HNHB CCAC

2011/2012

ANNUAL REPORT

TO THE COMMUNITY

Delivering Clinical Care in Your Community

Hamilton Niagara Haldimand Brant

CCAC Community Care Access Centre

CASC Centre d'accès aux soins communautaires

ABOUT HNHB CCAC

"It's rewarding to see clients maintain their independence as they age in the safety of their own home and comfort of their community."

Anne Labrie, RN
HNHB CCAC

PLAY

The **Hamilton Niagara Haldimand Brant Community Care Access Centre** (HNHB CCAC) connects people in our region with the health and support services they need to:

- remain at home,
- avoid hospital admission,
- access support upon discharge from hospital and
- explore long-term care options.

CLINICAL CARE IN YOUR COMMUNITY

HNHB CCAC staff lead the delivery of home care services, in collaboration with our service providers and system partners. Case managers/care coordinators have clinical backgrounds. They are regulated health professionals who have expertise in nursing, social work, occupational therapy, physiotherapy or speech therapy. They also have additional training in case management and pride themselves on their professionalism, caring and compassion.

HNHB CCAC staff know the communities they serve to help people connect to the right health care, at the right time, in the right place.

One of every 19 people in the HNHB LHIN region receives services directly from HNHB CCAC.

3,357 individuals who previously did not have a primary care provider were connected with a family doctor or nurse practitioner through HNHB CCAC's Health Care Connect staff.

CHAIR AND CEO MESSAGE

"I try to envision my client through their eyes - how they go from day to day, hour to hour, using fine details to help achieve a successful return home from hospital."

Nancy Young, RN
HNHB CCAC

The Hamilton Niagara Haldimand Brant Community Care Access Centre (HNHB CCAC) is pleased to provide this 2011/2012 annual report as a part of our ongoing commitment to clear and transparent communication with people in our communities. Over the past year we continued to strengthen our role as system navigators for our clients, created additional opportunities to partner with primary care providers, and collaborated with system partners to help our clients access health care resources.

Melody Miles
CEO

Carole Ward
Chair

This year we continued to see significant increases in the number of people requiring high levels of care. Their health needs are more acute and the interventions and support they need are more complex than ever before. This trend underscores the need for clinical care and expert coordination of health care services in our communities. It also speaks to the reality that all of us, no matter how complicated our health care needs are, would prefer to be in the comfort of our own home with supports, than in any other setting.

Given the current fiscal realities and increasing demand for high intensity home care services, this past year has also given the HNHB CCAC the opportunity to innovate to ensure accessibility and equity for the people we serve today, and the people we will serve in the future. Several new programs have been piloted to support patients with highly complex health care needs. These programs are aligned with the patient's priority to live at home and they are helping system flow by making hospital beds available for those who need them.

To ensure we are offering the best possible care to our patients, we measure our efforts in a number of ways. HNHB CCAC's commitment to quality and patient care was recognized this past year when we were Accredited with Exemplary Standing by Accreditation Canada, the organization that sets standards for quality and safety in health care and accredits health organizations in Canada and around the world. We were humbled to be recognized by our clients and partners for our dedication to quality home and community care.

ABOUT OUR CLIENTS

"We work with our service providers to ensure palliative clients' pain and symptoms are well-managed to avoid hospitalization, which allows people to remain at home where they want to be."

Candace Wells, RN
HNHB CCAC

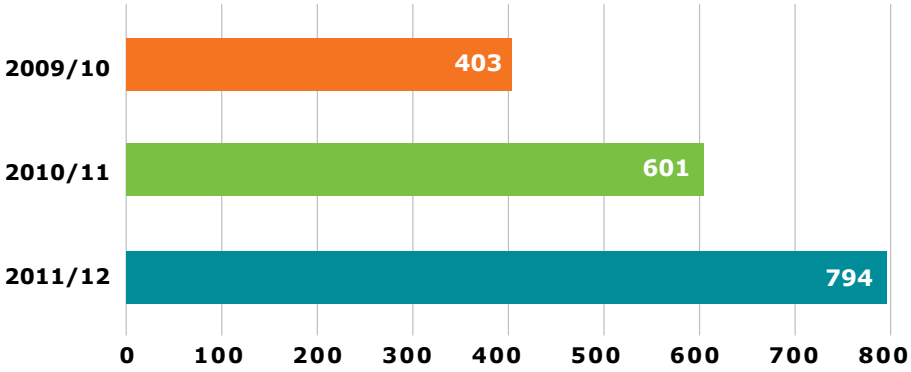
HNHB CCAC provides client care through staff who have clinical expertise and community knowledge. In 2011/2012, staff coordinated more than 4.25 million visits to 72,951 clients and their families and helped them navigate through the complexities of the health care system.

