



Etobicoke

Community Care Access Centre

OUR VISION

Your gateway
to excellence in
community care

OUR MISSION

To deliver, through a
network of community
partners, comprehensive
and coordinated health-
care and social services
that are judged by those
we serve as accessible,
responsive and effective.

OUR VALUES

- Caring
- Fair, equitable and open
- Optimizing independence
- Family/Client-centred
- Flexible and accountable
- Maximizing potential

ANNUAL REPORT 2002-2003



CCAC

Etobicoke Community Care Access Centre
Currently, Etobicoke and York Community Care Access Centre
401 The West Mall, Suite 101
Etobicoke, ON M9C 5J5
416 626 2222
www.etobicokeccac.com



A Year of Transition

The year 2002/2003 was *A Year of Transition* for the Etobicoke Community Care Access Centre. It began with the Ministry of Health and Long-Term Care designating the Etobicoke Community Care Access Centre (Etobicoke CCAC) and the York Community Care Access Centre (York CCAC) as Co-Managed organizations with one Executive Director leading the two independent organizations, each with their own Board of Directors.

Both organizations responded positively to the challenges of Co-Management. Throughout the *Year of Transition* our focus was to maintain quality client services while moving to a Shared Services Model in the areas of management and administrative functions. The savings from the sharing of resources were reallocated to the provision of quality Client care.

We are proud of all that we achieved in 2002/2003. Critical to that success was the dedication of our management and front-line Staff who consistently worked to provide quality care to our clients during a time of transition. Health care and community care is a partnership. We would like to take this opportunity to acknowledge our Service Providers and Community Partners, all of whom play a vital part in helping clients live independently in their homes.

As the year ended, Toronto, and particularly its health care institutions were faced with Sudden Acute Respiratory Syndrome (SARS). We are very proud of the Community Care Access Centre's response to this challenge. Our sincere thanks go to all health care workers who continued to provide care throughout the crisis.

Building on the successes of Co-Management, the Ministry of Health and Long-Term Care approved the unanimous request from both Boards of Directors that the Etobicoke Community Care Access Centre and the York Community Care Access Centre be joined into one organization, effective April 1, 2003.

The Etobicoke Community Care Access Centre has a strong tradition of providing high quality client care. The Etobicoke Community Care Access Centre has made many contributions to the development of home care through its work in the areas of service delivery systems and accountability frameworks. These best practices and traditions will continue to form a vital part of our conjoined organization – the Etobicoke and York Community Care Access Centre. We are committed to using the best of each of our former organizations to build a strong unified organization that will continue to provide the best possible care to clients and to meet its goals and objectives in the coming years.

Sincerely,

Judith Hayward

Chair, Board of Directors

Etobicoke and York Community Care Access Centre, 2003/2004

Cathy Szabo

Executive Director

Etobicoke Community Care Access Centre, 2002/2003

Etobicoke and York Community Care Access Centre, 2003/2004



Community Initiatives

Supporting the Nursing Profession Through a Partnership with Ryerson University

The Etobicoke CCAC is a designated Regional Access Centre providing off-site education for the Bachelor of Science in Nursing (BScN) Program. Diploma nurses, who have applied and been accepted into Ryerson's BScN Program, are able to attend courses at our offices. This is open to all diploma nurses, not just those employed with the Community Care Access Centres. Last year, three courses were offered and 48 nursing course credits issued.

We are pleased to support the nursing profession by providing facilities and equipment for class instruction and to provide easier access to educational opportunities for nurses.

Building Physician Support for Community Care by Linking with the Faculty of Medicine, University of Toronto

Twenty-two first year medical students received an introduction to community medicine through the Etobicoke CCAC and its Nursing Service Providers. Each placement includes preceptorship by a CCAC Case Manager, a home visit with a Service Provider, and an independent study on home care that is completed by each medical student.

We are very pleased to support physician involvement in home care through this innovative project.

Supporting Client Independence Through Community Access to Transportation for Seniors (CATS)

Together with the Red Cross, Storefront Humber, West Toronto Services for Seniors, and Etobicoke Services for Seniors, we are helping senior citizens with their transportation needs. Seniors requiring transportation assistance can call any of the participating agencies who

then coordinate volunteer transportation services through a newly developed software program. This co-operative venture ensures that volunteer services are maximized for the benefit of our clients. Thanks to the Trillium Foundation which provides financial support for this project.

