

DURHAM ACCESS TO CARE



ANNUAL REPORT TO THE COMMUNITY 2001/2002

DURHAM ACCESS TO CARE
IS YOUR COMMUNITY CARE ACCESS CENTRE
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Canadian Council on Health
Services Accreditation



Conseil canadien d'agrément
des services de santé

A MESSAGE FROM OUR BOARD PRESIDENT & EXECUTIVE DIRECTOR



Bill Botshka,
Board Chair

Durham Access To Care is now established as a statutory corporation under the Community Care Access Act which was passed in the legislature in December 2001. Under the Act, Boards and Executive Directors will now be appointed by an Order-in-Council.

Our CEO and entire Board were offered reappointment and we have begun the work of aligning our processes with the new legislation. This includes entering into a Memorandum of Understanding with the Ministry of Health and Long Term Care and establishing a Business Plan to provide home care and access to long term care for the community of Durham Region. See page 6 for other details about our activities further to Bill 130.

Other highlights from last year include the establishment of the Durham Access To Care Foundation whose mission is:
"To support initiatives that will enhance community health care in Durham."

Many of you attended our November Community Health Forum where we explored home care research and some of the ethical issues confronting the home care sector. The Foundation we established will promote activities such as this in future. It is our belief that Durham Access To Care has a role to play in ensuring education and community dialogue and consultation about the significant challenges we face as we continue to serve the needs of the people of Durham.

We are pleased to report that we ended the

year with a balanced budget with administrative costs of less than 6.3%. We would like to recognize and thank our staff and service providers for their efforts in achieving cost containment goals. They have demonstrated their accountabilities while staying focused on clients and their needs. We would also like to acknowledge the work of our Placement Team for implementing the new regulations affecting long term care placement. They have worked with our facilities and hospital partners to ensure a smooth transition for our clients to the 600 new long term care beds opening in Durham in the upcoming year.

Accountability. The word is on the minds of many as government, the Ministry and health care organizations across the province struggle with limited resources and large mandates. At Durham Access To Care, we are developing an accountability framework that will allow us to monitor and analyze our success. The framework goes beyond financial accountability to ensure a "balanced scorecard" report that recognizes the importance of a client/community focus as well as quality of worklife and system effectiveness. See last page for details.

In closing we wish to thank the staff of Durham Access To Care and our contributing partners for the achievement of a full accreditation through The Canadian Council of Health Services Accreditation. We are proud and gratified to know that we are meeting and/or exceeding national standards. Congratulations!



Janet Harris,
Executive Director

DATC FOUNDATION



The Durham Access To Care Foundation has been established to advance community health care in Durham. A Foundation Board of community members has been established to oversee this mandate. Bequests and donations to Durham Access To Care will be administered through the Foundation in future.

DONATIONS

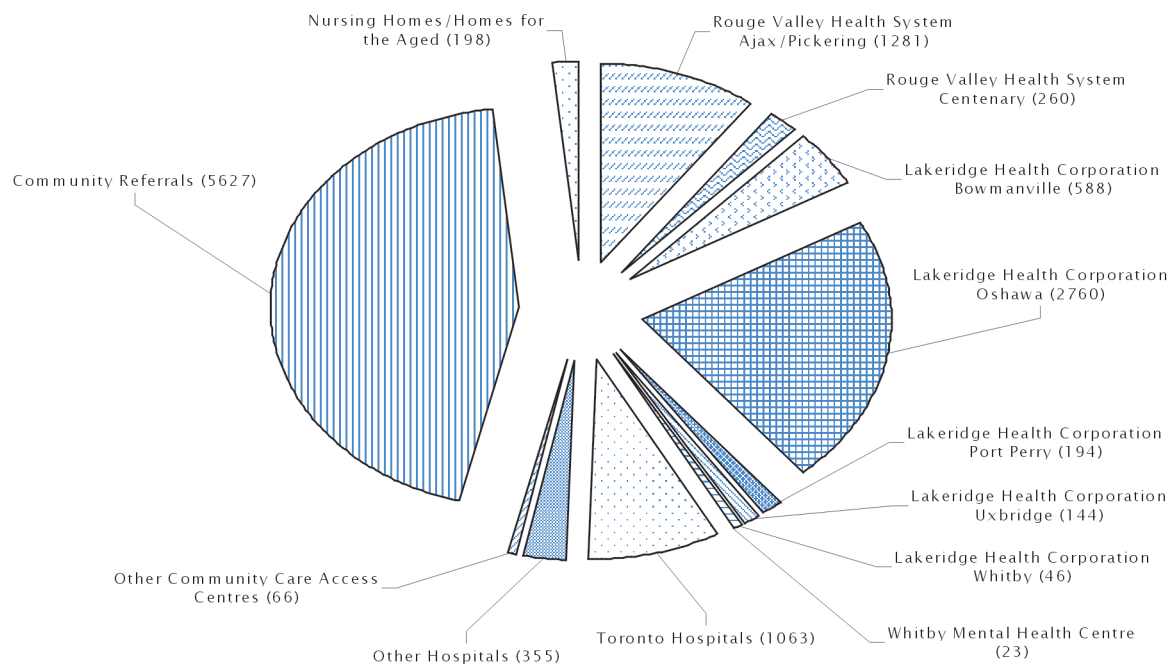
During the 2001/2002 fiscal year, Durham Access To Care received donations in the amount of \$6,550.00 from clients, families and friends for recognition of the contribution of DATC staff and service providers. Donations are used to further enhance client services in Durham Region.



