Central West
CCAC CASC
Community Care Access Centre
Centre d'accès aux soins communautaires du Centre-Ouest

2010-2011
Report to the Community





Outstanding care – every person, every day.

Ontario

Message from the Board Chair and CEO

The Central West Community Care Access Centre (CCAC) is pleased to provide our *2010-11 Annual Report to the Community* which reflects on the activities of this past year.

In this *Report*, you will see that the Central West CCAC is making a difference throughout our communities. This is demonstrated through our dedicated staff in action and stories from clients whose lives have been changed by programs and services offered through the CCAC. Last fiscal year, we worked closely with the Central West Local Health Integration Network (LHIN), hospitals and other community partners to help clients return home from the hospital sooner and support them in living independently in their own homes longer. In addition, we implemented a number of initiatives aimed at enhancing the provision of safe, efficient, high quality care to the clients and families we serve. Some of these initiatives include:

- A *Home First* philosophy promoting safe and timely care, services and supports to meet the health care needs of clients and families in the most appropriate setting;
- An *Advanced Practice Nurse Palliative Care Program* to support people with life-threatening conditions as they remain in their own homes;
- Our *Rural Geriatric Program*, which supports rural seniors aged 75+ in maintaining their continued independence in the community;
- An *integrated client care approach* using best practices to promote higher-quality care and faster healing for clients with lower leg wounds;
- *Seniors Enhanced Care case management*, providing intensive case management support and enhanced care to frail elderly clients, thereby preventing the need for long-term care;
- *Best-practice care plans*, which allow clients undergoing hip and knee replacement surgery to safely recover and regain mobility skills at home;
- A *third Central West CCAC Nursing Care Centre*, this one located in Etobicoke, offering clients the option of receiving timely nursing care at a conveniently located centre; and
- A *collaborative initiative with Bethell House Hospice*, which increases access to hospice care and other end-of-life services for palliative care clients.

It is a privilege to serve our community with *outstanding care – every person, every day*, and we hope that you continue to support us as we evolve into a centre of excellence and quality for our community and region.

Sincerely,

David Lehtovaara
Board Chair
Central West CCAC

Cathy Hecimovich
Chief Executive Officer
Central West CCAC

Inside

Our Vision

Outstanding care – every person, every day.

Our Mission

To deliver a seamless experience through the health system for people in our diverse communities, providing equitable access, individualized care coordination and quality health care.

Our Values

Our clients come first. We demonstrate this commitment through active listening, showing compassion, encouraging independence, acting as advocates, and facilitating access to quality care.

Respect is critical to all good relationships. It underscores all our interactions with clients, staff and community partners.

Learning environments are empowering. We explore and adopt new ideas to improve our practice.

Diversity is an asset. It creates a richness of experience and an appreciation of other possibilities.

We are accountable. We strive for consistency, fairness, and optimal outcomes through the wise use of resources and the measurement of results.

Board of Directors

The Central West CCAC Board of Directors develops our strategic directions and provides monitoring and oversight of program quality, effectiveness and financial viability.

David Lehtovaara
Chair

Carmine Domanico
Vice Chair

David Robertson
Treasurer

Gord Gallaugher
Board Member

Bhupinder Sharma
Board Member

Anna Paluzzi
Board Member

Samina Talat
Board Member

Wanda Yorke
Board Member

Paul Nelson
Board Member (to October 2010)

What we do

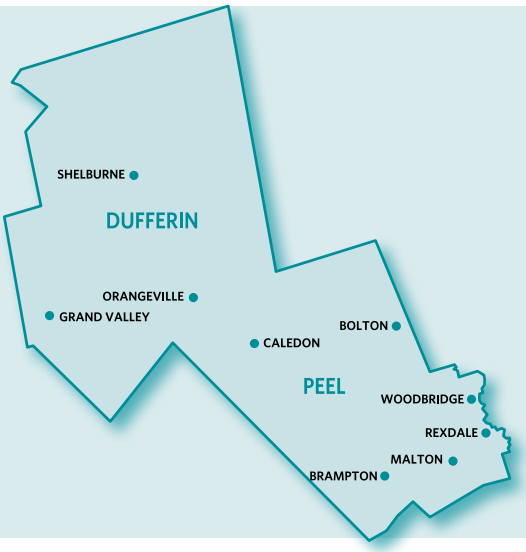
The Central West Community Care Access Centre (CCAC) is one of 14 CCACs in Ontario that connects people with the quality health care they need, when and where they need it. We are committed to delivering the highest quality in-home and community-based care possible.