Nursing and Health Outcomes Feasibility Study

At the request of the Ministry of Health and Long-Term Care, the Etobicoke CCAC was one of four CCACs in Ontario that participated in a provincial-wide study to assess, quantify and improve nursing outcomes. Our thanks go to the clients who assisted us with this study and to the staff at both Spectrum Health Care and the Etobicoke Hospital Campus – William Osler Health Centre.

Partnering to Support Health and Community

Representatives of the Etobicoke CCAC actively participate in building and strengthening the following community agencies and organizations:

- ✓ Community Advisory Panel, William Osler Health Centre – Etobicoke Hospital Campus
- ✓ Leadership and Partnerships Panel, CCHSA Accreditation, St. Joseph's Health Centre
- ✓ Etobicoke Falls Prevention Coalition
- ✓ Palliative Care Networks
- ✓ Community Programs Advisory Council, Faculty of Medicine, University of Toronto
- ✓ Child Health Network's Task Force through a Cooperative Project, Evaluating System Performance
- ✓ Heart and Stroke Foundation of Ontario through the Workgroup on Best Practice Guidelines for Stroke Care: A Resource for Implementing Optimal Stroke Care.



Community Initiatives (cont.)

Donations – A Word of Appreciation

The Etobicoke CCAC is registered as a charitable organization with Canada Customs and Revenue Agency (CCRA). We issue tax receipts for cash donations, but do not actively solicit these funds. Contributions are used to provide some of our clients with equipment such as bathroom devices. In 2002/2003 the Etobicoke CCAC received \$65 in donations. Our registered charitable number is: BN 88132 6565 RR0001.

Volunteer Program - Saluting our Community Volunteers!

The Etobicoke CCAC's Volunteer Program has been supporting community relations' activities since April 2001. Our volunteers assist with organizing and hosting community events, preparing Welcome and Information Packages for clients, distributing service information throughout the community and ensuring client and caregiver information is pertinent and meets our highest standards.

Our sincere thanks to our 2002/2003 Volunteers:

Amanda Misters
Joan McCurdy
Ann Nutter

Working in Partnership - The Arthritis Society (TAS)

The Etobicoke CCAC would like to extend its sincere appreciation to The Arthritis Society (TAS). TAS provides physiotherapy and occupational therapy to clients of the Etobicoke CCAC who have a primary diagnosis with an arthritic disease. Our clients do not pay a fee for services provided by TAS.

Recognizing Leadership



Photo: Sandra Strangemore

The Board of Directors of the Etobicoke Community Care Access Centre: (Back) Rene Wilson, Doreen Flockhart, John Capobianco. (Seated) Bonnie Fernie, Cathy Szabo. Absent: Michael Davies and Jane White.

Board of Directors

During the *Year of Transition*, the Board of Directors of the Etobicoke Community Care Access Centre worked closely with the Board of Directors, York Community Care Access Centre to guide both organizations through Co-Management and together successfully requested approval from the Minister of Health and Long-Term Care to join the two organizations.

A special word of thanks goes to Bonnie Fernie, who has just completed six years of service with the Etobicoke Community Care Access Centre, the last four years as Chair. Bonnie's commitment to the community and to our clients has been a guiding force in our organization.

John Capobianco*
Michael Davies*
Bonnie Fernie (Chair)*
Doreen Flockhart
Jane White*
Rene Wilson

**Term of Office completed April 30, 2003*



Case Management – Bringing a New Perspective to our Core Business

A major focus for both the Etobicoke CCAC and the York CCAC in 2002/2003 was to build a more accountable, client-focused Case Management Model that will form the basis for the future delivery of our services. From the perspectives of the Etobicoke CCAC and York CCAC the goal was to:

- ✓ Demonstrate and quantify the value of Case Management to clients, service providers, community partners, and the government
- ✓ Improve service to clients by having Case Managers work directly with clients and community partners to provide better service along the continuum of care
- ✓ Support the recruitment and retention of Case Managers by moving to an independent practitioner model
- ✓ Implement Co-Management of the Etobicoke CCAC and the York CCAC through the harmonization of client services

