

HEROES IN THE HOME

A newsletter for South West CCAC Clients and their Families

Getting Home First

A new CCAC program helps ease the transition from hospital to home

Until last October, Janet Summerton and her husband George lived comfortably in a London retirement home. Then Janet had a bad fall and had to be hospitalized for more than three weeks. Already living with

diabetes and severe arthritis, she lost the use of her legs.



To see the video of Janet's story, go to <http://youtu.be/TZVcLeRdT8Y>.



In the past, patients like Janet would have waited in hospital until a bed became available in a long-term care home. Instead, she went home, the first person to do so under an innovative new program called Home First. "She is still vibrant in terms of her cognition and

spirit," says her hospital case manager. "It would have crushed her feisty spirit if she'd had to move to long-term care at that time."

To help her settle in, she got extra CCAC services for several weeks, including up to 12 hours a day of personal support, daily nursing visits, and regular visits from a physiotherapist and an occupational therapist. A ceiling lift was installed to enable her to move safely from her bed to her motorized wheelchair.

"Who wouldn't want to be at home?" says Janet. "I'm my own boss. I don't have to spend all my time in bed and I can come and go as I like. There's a library here that I can go to. And it means a lot being at home with George."

Janet is one of some 50 clients with complex health challenges who have been supported to come home from hospital under the Home First program that launched last fall. Home First currently operates in London and St. Thomas, but will eventually be

extended across the South West. CCAC intensive case managers work in hospitals and in the community to plan care for these special clients. "We're the catcher's mitt in the community," says case manager Heather McCallum. "We work with our hospital partners to determine the clients' needs, and then put the right care in place."

Some Home First clients eventually move to a long-term care home, having had time at home to consider their options. Others, like Janet, are able to stay home. Either way, they can leave hospital when their treatment is complete, freeing up beds for patients who need hospital care.

"I'm the pioneer of this program," says Janet proudly. "I hope I'm able to encourage other people to take part in it because it's really worthwhile – it really extends the quality of your life."

To find out more about Home First (which is currently available only in some parts of the South West), talk to your case manager.

Your CCAC, Working for You

At the South West CCAC, we're always working to improve care and help our clients live the lives they choose. Here are some of our "bragging rights" from 2011-2012:



92% of our clients said they were satisfied or very satisfied with CCAC services.



100,654 days in hospital and long-term care were avoided by supporting people to get home from hospital sooner and stay home longer.



695 clients who would otherwise have gone to long-term care were able to stay home due to a special program to support high-risk seniors.



More than **15,000** people who didn't have a family doctor found one through the CCAC's Care Connectors.



98% of clients calling the CCAC reached a live person.



A Message from CEO Sandra Coleman

The Future of Health Care

Did you know that health care accounts for nearly half the entire budget for the government of Ontario? And that number is continuing to grow as our population ages.

That's one reason a lot of people are saying that health care has to change. The Minister of Health and Long-Term Care Deb Matthews announced an *"Action Plan for Health Care"* in February that outlines her ideas for change, and economist Don Drummond also published a much-talked-about report.

The changes are not about cost-cutting. They're about improving the quality of care, making the system work better, using resources wisely, and ensuring that the people who need care most, get it.

The South West CCAC and CCACs across Ontario have an important role to play in the future of health care. Our case managers are "system navigators" and "care connectors." They work with individual clients to understand their needs and then connect them with the right

care. They help clients move through a very complicated system. They help clients get home from hospital sooner, and stay safely in their own homes longer. They are the link between family doctors, hospitals, community support services, long-term care homes and other parts of the health system.

As you face health challenges, remember that your case manager is your system navigator and care connector. Don't hesitate to ask him or her questions. Be an active member of your care team. Work in partnership with your case manager. Your care, and the health of the health system, depend on it.



Restoring Independence

In Grey-Bruce, Restorative Care Units are helping clients get home from hospital

"Clients are really increasing their strength, their mobility, even their whole outlook, and they're thoroughly enjoying it."

CCAC case manager Vicki Gingrich is talking about what she's seen working on the new Restorative Care Unit (RCU) in Chesley. The ten-bed unit opened in early November and has been busy ever since. A second unit with 12 beds opened in Owen Sound in mid-December.

RCUs are designed for patients who have finished the acute phase of their treatment in hospital but aren't quite ready to go home. The units provide them with a two- to eight-week period to strengthen and improve function, so that they can get home and live independently.