Our caring and knowledgeable staff:

- Connect thousands of people each year with the care and support they need at home, at school or in the community following injury, illness or the complications of age or disability
- Arrange for and coordinate the provision of nursing, rehabilitation and supportive care to people of all ages, from children to adults to seniors
- Help our clients live as independently as possible
- Facilitate access to long-term care homes so that those no longer able to live on their own can be cared for in a comfortable, home-like environment
- Help clients navigate the health care system, acting as a vital link to the health supports, services and resources they need

The Central West Region

The Central West CCAC territory covers approximately 2,590 square kilometers and includes all of Dufferin County, the northern portion of Peel Region, parts of north-western Toronto and south-west York Region. We serve a population of 739,000 or 6.1% of Ontario's population. More than half of the Central West population resides in the City of Brampton, with other densely populated areas in Rexdale (Toronto), Malton (Mississauga), Orangeville and Woodbridge.



Central West CCAC by the numbers

- 2010-2011 Budget: $81,889,493
- Clients served: 30,127
- Staff members: 237 (full-time equivalent)
- CCAC offices in Brampton and Orangeville
- Staff located onsite at:
  - Etobicoke General Hospital
  - Brampton Civic Hospital
  - Headwaters Health Care Centre
- Satellite offices in Bolton and Shelburne

How the *Home First* philosophy helped 77-year-old Speros wait safely at home until a bed became available in long-term care.

77-year-old Speros lived in a supportive housing unit and was quite independent until his hospitalization following a heart attack and life-threatening blood infection. After his illness, Speros required 24-hour care.

Speros understood that living at home was no longer a safe option for him. However, his wish was to return home one last time and have an opportunity to sort out his life before moving to a long-term care home. "I did not want to stay at the hospital any longer than necessary. I just wanted to return home to wait for a long-term care bed. CCAC made it possible for me," said Speros.

As a client with complex medical needs, Speros' hospital care team was hesitant about discharging him home. He was referred to the CCAC and a case manager spoke to him about the *Home First* philosophy that supports people in returning to their homes from hospital whenever possible. It provides the necessary services to help seniors maintain their independence in the community.

After careful planning, it was determined that Speros could be discharged home with enhanced services. CCAC arranged for nursing, personal support, occupational therapy and physiotherapy as well as supplies and equipment to support his care at home.

"I play an important role in helping clients meet their goals and connect them to other services in the community and health care system," said Stephanie Speer, Case Manager for the Seniors Enhanced Care caseload. "In this particular case, I can say with confidence that enhanced case management has honoured Speros' wishes while preventing hospital readmission."

A week after returning home from the hospital, Speros moved to a long-term care home. Again, Stephanie ensured his seamless transition – she made transportation arrangements and took the time to brief the social worker at the nursing home regarding his social and financial issues. Since Speros' admission to the long-term care home, Stephanie has made two subsequent visits to provide supportive counselling and ensure he is adjusting well to his new home.

"I did not want to stay at the hospital any longer than necessary. I just wanted to return home to wait for a long-term care bed. CCAC made it possible for me."

How Hamza, a medically fragile child, was able to attend school while his parents were provided with much-needed respite.

Four-year-old Hamza was born with a severe physical and developmental disability and is visually impaired. Shortly after his family emigrated from the United Arab Emirates in the summer of 2010, Hamza was diagnosed with Ohtahara Syndrome, a neurological disorder that causes epileptic seizures.

Hamza's father works as a security officer in the evening while attending school during the day to upgrade his engineering skills. His mother is his primary caregiver and provides 24-hour care. She and her husband are expecting their second child in the spring of 2011. The family contacted the Central West CCAC in early 2011. Ruth Kun, a CCAC case manager, conducted a home visit and was instrumental in arranging for personal support and physiotherapy services to help Hamza with his personal care and gross motor needs. In addition, Ruth played an integral role in linking the family to appropriate community resources.