The building of the new Case Management Model also incorporated Ministry of Health and Long-Term Care directives, including implementation of:

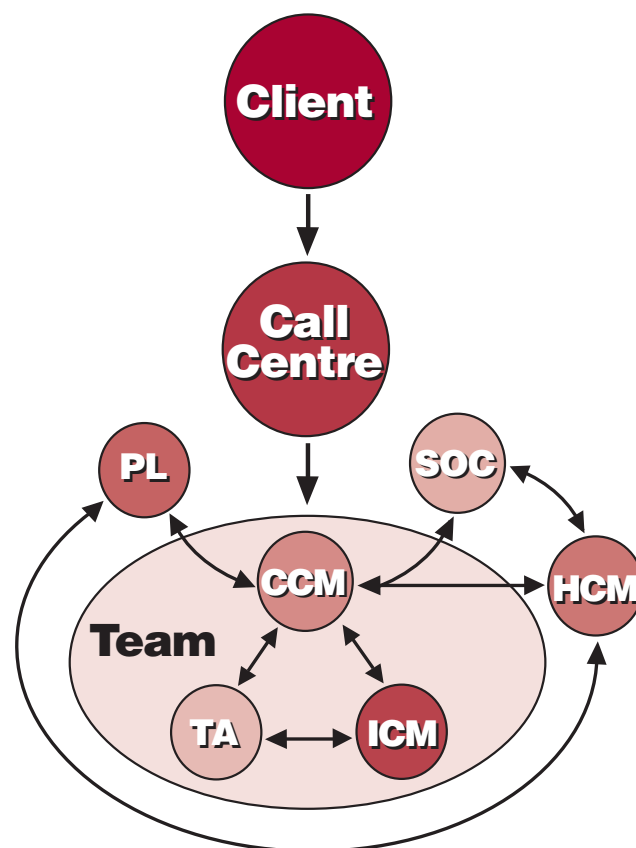
- ✓ CCAC Reform Initiatives
- ✓ MIS Guidelines
- ✓ Common Assessment Tool/RAI-HC

While this project will be on-going throughout 2003/2004, significant progress was made in 2002/2003. Accomplishments and outcomes include:

- ✓ Process mapped client services' functions at both the Etobicoke CCAC and York CCAC.

Case Management Model

The Etobicoke CCAC and York CCAC Case Management Model provides clients with enhanced Case Management Services right in their own home.



Legend

●	Call Centre
●	CCM Community Case Manager
●	ICM In-Office Case Manager
●	TA Team Assistant
●	PL Placement
●	SOC Service Ordering Centre
●	HCM Hospital Case Manager



Case Management – Bringing a New Perspective to our Core Business (cont.)

- ✓ Developed a new Case Management Model based on best practices and incorporating Ministry of Health and Long-Term Care directives.
- ✓ Reorganized and restructured the Client Services Division with an extended Call Centre, designated Community and In-Office Case Managers, and more effective utilization of Team Assistants.
- ✓ Establishment of a team of front-line staff to develop, test and implement new policies, procedures and forms to support the RAI-HC and the new Case Management Model. Identified, streamlined and simplified work processes.
- ✓ Purchased technology, including cell phones and laptop computers to support Community Case Managers.
- ✓ Tested staff with respect to computer literacy and provided training on new policies and procedures, and technologies including software and laptops.
- ✓ Developed a Client Information System (CIS) to facilitate real time access to client information for appropriate in-office and out-of-office staff.
- ✓ Trained staff on new MIS Guidelines and implemented Ministry directives within the prescribed timelines.

Achievements - Placement Services

Associated with the new Case Management Model, the Etobicoke Community Care Access Centre completed a number of outcomes with respect to Placement Services, including:

- ✓ Successfully adopted new Ministry Regulations for the placement of clients to nursing homes and ensured the successful opening of the 90-bed Labdara Nursing Home and the 30-bed expansion of the Dom Lipa Nursing Home.
 - ✓ Hosted Public Information Sessions, in conjunction with Toronto CCACs, to inform the public of changes to Placement Regulations.
 - ✓ Met the Ministry of Health and Long-Term Care target of reviewing the new placement regulations with all clients on the waitlist or their substitute decision-maker.
 - ✓ Hosted RAI-HC recipient training for nursing home officials.
 - ✓ Provided extraordinary service to the Labdara Nursing Home and its clients when the facility was evacuated due to water damage.
-
- ✓ Hosted RAI-HC recipient training for Service Providers.
 - ✓ Provided Community Workplace Safety and Ergonomic Training.



