



South East

CCAC CASC

Community
Care Access
Centre

Centre d'accès
aux soins
communautaires

2011-2012

ANNUAL REPORT

Connecting You With Care



Ontario

South East Local Health
Integration Network
Réseau local d'intégration
des services de santé
du Sud-Est





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

We value our clients, ourselves and each other through open communication, respect, and customer focus, while promoting continuous learning and accountability in a supportive, healthy environment.

Our Story

Community Care Access Centres (CCACs) work in communities across Ontario to connect people with quality in-home and community-based health care. We make sure our clients receive the care they need when they need it. We provide information, direct access to qualified care providers and many comprehensive services to help people come home from the hospital sooner or live independently at home longer.

Finding and accessing care can sometimes be confusing and complicated. CCACs are here to help people find their way through Ontario's health care system, understand their options and get the highest quality care possible. We help people across their life spans from school children who have special health needs to seniors who need health services at home or access to a long-term care home.

Our caring and knowledgeable staff work hand-in-hand with clients and their families. We seek to understand each person's situation so that working together we can develop an individualized plan. The CCACs expertise, in-depth assessment process, and strong partnerships ensure clients receive specific care tailored to them and feel supported through their entire care journey.

*Visit our website – www.se.ccac-ont.ca
– to hear our clients tell their story.*



Message from the Board Chair and Chief Executive Officer

The *South East Community Care Access Centre (CCAC)* is one of 14 CCACs serving the people of Ontario. CCACs meet the complex care and support needs of an aging population, providing a safe and cost-effective alternative to higher-cost settings and reducing pressures on acute care beds and emergency rooms.

With an annual budget provided by the South East Local Health Integration Network, the *South East CCAC* helps approximately 12,000 individuals live safely at home and in their communities on any given day. We work with service providers as well as clients, their caregivers and families who all have a part in meeting the goal of helping people live safely in their own home for as long as possible.

On January 1, 2012 we marked our fifth anniversary of connecting people with the care they need to remain safe in their communities. We are very proud of our accomplishments since then and continue to evolve and improve.

The year was characterised by strengthening our decision making processes and solidifying partnerships to meet the increasing focus on providing care in the community. A number of reports including the much anticipated *Drummond Report* and the *Ontario Action Plan* point to the growing importance of enhancing the system navigation role of Ontario's Community Care Access Centres.

This year, the South East CCAC hired a new CEO and reorganized to streamline its corporate structure. New corporate portfolios were created that better reflect our four main priorities. We focussed on four main areas to

address Ontario's health care priorities: working to keep more people safe at home with quality care; increasing access to services; helping people navigate the health care system; and sustaining quality care.

To ensure we continue to live our vision to provide *outstanding care every person, every day*, we developed a strategy plan to share our highest priority strategic goals with our clients, partners and stakeholders and to outline how we intend to move forward together. Our strategic plan lays out our strategic priorities, which cascade from our Vision and Mission.

Moving forward, our quality improvement efforts will continue to focus on strengthening and expanding our case management expertise, setting new targets and achieving better health outcomes. These include keeping residents of Southeastern Ontario safer at home, improving their access to needed services, exploring different options with them, helping them navigate through the health care system and obtaining higher quality care for today and tomorrow.

As the population we serve continues to have higher needs, we are shifting resources to provide services where the need is greatest and working with health care partners to ensure clients receive the right care from the most appropriate service provider when and where they need it.

We are proud to have achieved high client satisfaction rates while serving more than 12,000 clients each day and ending the year with a balanced budget.

As you read this report we are sure you will agree that CCACs are well positioned for the future and the case management model will be a key capability to meet the increasing expectations from clients, governments, the public and ourselves in becoming the anchor for patients in the health care system.

Valerie Cook-Jackson,
Chair

Jacqueline Redmond
CEO



Board of Directors

Valerie Jackson
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Highlights and success stories:

Ontario's 14 CCACs released a paper *Bringing Value Home*. The paper and supporting documents make recommendations to ensure a high functioning sustainable health care system. *Bringing Value Home* identifies actions that must be taken to ensure Ontario's health care system can meet access and quality of care needs of CCAC clients in today's challenging economic environment.

To begin addressing some of the actions identified, we undertook a number of initiatives to enhance consistency both across the south east as well as across Ontario's 14 CCACs.

The South East LHIN and the South East CCAC are working together, as part of a province-wide effort, to expand the CCAC **system navigator** role. This will allow the CCAC to provide consistent access points for people as they enter into and move through adult day care, complex continuing care, physical rehabilitation, and supportive/assisted living programs.

The Ontario government remained committed to reducing Alternative Level of Care (ALC) pressures by building on previous investments through its Wait Time Strategy and Aging at Home Strategy by **increasing funding to the community services sector** by approximately three per cent per year over the next three years. These investments will strengthen access to care in the home and the community and help manage acute care costs by freeing up hospital beds and unclogging emergency rooms.

In August we received notice of a 1.5% increase to our base funding from the LHIN. At that time, the government announced an additional 1.5% to be used for LHIN identified priorities. Through the decision making process used to determine the allocation of the **targeted priorities funding**, the South East CCAC received additional funding for seven priorities. These initiatives represent a total of approximately \$2.4 million in additional funding.

The Ontario Ministry of Health and Long-Term Care, through the South East LHIN, announced funding for **several new nursing positions** at the South East CCAC. This investment is included in the 9,000 Nurses Commitment, part of the province's health human resources strategy, Health Force Ontario. The new nursing services will expand our CCAC's capacity to support key priorities of the government, including:

- Emergency Department/ Alternate Level of Care Strategy
- Palliative Care
- Mental Health services in schools for children and youth.

These programs have been designed based on evidence as well as successful programs and roles that are already in place in many CCACs.