"My goal is to work with Hamza and his family to build on his strengths, help maximize his independence, and support his family by providing care at home and at school," said Ruth. Through her resourcefulness, Ruth was able to get a wheelchair for Hamza. In addition, she addressed Hamza's need for additional equipment by helping the family submit an application to the *President's Choice® Children's Charity* to fund other equipment.

With Hamza's complex medical needs, it was important to create a plan for him to begin attending school as soon as possible. Ruth contacted the Peel District School Board to discuss Hamza's status and the need for a special classroom placement. Arrangements were made to have an occupational therapist and a physiotherapist available to provide care for Hamza at school. These services are funded through the Central West CCAC School Health Support Services program. In March 2011, Hamza began attending afternoon class for developmentally delayed students. This arrangement has provided much-needed respite time for his parents.

Hamza's parents are extremely happy with the outstanding care and quality support they receive from the care team. "We left our families and jobs to come to Canada to seek better medical care for our child. We'd like to express our sincere appreciation for the commitment and care provided by the Central West CCAC case manager and personal support workers who continue to work with our family," said his mother, Hafsa.

"We left our families and jobs to come to Canada to seek better medical care for our child."

How the Central West CCAC helped the Woodhouse family grant Douglas' wish of being cared for and dying in his own home, surrounded by his loved ones.

85-year-old Douglas, or "Woody" as he is fondly remembered by his family and friends, was active and in good health until he began experiencing back pain and swelling in his legs in late 2010. After numerous tests, doctors found a tumour behind his kidney. Further tests showed that the cancer had spread.

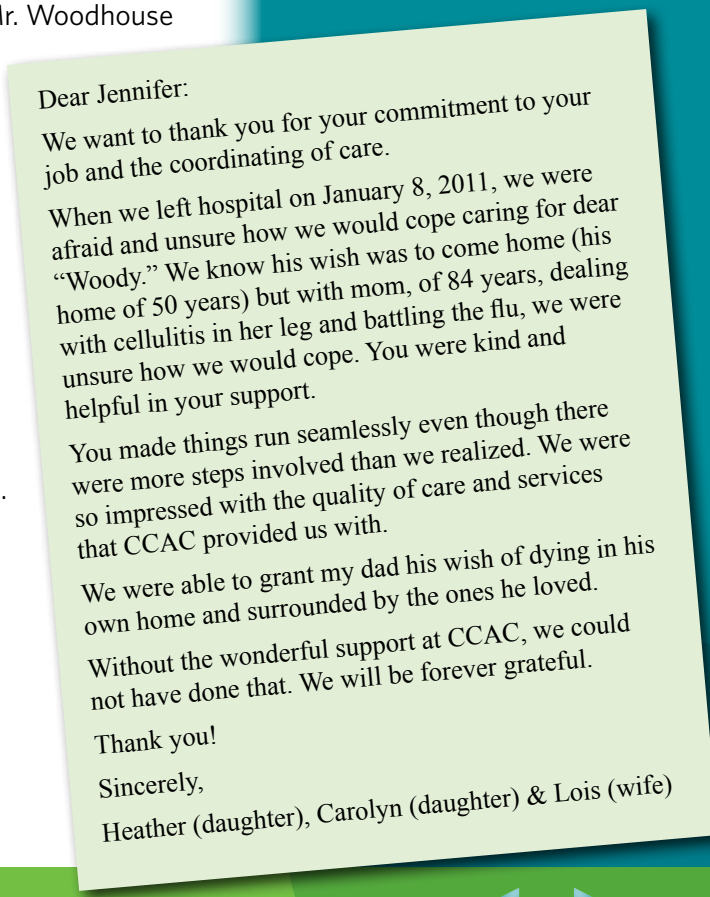
In December 2010, doctors at the hospital referred Woody to palliative care services and started to prescribe medication to control his symptoms. He was in an acute care ward and the hospital spoke to him about going home. Woody's desire was to go home but he and his family wanted to ensure that equipment, nursing care and physician follow-up were in place to care for Woody at home. His hospital care team referred him to the CCAC, which began making arrangements for his safe return home.