Financial and Statistical Summary

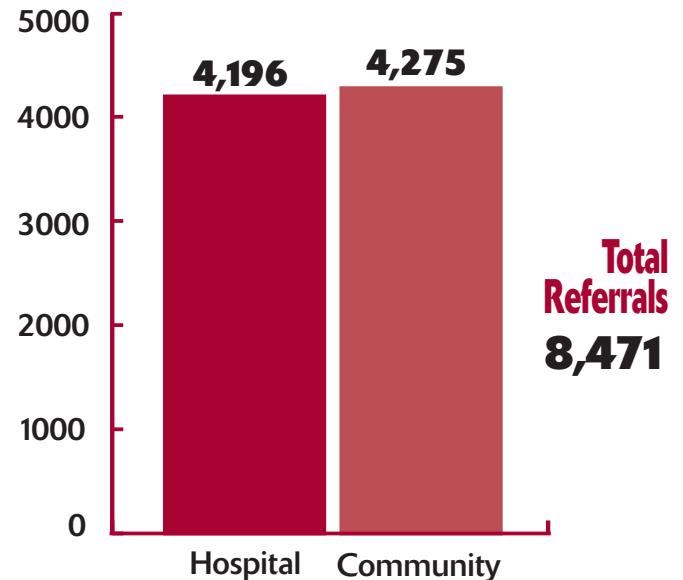
(for the year ended March 31, 2003)

Our Service Statistics

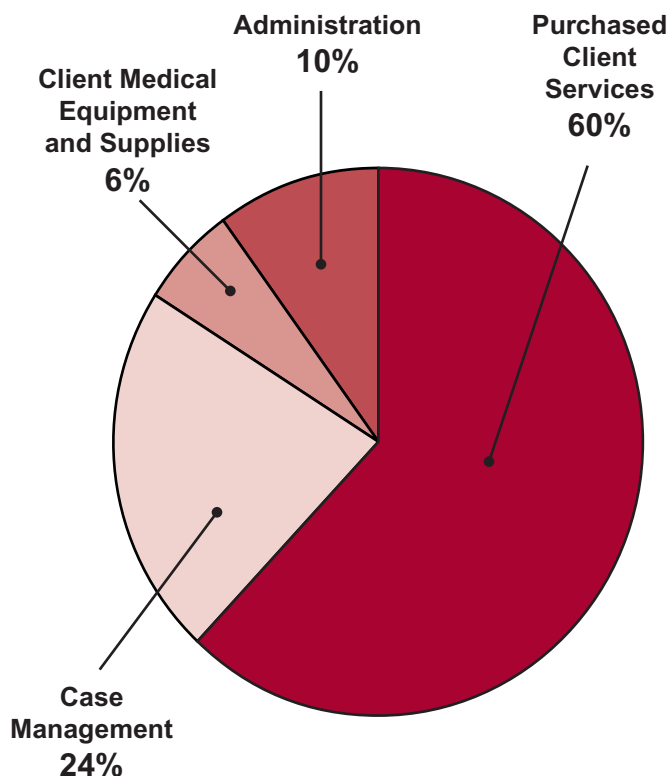
Number of Clients Served	13,404 People
Personal Support	359,685 Hours
Nursing	161,174 Visits
Occupational Therapy	11,840 Visits
Physiotherapy	8,720 Visits
Speech-Language Pathology	6,110 Visits
Nutritional Counselling	1,338 Visits
Social Work	815 Visits
Acquired Brain Injury Program	752 Visits

Our Case managers helped **982** people move to Long-Term Care Facilities.