Along with all Ontario CCACs, the South East CCAC is working to achieve **Accreditation**. Working through the Accreditation process provides a great opportunity to look at our processes and how we invest resources to improve areas such as client safety and workplace wellness.

The latest **Client and Caregiver Experience** Evaluation (CCEE) results are in and for the 7th consecutive wave we remain above the provincial average in all categories. Our clients are telling us how much they value our CCAC, our service provider staff and their experience with us.

The **Client Care Model** is a framework that standardizes how we define, work with, and are accountable for five client populations. Each population will receive specific case management intensity, care planning and service that align with their care needs. The Client Care Model is the evolution of the art and science of Case Management. The model will help us to ensure we are delivering health care to Ontarians who need it the most in a sustainable manner.

In June, we celebrated the success of the **Home First approach** in helping frail elderly patients to return home sooner after a stay in hospital along with the South East Local Health Integration Network (LHIN) and our hospital and community support services partners. Over the last few years we have learned what works and what does not. Home First works because of the strength of the partnerships and it puts the services around the person and their individual needs. In July, Home First expanded to include Perth and Smiths Falls District Hospital, making the program available across the entire South East.

Knowledge of all the resources available in our many communities is a critical foundation for system navigation. A strong, consistent, community-based **Information & Referral** system is a critical element toward achieving our goal of outstanding care – every person, every day. Ontario's 14 CCACs have begun moving toward a standardized provincial application called thehealthline.ca.

In an effort to standardize the information clients receive on intake across the south east, a standardized new **client admissions package** was developed. The package contains information to help clients stay safe in their home and how to prepare in the event of an emergency.

We began offering **Weekend Community Case Management** on weekends and statutory holidays for active client issues on a permanent basis effective October 22, 2011. Weekend Case Management supports our commitment to achieving organizational targets for clients to be assessed and admitted for service as quickly as possible.

To improve the care for those living at home with life-limiting, life-threatening illness we worked with partners to develop **Symptom Response Kits**. A crisis such as severe pain, inability to take oral medications, delirium or even urinary retention can result in an unwanted visit



to the Emergency Department and/or hospitalization. The kits will help manage these crises so that clients can remain in their home.

We made considerable investments in our organizational capital to support the delivery of outstanding client care. In September we implemented a new **Client Services Orientation** to provide consistent information to new employees. The orientation has been very favourably received.

The South East CCAC has completed Phase I of an 18-month project to develop and implement a comprehensive **Ethics Framework**. The goal of this phase was to develop a vision and priorities for the Ethics Framework based on an assessment of our ethics needs.

We have aligned the organization's **policies and procedures** ensuring consistency, currency and ease of access, housing them in one accessible location, maintaining accountability, and ultimately positively affecting quality care for our clients.

The Clinical Services Roadmap (CSR) is designed to find better ways to improve access to care and to ensure hospitals and the CCAC can integrate their service and fill gaps to deliver a more seamless continuum of care. As part of the community engagement component of CSR, the South East CCAC provided computer stations in each of the main offices and hosted a series of public meetings for the community to provide their input.

We were the first CCAC in the province to pilot a process to test out the new **Short Stay Respite Booking** application in our client services management software. This new booking process provides CCAC's with the ability to manage the Short Stay bed inventory and client bookings within one piece of software.

Using **ambulatory care centres** is a huge part of our efforts to provide *outstanding care, every person, every day* in terms of positive client outcomes and sustaining value. Overall, 99% of our care centre clients say they are satisfied with the care they received. We continue to work towards referring more clients who are able to travel to these centres to receive their care.

As an identified agency under the **French Languages Services Act** we have been working with the LHIN on an implementation plan. We partnered with the North East CCAC on a pilot project where they answer and triage any calls we receive via our 310-CASC (2272) phone number which is designed for French callers seeking information and referral.

We are very pleased to have launched a newsletter for our partners and stakeholders in October. This online publication was developed as a means of communicating the myriad of things we are doing locally and provincially to deliver on the CCAC vision to provide outstanding care to every person, every day. We named this publication **Community Connections** because our success increasingly depends on creating and maintaining meaningful connections with the communities we serve.



Throughout 2011/12 we were pleased to work with **RWS Advisory** to build a healthy future for residents of the South East. The key project objectives include:

- Establishing clear priorities, targets and accountabilities for the entire organization;
- Improving mechanisms to monitor and control provider service expenditures;
- Increasing analytical capabilities to support decision making; and
- Improving information delivery to key internal and external audiences.

The work performed in each of the four work streams provided us with tools and processes to support our core business functions on an on-going basis. This was necessary, transformational change that will enable us to live up to our vision, mission and values and retain the trust and respect of our clients and partners.



Financial and statistical highlights

Administration	\$ 9.1M
Case Management Services	\$ 22.2M
Other Client Services & Education*	\$ 1.6M
Purchased Client Services	\$ 70.6M
Total	\$ 103.5M

* The other client services costs include Information & Referral, Palliative care and PSW training

Complete Audited financial statements are available on our website – www.se.ccac-ont.ca

If you would like additional information or a speaker for your community group, contact us at 310-CCAC (310-2222).

Service Utilization: Fiscal 2011/2012

Service	Utilization
Nursing – Shift	36,000 hours
Nursing – Clinic	32,000 visits
Nursing - Regular	246,000 visits
Personal Support Services	1,182,000 hours
Dietetic Therapy	2,400 visits
Occupational Therapy	29,000 visits
Physiotherapy	24,000 visits
Social Work	4,700 visits
Speech Language Pathology	10,000 visits





Head Office

1471 John Counter Blvd, Suite 300
Kingston, ON, K7M 8S8

Tel: 613 544 8200 Fax: 613 544 1494