Jennifer Cosgrove, CCAC Palliative Care Case Manager, arranged for supplies and equipment to be delivered to Woody's home prior to his discharge from the hospital to ensure continuity of care. She also arranged for nursing, personal support, occupational therapy, dietetics and social work to support his care at home. In addition, Woody was referred to Dr. David Caplan, a physician who provides palliative care in the area. Dr. Caplan made house calls and was always one step ahead in preventing any crisis. He was instrumental in ensuring Woody's final days at home were as comfortable as possible.

"At the end of life, everyone is entitled to die in comfort, with access to compassionate, quality and respectful care. With Mr. Woodhouse, I was able to help his family navigate the health care system and connect them with services to meet their special needs," said Jennifer. "I worked closely with his physician, nurses and other service providers to ensure Mr. Woodhouse received the best possible care. It is especially gratifying to know that I was able to help Mr. Woodhouse fulfill his wish of dying at home."

In early February 2011, Woody passed away peacefully at home surround by his family and loved ones.

"At the end of life, everyone is entitled to die in comfort, with access to compassionate, quality and respectful care."



Dear Jennifer:

We want to thank you for your commitment to your job and the coordinating of care.

When we left hospital on January 8, 2011, we were afraid and unsure how we would cope caring for dear "Woody." We know his wish was to come home (his home of 50 years) but with mom, of 84 years, dealing with cellulitis in her leg and battling the flu, we were unsure how we would cope. You were kind and helpful in your support.

You made things run seamlessly even though there were more steps involved than we realized. We were so impressed with the quality of care and services that CCAC provided us with.

We were able to grant my dad his wish of dying in his own home and surrounded by the ones he loved.

Without the wonderful support at CCAC, we could not have done that. We will be forever grateful.

Thank you!

Sincerely,

Heather (daughter), Carolyn (daughter) & Lois (wife)

82-year-old Olaf is reunited with his wife at a long-term care facility in Brampton.

Generally, people prefer to live in the comfort of their own homes, surrounded by familiar people and belongings. However, when this is no longer possible, CCACs facilitate access to long-term care homes. Long-term care homes are for people who need access to 24-hour nursing care and supervision in a safe setting. They provide necessary services to people requiring care that can no longer be provided in the community.

82-year-old Olaf was admitted to a local hospital in December 2010 with numerous complex medical conditions, including acute kidney failure. He underwent several surgeries which resulted in his prolonged stay at the hospital. Following his illness, Olaf's mobility became a serious problem and he was no longer able to function independently.

When his stay at the hospital was complete, the CCAC became involved and spoke to him about long-term care placement options. Olaf's wife is currently a resident at a long-term care facility in Brampton and the hospital case manager informed him about the spousal reunification program. The CCAC hospital case manager assisted him with the application process and Olaf was happy to be reunited with his wife at the same long-term care home shortly thereafter.

CCACs assess clients for long-term care eligibility, assist with the application process and support clients and families through the transition when a long-term care bed becomes available.

How CCAC helps Behrooz navigate the health care system and connects her to other health services available in the community.

Behrooz is the primary caregiver for her 92-year-old mother, Dina. She plays a vital role in all aspects of her mother's care, such as help with feeding and personal hygiene. Dina came on to CCAC services in November 2009 following a fall and associated visit to the Emergency Department.

Since becoming a CCAC client, Dina has received a variety of services (personal support and physiotherapy) depending on her changing needs. Last year, CCAC increased personal support service to allow Behrooz to go on vacation. In another instance, Dina had a fall and Behrooz found it very difficult to cope with her mother's care at home. Once again, Dina's case manager, Shobha Bansal, stepped in to arrange for Dina to participate in the convalescent care program. With the care she received at the long-term care home, Dina was able to regain her health and transition back to the community successfully.

"I would like to express our sincere gratitude and appreciation to the CCAC for their outstanding support and guidance," said Behrooz, Dina's daughter. "I am amazed at Shobha's responsiveness to the needs of our family and her ability to respond accordingly. Being the primary caregiver for my mother, I find that Shobha's dedication, professionalism, knowledge and compassion certainly helps alleviate some of the stresses I encounter," concluded Behrooz.

In August 2011, Behrooz hopes to take another vacation. This time, Shobha arranged for respite care in a long-term care home. Dina will stay at a long-term care facility that is home to another family member. As such, there will be familiarity for Dina while her daughter is away.