This past year, HNHB CCAC supported the following numbers of patients to:

- 63,181 - live at home safely
- 3,438 - move to a long-term care home
- 3,057 - receive palliative care at home or in a residential hospice
- 7,651 - receive school health support services
- 12,060 - receive wound care services.

HNHB CCAC provided services to 56% of seniors in our region aged 85 and over.

Number of High Needs Clients Per Month



Assess/Restore beds are giving people new opportunities to recover and return home. More than 75% of hospital patients in an assess/restore bed were discharged home, helping over 850 people return home rather than moving to a long-term care home.

COMMUNITY CARE

"My clinical background helps me care for medically complex children. I work closely with the patient's family, community supports and hospitals to ensure quality care."

Sally Baerg, RN, MSc
HNHB CCAC

HNHB CCAC continued to care for a growing number of clients with high care needs each month. The average number of HNHB CCAC clients served with high needs increased 32% over 2010/2011. Taken over two years, there has been a 97% increase in the average number of high needs clients. For our clients, this means that more people were able to be cared for at home instead of in a hospital or other facility; it also means that health care system resources were made available for those with acute care needs.

"The patient is the driver on the health care journey. The CCAC provides the fuel that keeps the health care journey moving forward…"

Sally Baerg, RN, MSc
HNHB CCAC

SUPPORTING TRANSITIONS

- At the end of March 2012, 139 patients were waiting in hospital to move to a long-term care home, down from 197 patients waiting in hospital March 2011 and 428 people in April 2010, thanks to HNHB CCAC efforts to bring people home safely from hospital. This represents a decrease of 67.5% in the number of people waiting for placement to a long-term care home bed from hospital over the past two years.
- 3,783 hospital admissions were avoided through CCAC case managers working in partnership with hospital staff in emergency rooms in our region.

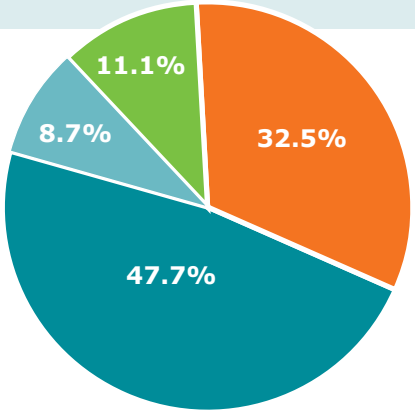
Working with partners, HNHB CCAC helped achieve a 16.3% decrease in the number of Alternate Level of Care (ALC) days from the previous year. This reduction represents 93 hospital beds being made available every day in the health care system.

FINANCES

STATEMENT OF FINANCIAL POSITION

March 31, 2012, with comparative figures for March 31, 2011

	2012	2011
Assets		
Current assets:		
Cash	$10,256,902	$14,576,538
Accounts receivable	1,781,713	1,439,475
Prepaid expenses	801,199	708,787
	12,839,814	16,724,800
Capital assets	2,656,221	2,880,548
	$15,496,035	$19,605,348
Liabilities and Net Assets		
Current liabilities:		
Accounts payable and accrued liabilities	$11,796,659	$16,357,221
Due to MOHLTC/LHIN	762,490	82,291
Deferred operating contributions	280,665	285,288
	12,839,814	16,724,800
Deferred capital contributions	2,656,221	2,880,548
Net assets	-	-
	$15,496,035	$19,605,348