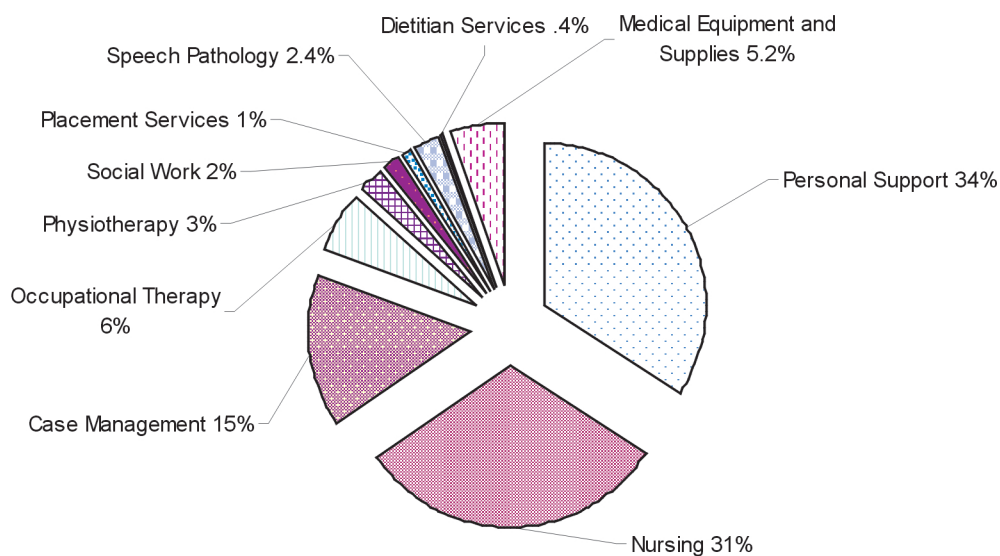
OUR BOARD OF DIRECTORS 2001/2002

FROM LEFT TO RIGHT: Maureen Wishart, Director; Marek Ulanicki, Director; Janet Harris, Executive Director; Bill Botshka, President; Howard Hall, Vice President; Simone Lusty, Director; Janette Taggart, Treasurer; Lynn West, Secretary; Connie Vesna, Director; Barbara Hiemstra, Past President; Elizabeth McCreight, Director ABSENT: Mary Bazeley, Vice President; Douglas Hird, Director (Resigned Feb. 02)

WHERE OUR CLIENTS COME FROM APRIL 1, 2001 - MARCH 31, 2002



BREAKDOWN OF CLIENT SERVICE EXPENDITURES APRIL 1, 2001 - MARCH 31, 2002



CURRENT MINISTRY INITIATIVES

Introduction of a Community Assessment Tool for Long Stay Clients

A new assessment tool (the MDS Inter-Rai Home Care Tool) has been introduced across the province for adults who require long-stay CCAC service. Our staff will receive training on use of this tool in the fall.



Our service providers, hospitals and long term care facilities will also be receiving training. The assessment is done face-to-face with clients and the

assessment data is entered on a laptop in the client's home. The assessment tool will yield important information called Client Assessment Protocols which will allow better tracking and monitoring of client progress towards treatment goals.

Ensuring Access to New and Existing Long Term Care Beds in Durham

The MDS Home Care Assessment Tool will provide complete and accurate assessments of clients awaiting long term care placement and consistent determination of eligibility. With over 800 new beds opening in Durham over the next two years, ensuring equitable access for eligible clients is a key priority. New regulations have been passed which have streamlined placement processes in such a way as to facilitate the smooth transfer of clients from hospital and the community into long term care.