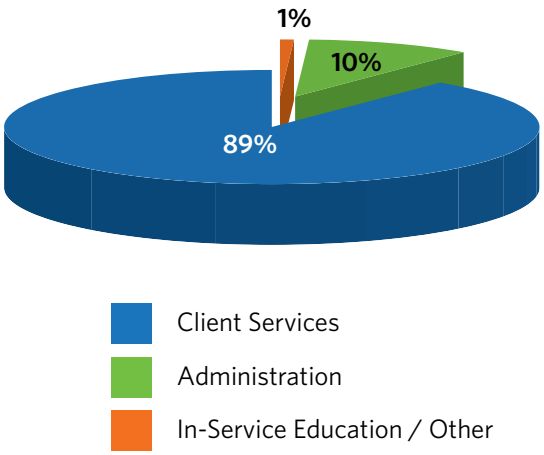
"Case management is the cornerstone of CCAC work. It is the basis of the relationship between our clients, the CCAC, and the providers who deliver care. From client assessments and arranging services to engaging other community health services and ensuring progress towards my clients' goals, I see my role as an all-encompassing one," said Shobha Bansal, Central West CCAC Community Case Manager.

"I am amazed at Shobha's responsiveness to the needs of our family and her ability to respond accordingly."

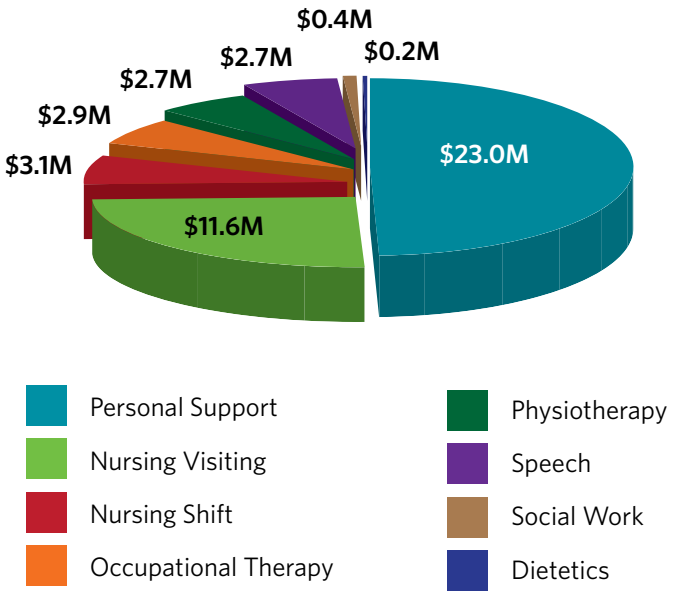
Did you know?

Central West CCAC served 30,127 clients in 2010 - 2011 compared to 28,184 clients in 2009 - 2010. This represents an approximate increase of 7%.