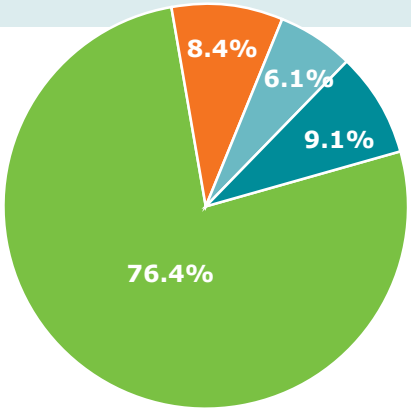
HNHB CCAC Expenditures by Service Type

- Nursing
- Personal Support
- Therapies
- Medical Supplies & Equipment

STATEMENT OF OPERATIONS AND CHANGES IN NET ASSETS

Year ended March 31, 2012, with comparative figures for 2011

	2012	2011
Revenue:		
MOHLTC/LHIN	$258,136,474	$248,597,320
Interest income	76,766	18,625
Miscellaneous income	1,293,178	1,337,582
Amortization of deferred capital contributions	1,704,281	1,541,718
	261,210,699	**251,495,245**
Expenses:		
Purchased client care services	169,842,156	159,450,116
Client care medical supplies and equipment	20,782,495	22,238,784
Salaries and benefits	58,444,232	55,891,169
Other non salary	10,437,535	12,373,458
Amortization of capital assets	1,704,281	1,541,718
	261,210,699	**251,495,245**
Excess of revenue over expenses	-	-
Net assets, beginning of year	-	-
Net assets, end of year	$ -	$ -



HNHB CCAC Expenditures by Type of Client

- Acute/Short Stay
- Rehabilitation
- Long Stay/Maintenance
- Palliative Care

FINANCES

STATEMENT OF CASH FLOW

Year ended March 31, 2012, with comparative figures for 2011

	2012	2011
Cash provided by (used in):		
Operations:		
Excess of revenue over expenses	$ -	$ -
Item not involving cash:		
Amortization of capital assets	1,704,281	1,541,718
Amortization of deferred capital contributions	(1,704,281)	(1,541,718)
Change in non-cash operating working capital	(4,319,636)	540,060
	(4,319,636)	540,060
Investing activities:		
Purchase of capital assets	(1,479,954)	(321,327)
Amounts funded by deferred capital contributions	1,479,954	321,327
	-	-
(Decrease) Increase in cash	(4,319,636)	540,060
Cash, beginning of year	14,576,538	14,036,478
Cash, end of year	$10,256,902	$14,576,538

Complete audited statements available upon request

CLIENT STORY

"Having worked in both the hospital and community, I have the clinical knowledge and experience to develop individualized care plans for clients."

Heather Babcock, RN
HNHB CCAC

PLAY

After a long and complicated surgery following a life-threatening illness, Margaret Anne was anxious about returning home from hospital. "I must admit, there was a feeling of insecurity which blanketed the excitement of returning home for both myself and my family," she recalls.

The feeling of being overwhelmed quickly dissipated when Margaret Anne arrived home safely. A nurse came to their home on the first evening to ensure proper medical equipment was available and to make sure she was comfortable.

"I have given careful thought to what precipitating factors I believe have played the most critical roles in my journey. One of the major factors, I believe, is feeling safe. CCAC provided the safety net on the home front which has enabled me to move forward."

Margaret Anne

Margaret Anne worked closely with Brenda, her HNHB CCAC case manager. They collaborated to understand Margaret Anne's clinical needs and together they developed a care plan. Understanding her client's needs, Brenda coordinated quality care through her expertise and in-depth knowledge of community resources. "Based on my clinical background and my case management expertise, I was able to support Margaret Anne and her family to meet her medical needs at home, where she wanted to be."

Margaret Anne said coordination and communication were key during the weeks of radiation and chemotherapy she underwent. At home she was able to receive clinical care to support her care plan, including a physiotherapist, occupational therapist, dietician and a visiting nurse. Equipment, including an air mattress, was also provided to help with her discomfort from a bed sore. Margaret Anne said, "The services, the equipment, the supplies…it all just seemed to fall in place. I have been given the very best by the best."