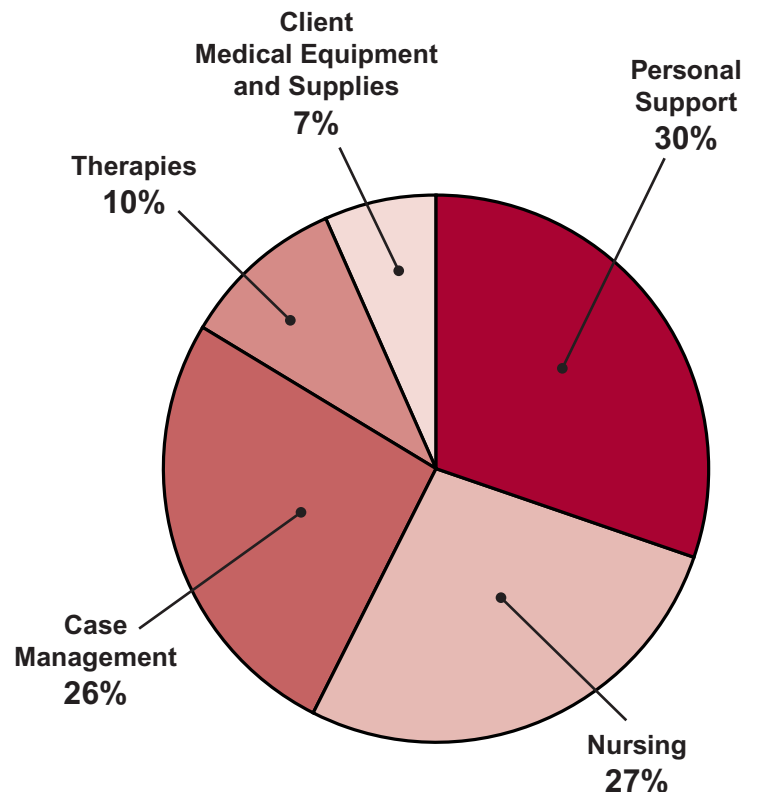
Number of Referrals



Breakdown of Total Expenditures



Breakdown of Client Service Expenditures



The 2002/2003 audit was completed by Ernst & Young.
A copy of the audited Statements is appended to this Report and is also available by calling the Etobicoke and York Community Care Access Centre at 416 626 5434, extension 2015.



Providing Human Resources and Organizational Development Services Through the Shared Services Model

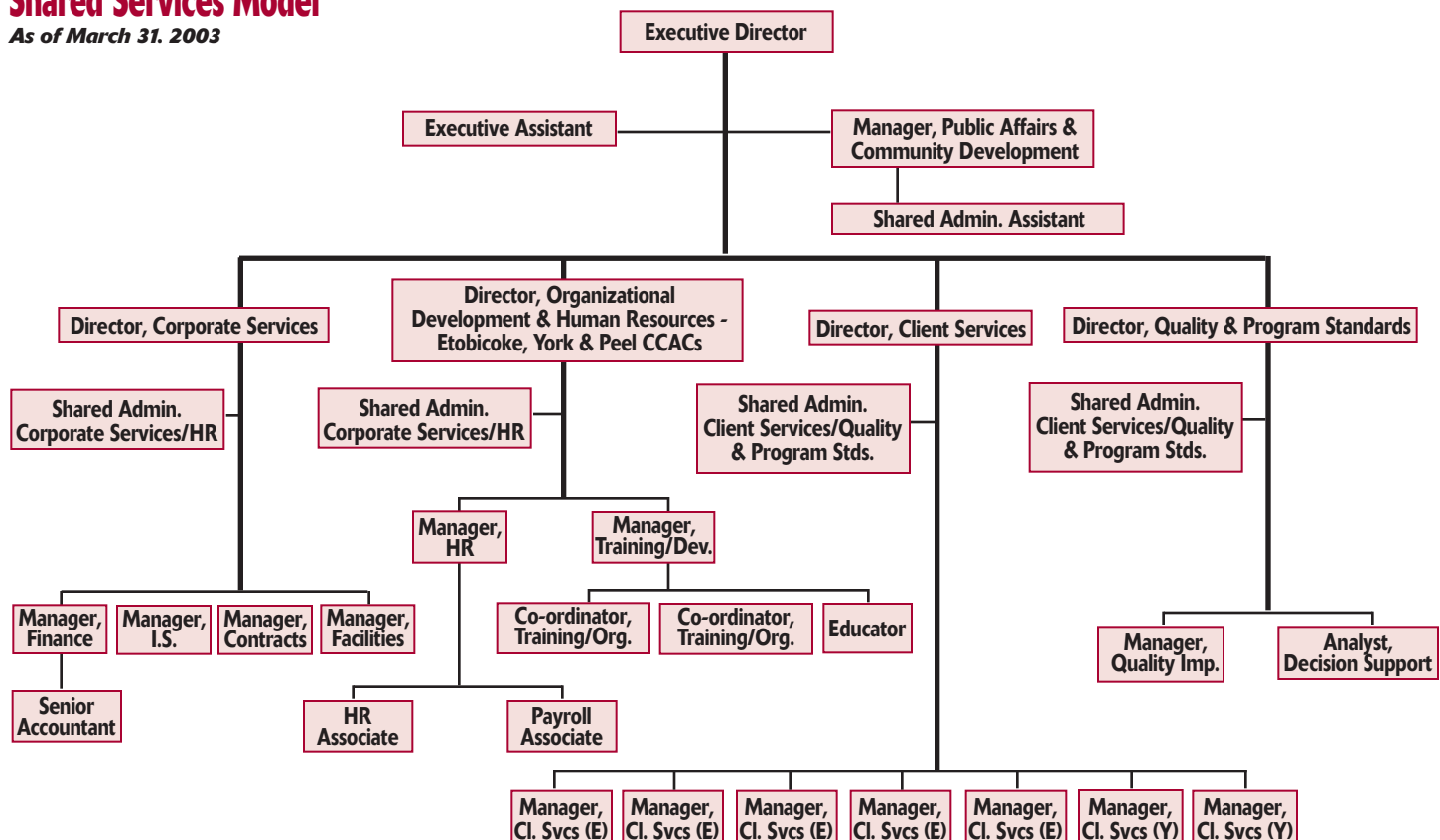
Through the Shared Services Model, corporate functions are shared among more than one organization; normally these are services that support core businesses. Development of the Shared Services Model was critical to two strategic initiatives: the establishment of a unified management structure for the Etobicoke CCAC and York CCAC; and the creation of a combined Human Resources and Organizational Development Division to serve the Etobicoke, York and Peel CCACs.