2010-2011 Expenditures by Percentage

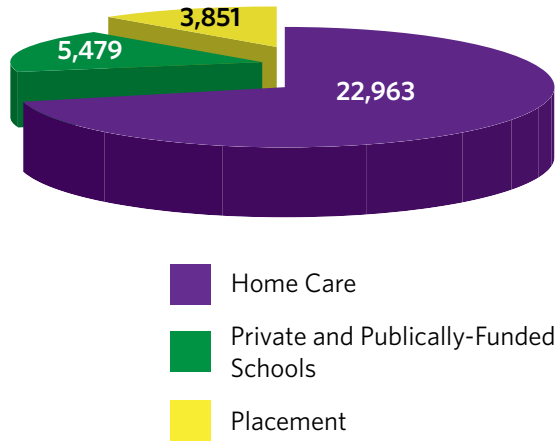


2010-2011 Expenditures by Service Type

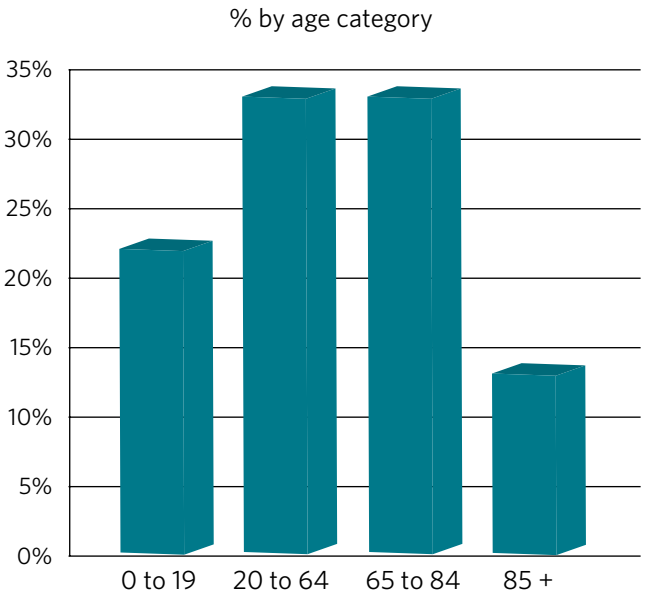


** Audited financial statements are available upon request.*

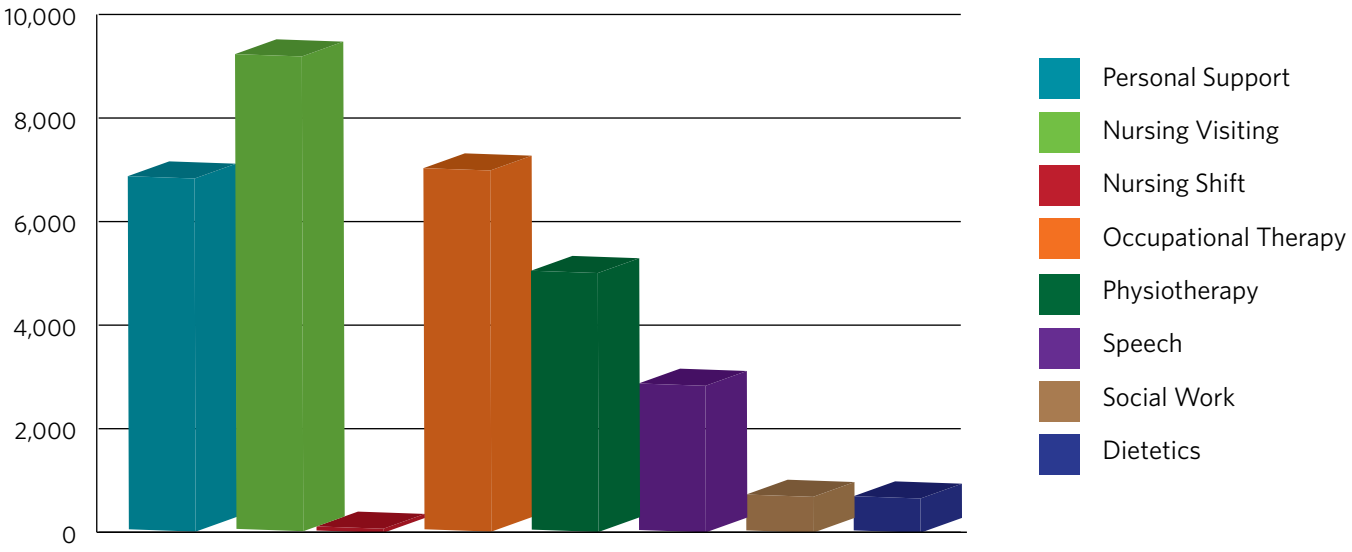
Unique Individuals Served in 2010-2011



Unique Individuals Served by Age Group in 2010-2011



Unique Individuals Served by Service Type in 2010-2011



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310-CCAC
www.cw.ccac-ont.ca

Join us:

For job opportunities, visit www.ccacjobs.ca or email careers@cw.ccac-ont.ca.

Refer to us:

To make a referral to the CCAC or to inquire about services in the community, please call us at 1-888-733-1177.

The Central West CCAC is funded by the Ministry of Health and Long-Term Care through the Central West Local Health Integration Network (LHIN). Services provided by CCACs are covered by the Ontario Health Insurance Plan for those holding a valid health card. A physician's referral is not required; anyone can refer to the CCAC.

Ontario
Central West Local Health Integration Network

Ontario