GOVERNANCE

"We are caring for medically complex clients who need intensive case management. Our clinical backgrounds enable that kind of care."

Zubeida Dadani, RN
HNHB CCAC

The **HNHB CCAC** Board of Directors is a volunteer board, which provides governance and strategic direction to the organization. Board meetings are open to the public.

To learn more about our board members, meeting dates and times please visit ***www.hnhb.ccac-ont.ca*****.**

BOARD OF DIRECTORS

Bernice (Bunny) Alexander *(Vice Chair)*
Barry Brownlow *(Treasurer)*
Sheila Hosking
Jerry Lawlor
Len Lifchus
Bruce McIntosh
George Nakamura
Gary Ostofi *(Past Chair)*
Dave Ringler
Carole Ward *(Chair)*

Last year, **HNHB CCAC** partnered with:

- 10 hospital corporations across 21 sites;
- 13 emergency departments;
- 6 Urgent Care Centres;
- 21 Family Health Team sites including more than 200 physicians;
- 86 Long-Term Care Homes;
- 80 Community Support Services;
- 5 Residential Hospices.

VISION, MISSION AND VALUES

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: Accountability • Care • Collaboration Excellence • Fairness • Innovation

ACKNOWLEDGEMENTS

"With a background in social work, I tend to view clients holistically, looking not only at the specific ailment, but the social implications as well."

Susan O'Riley, MSW, RSW
HNHB CCAC

Meeting the health care needs of our communities takes clinical expertise, community knowledge and commitment. Thanks to our volunteer board of directors, our dedicated staff and service providers, committed health sector partners and community agencies, along with the leadership provided by the HNHB LHIN and the Ministry of Health and Long-Term Care, we have been able to do our part in leading health care in our communities this year.

We must also acknowledge the caring and commitment of caregivers, families, friends, neighbours and volunteers who provide the care people need to live at home safely and recover at home following a hospital stay. Their contributions are a vital part of our home and community care system.

HNHB CCAC is proud to have recognized people in our communities as "Heroes in the Home," unpaid caregivers, including family members, and friends whose kindness and commitment allows our clients and others to live full lives in their communities, despite the limitations of age, illness, or disability.

Over the last two years more than 400 nominees have been honoured at special ceremonies across our region. To learn more about Heroes in the Home and to nominate someone you know, please visit our website at *www.hnhb.ccac-ont.ca*.

CARING TOGETHER
HEROES IN THE HOME
HNHB CCAC

HNHB CCAC has a Speakers' Bureau, providing detailed information to community groups and health sector partners about home and community care issues. Last year, our staff spoke with 4,000 people at over 90 speakers' bureau events, including seniors information fairs and community presentations. To book a speaker for your event, please visit our website at ***www.hnhb.ccac-ont.ca.***

CONTACT US

"When families reach the point that they need to explore long-term care options with their loved ones, I work with everyone involved to guide them through the process."

Sandra Benko, RN
HNHB CCAC

Call the HNHB CCAC toll free: **1-800-810-0000** or contact the office in your area.

AREA	PHONE NUMBER	ADDRESS
Brant	519-759-7752	195 Henry Street, Unit 4, Bldg 4 Brantford ON N3S 5C9
Burlington	905-639-5228	440 Elizabeth Street 4th floor Burlington ON L7R 2M1
Haldimand-Norfolk	519-426-7400	76 Victoria Street Simcoe ON N3Y 1L5
Hamilton	905-523-8600	310 Limeridge Road West Hamilton ON L9C 2V2
Niagara	905-684-9441	149 Hartzel Road St. Catharines ON L2P 1N6

For more information, please visit our website:
www.hnhb.ccac-ont.ca

ACCREDITATION CANADA
AGRÉMENT CANADA
Driving Quality Health Services
Force motrice de la qualité des services de santé

BPSO
RNAO
BEST PRACTICE SPOTLIGHT ORGANIZATION CANADA
ORGANISME VEDETTE EN PRATIQUES EXEMPLAIRES

Funding support provided by:

Ontario
Hamilton Niagara Haldimand Brant Local Health Integration Network
Réseau local d'intégration des services de santé de Hamilton Niagara Haldimand Brant