmar Horsburgh
Rod Hughes
Cathy Hunter
Linda Hunter
Marian James
Di Kirkwood
Alex Lampropoulos
John Langton
Saralyn Mabo
Evelyn Maizen
Barb Marlin
Shirley Marsh
Diane Maybe
Sandra Megaffin
Ellen Merrin
Shirley Miller
Elrose Mitchell
William Murray
William Newlands
Fran O'Heare
Tom Plunkett
Dave Reynolds
Joan Rutter
Larry Rutter
Nancy Savage
Troy Savage
Kathy Silver
Charles Simonds
Duncan Sinclair
Elizabeth Staples
Robert J. Uffen
Sylvia Vandale
Louise Webster-Shearing
Ian Wilson
Helen I. Wood

Rural views well represented

For Helen Wood, being a member of the Access Centre is an opportunity to learn more about what's going on in home health care and to pass the information on to people in her community. She lives outside a village in Lennox & Addington County. People ask her lots of questions.

"The sticky one is why we can't give people more care," she says.

"I try to explain that in past years, doctors could order home care and the budget was limitless. That's all changed. Now there's a limited budget."

Just as she can bring information into the community, Wood also believes she can represent rural viewpoints at the Access Centre.

Helen Wood

"I get a lot of material from the Access Centre, including the newsletter and board agendas each month," she says, "and I have attended just about every board meeting in the past two years. There are usually presentations, and members get a chance to speak or ask questions at the end of the meetings. I often take advantage of that opportunity to put forward rural views."

Most members of the Access Centre are people who have been clients, close to former clients or have worked in or volunteered in the health-care and social-services fields. When Wood's parents were at Lenadco Home for the Aged, she joined the auxiliary and later became its president.

"I saw issues from both management and resident sides," she says.

Another of Wood's close family members kept his ailing wife at home without help. Months later, he required home health care himself.

"I was there when someone from the Access Centre came to assess the situation," says Wood. "The way she explained things was wonderful."

Wood is one of 60 members of the Access Centre. Fifteen members live in Lennox & Addington County, another 15 live in one of the Frontenac municipalities, and 30 live in Kingston.

"The membership is divided that way to ensure that the community is fully represented," says Wood, who is on the membership committee.

The Access Centre's board of directors is elected from the Centre's membership. Wood conducted the election of the board's 2001/02 officers at the Access Centre's annual general meeting in June.

"Some people think we only provide care in the city. That's not true. We have offices in Napanee and Northbrook, and our people travel all through the counties to bring health care home, no matter how rural that home might be."