The merging of the management and administrative teams at Etobicoke CCAC and York CCAC was instrumental in allowing the two organizations to meet the challenges of Co-Management and to harmonize the policies, procedures and work processes of the two organizations. Cost savings were then applied to client services. The creation of one management team was also important in preparing the Etobicoke CCAC and the York CCAC for the formal joining of the two organizations.

Sharing of services in the areas of human resources and organizational development has proven particularly beneficial in the areas of staff recruitment and training. Joint advertising for front-line staff, sharing orientation resources, and the provision of integrated management and front-line staff training has resulted in improved effectiveness and cost-efficiency. A formal, one-year evaluation of this initiative in 2003/2004 will include a review of the financial implications, cost avoidance, impact on stakeholders, an assessment of staff development outcomes, and performance incentives.

Shared Services Model

As of March 31, 2003





Performance Information

The EtoBicoke CCAC Service Plan for 2002/2003 was prepared in advance of the announcement of Co-Management. When Co-Management was initiated, however, it became evident that the savings could be significant. Therefore, in May 2002, after only four months as Co-Managed CCACs, the EtoBicoke CCAC and the York CCAC Boards of Directors decided to merge the management teams of the two CCACs and initiated the process of harmonizing both business and client service practices.

The EtoBicoke CCAC Service Plan (2002/2003) realistically assessed the key issues to be addressed. Co-Management provided a means to meet the challenges in new and creative ways. Key variances from the original Service Plan 2002/2003 include:

- ✓ Increased funding for client services through management and administrative savings resulted from joining the two management teams and by reducing 11 non-union staff positions.
- ✓ Development and implementation of the new Case Management Model addresses Ministry of Health and Long-Term Care initiatives. Also, it supports a vision for Case Management that results in Case Managers working more in client's homes and in the community.
- ✓ Implementation of the new organizational structure, with increased focus on Training and Development, ensures the successful implementation of Ministry of Health and Long-Term Care directives.

Risk Management and Performance Indicators that had been in place at the EtoBicoke CCAC and at the York CCAC continue to be used and will be harmonized as part of the formal joining of the two CCACs.

Accreditation

The Canadian Council on Health Services Accreditation (CCHSA) granted full Accreditation to the EtoBicoke Community Care Access Centre in 2002/2003. This was a three-year award with no follow-up visit or report.