Resource Allocation Model for Case Managers

Five "Service Recipient Types" have been identified:

1. Maintenance: Services designed to maintain independence.

2. Rehabilitation: Goal-oriented and time-oriented services to improve functional status.
3. Long Term Supportive Care: Personal care and hands-on assistance to substitute for long term care facility care.
4. Acute Care Substitution: Services to promote recovery.
5. End of Life Care: Services to alleviate distressing symptoms to achieve best quality of life for clients and their families.

Case managers receive weekly reports to assist in monitoring resource utilization and ensure that targeted resource targets are achieved. The Resource Allocation Model will allow DATC to be accountable for each service plan while ensuring clients are well served on a consistent basis across the province.



Establishment of Community Advisory Council

A new Council chaired by Mary Bazeley, Vice President, Durham Access To Care will be dedicated to ensuring that services are well coordinated across the continuum of care. Members of the committee will include the following representatives:

- 2 from the hospital sector
- 2 from the long term care sector
- 2 from community support agencies

OUR TEAM

102 case managers and placement coordinators work in partnership with 66 support staff to assist more than 7000 clients served monthly. Supporting this strong team are 15 service provider agencies and our management group:

Executive Director: Janet Harris

Director, Client Services, Quality, Research & Development: Jennie Pickard

Director, Corporate Services: David Stringer

Program Managers: Marilyn Brown, Lisa Burden, Beth Leonard, Lynda MacGregor,

Sherry McGeough, Cathy Sturch

Manager, Finance: Marie Goleski

Manager, Information Systems: David Merkley

Manager, Human Resources: Tom Oleson

Communication and Public Relations Coordinator: Esther Filer

Executive Assistant to the Executive Director: Paula Landry

QUALITY COUNCIL DISPLAYING ACCREDITATION AWARD



Left to Right: Niall O'Donnell, David Stringer, Beth Leonard, Diane Greenlees, Lisa Burden, Tom Oleson, Cathy Sturch, Peggy Hewson, Terry Lee Leslie, Joey Buwalda, Rebecca Lazenby, Marie Goleski, Roxanne Clark, Mary Anne Sawula, Debbie Garrison, Marilyn Brown

Durham Access To Care would like to thank our 2001/2002 service providers:

Personal Support Services: Comcare Health Services, Kawartha Quality Health Care, Paramed Home Health Care, Saint Elizabeth Health Care, VHA Home Healthcare

Nursing Services: Bayshore HealthCare, Comcare Health Services, Durham Association for Family Respite Services, Paramed Home Health Care, Partners in Community Nursing, Saint Elizabeth Health Care, Victorian Order of Nurses

Rehabilitation Services: Community Advantage Rehabilitation, Heaman Communications Services, Integrated Rehab Professionals

Medical & I.V. Supplies & Equipment: Coram Healthcare Ltd., Medigas

Laboratory Services: Gamma Dynacare

ACCOUNTABILITY & PERFORMANCE MEASUREMENT PROJECT

This is a project that will allow us to measure and report on our organizational performance to various stakeholders including:

The Board and Community at large
The Ministry of Health and Long Term Care
Our Clients
Our Staff
Our Service Providers
External Partners
Canadian Council of Health Services Accreditation

The report will be presented in a “balanced scorecard” fashion to ensure that all aspects of organizational performance receive attention. The 4 categories are based on the 4 quality dimensions of the Canadian Council of Health Services Accreditation. The following table lists the critical areas for measurement and reporting for the organization as a whole.

RESPONSIVENESS Placement Processes Waiting Lists Service Utilization/Intensity	CLIENT/COMMUNITY FOCUS External Feedback (Inquiries/Complaints/ Compliments) Client Satisfaction Linkages/Partnerships Achievement of Client Goals
SYSTEM COMPETENCY Balanced Budget Ethical Decision-Making Administration Costs Clean Audit Report Staff Competency Risk Management Receipt of Authorized Services Resource Allocation Role of Case Managers	WORKLIFE Sick Leave Staff Satisfaction Staff Turnover Wellness Activity Education of Staff Workload

***IF YOU WOULD LIKE MORE INFORMATION ABOUT
DURHAM ACCESS TO CARE
PLEASE CONTACT
OUR INFORMATION AND REFERRAL TEAM
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