The Accreditors commended the EtoBicoke CCAC for recognizing the changing health and home care environment and for taking proactive steps to address key issues. We were also recognized for our commitment to quality, quality improvement, and effective risk/occurrence monitoring.

As an outcome of the Accreditation process, we are now focusing on developing and integrating a realistic number of key performance indicators that will enhance our ability to continue to provide quality client services.

Community Advisory Council (CAC)

As required by the Ministry of Health and Long-Term Care, the EtoBicoke CCAC and York CCAC established a Community Advisory Council (CAC). The focus of the CAC in fiscal year 2002/2003 was to strengthen the continuum of care for the residents of our community.

Representatives from the EtoBicoke CCAC and York CCAC:

Co-Chairs: Mary Anne Kuntz (York CCAC) and Jane White (EtoBicoke CCAC). *Ex-Officio members:* Bonnie Fernie, Judith Hayward, and Cathy Szabo.

Community Advisory Council Members:

Catharine Barker, Ruth Beck, Ruth Yates—*William Osler Health Centre*

Gloria Calzetta—*Villa Colombo*

Tamara Christie—*West Park Long-Term Care Centre*

Marg Czaus—*Humber River Regional Hospital*

Dolores Ellerker—*EtoBicoke Services for Seniors*

Sujata Ganguli—*St. Clair West Services for Seniors*

Sybille Hahn—*CANES*

Betty Likwornik—*St. Joseph's Health Centre*

Sandra Pitters—*Toronto Homes for the Aged*



Our Service Providers

On behalf of the EtoBicoke Community Care Access Centre, we would like to acknowledge the dedication, hard work, and caring of front-line healthcare workers, particularly throughout the challenges of SARS.

Our special thanks goes to our contracted Services Providers for 2002/2003.

Dietetic

- Victorian Order of Nurses (VON Toronto-York Region)

Medical Laboratories

- MDS Laboratory (A Division of MDS Inc.)

Medical Supplies, Equipment & Home Infusion

- Calea Ltd.
- KCI Medical Canada Inc.
- Medigas (A Division of Praxair Canada Inc.)
- Therapy Supplies and Rental Limited

Nursing

- Comcare Health Services
- ParaMed Home Health Care
- Saint Elizabeth Health Care
- Spectrum Health Care Ltd.
- VHA Home Healthcare
- Victorian Order of Nurses (VON Toronto-York Region)

Personal Support & Homemaking

- Comcare Health Services
- S.R.T. Med-Staff International
- VHA Home Healthcare
- Victorian Order of Nurses (VON Toronto-York Region)

Therapy

- Care Plus
- COTA (Comprehensive Rehabilitation and Mental Health Services)
- Heaman Communication Services Inc.
- Home Care Rehabilitation Associates
- Rehab Express Inc.

Budget and Service Analysis

The major variance for fiscal year 2002/2003 in terms of both service provision and finances was as a result of deficit reduction strategies employed by many CCACs across the Province in the second half of 2001/2002. Those strategies left service volumes at levels well below the 2002/2003 target level. CCACs did undertake a number of strategies to inform potential clients and referral agents that service restrictions had been lifted and wait lists eliminated. It was not until the second half of 2002/2003 that referral and utilization rates made a significant recovery. Some economies were also achieved through the joining of the EtoBicoke CCAC and York CCAC management and administrative teams. To ensure that nursing needs were met, the EtoBicoke CCAC added a third Nursing Service Provider during the fiscal year.

The budget surplus which resulted from these reduced service levels was mitigated by the Ministry of Health and Long-Term Care's approval of a number of one-time projects and initiatives to be undertaken with other CCACs, Service Providers, and the Ministry.

Moving Ahead...

Corporate Initiatives for Fiscal Year 2003/2004

- ✓ Enhancing Case Management
- ✓ Building One Seamless Organization (Introducing the EtoBicoke and York CCAC)
- ✓ Implementing Management Information Systems (MIS)
- ✓ Strengthening the Quality Framework
- ✓ Adopting a New Hospital Case Management Model
- ✓ Demonstrating Accountability Through A Performance Management System
- ✓ Focusing on Communications to Deliver on Our Commitments