The CCAC manages admissions to the RCUs. Case managers determine which patients will benefit most from a stay in an RCU and are most likely to be able to return home with CCAC support.

In the RCUs patients get up and get dressed each

morning, take their meals communally, and build strength and function in a small physiotherapy gym. "It was absolutely fantastic," says Betty, who stayed in the RCU in Chesley in February. "I liked everything about it. I did my exercises at least three times a day, and I was looked after beautifully by all the staff."

Regional Manager Cathy Kelly says RCUs are good for the system too, helping to make more beds available for people who need hospital care. "This approach empowers clients," she says. "It helps them enjoy a better quality of life and encourages them to manage their own health and wellness needs."

Betty is doing well at home, receiving visits from a personal support worker just two days a week. Reflecting on her experience in the RCU, she says, "I told them when I was leaving that it was the only resort I ever went to where I didn't get a suntan!"

To find out more about Restorative Care Units, which are currently available in Grey-Bruce, talk to your case manager.

Partnering with Primary Care

Care is better when your family doctor and your case manager work together

"I feel much more connected to our clients if I've had a conversation with their physicians. I feel that I'm bringing so much more to the individual, and in return, I can take more back to the physicians."

CCAC case manager Connie Vandersleen is talking about the partnerships between CCAC and family doctors. She works closely with a Family Health Team in the Stratford area, sharing information about clients and helping to plan care for them collaboratively. Says Vandersleen, "Working together helps us keep people at home a whole lot longer, and provide the right care at the right time."

Clients feel better knowing that everyone is working together, she believes. "Having the case manager and the doctor talking the same language and knowing what each other is doing really enhances the care journey for clients," she says.

Dr. Rob Annis, a family doctor and Regional Primary Care Lead for the South West LHIN, agrees. "CCAC case managers can act as facilitators and connectors, especially when it comes to the transition from hospital to community," he says.

Nancy Dool-Kontio, Senior Director Strategic Planning and Integration for the CCAC, says the partnership

approach will eventually spread to all primary care practices (family doctors) in the region. "Primary care has a pivotal role within the health system, and so does the CCAC," she says. "We are connected through our common clients, and there's an onus on all of us to provide the best level of care we can as a team."

TIPS for making the most of your doctor's appointment

- Arrive on time so you don't feel rushed.
- Write down any questions or concerns you have and bring the list with you.
- Don't be embarrassed to talk about sensitive topics. Be honest.
- It's okay to ask your doctor about diagnoses or treatments you may have read about, but be prepared to listen to his or her professional opinion.
- Be specific about your symptoms. Note the duration, frequency, timing, severity and triggers.
- Make sure you understand what your doctor is saying. If you aren't sure, ask her to explain again or write it down, or bring somebody with you.
- Let your doctor know about any other treatments or medications you're taking.
- Let your doctor know if you are receiving services from the CCAC and ask if he or she would be willing to meet with your CCAC case manager.

Get Up and Go

Been referred to a CCAC FlexClinic? You'll find it a convenient way to get your nursing care

Gordon Lilley is receiving care for an ulcerated sore. At one time, he would have waited at home for his CCAC nurse to arrive. Now, he makes an appointment and drops into a clinic in St. Thomas. "It's better to come here and then it's done," he says. "You get out and do things and walk about, so it's beneficial."

His nurse, Susan Lyle, says seeing clients in a clinic setting means she spends more time providing care and less time driving. "Everybody who comes to the clinic loves it," she says. "They can make an appointment and come in when it's convenient. And they're taking more control over their own health care and being more active." She adds that CCAC clinics are not like walk-in clinics, with busy waiting rooms filled with sick people. Mostly, they serve people who need wound care or intravenous care.

CCAC clients who are able to get around are generally referred to nearby FlexClinics for their nursing care. For more information, talk to your case manager.



See you Wednesday!

Adult Day Programs help seniors stay home longer

Every Wednesday Eddie, who has Parkinson's disease, spends the day out at the Dorchester Adult Day Program (ADP). "They're all so kind and friendly here," he says. "I enjoy doing my exercises. It's the best place."

Mary Ellen Player, Coordinator of Eddie's program, enjoys it just as much as he does. "This is a labour of love for me," she says. "We have a great time. We try to reinforce what everyone can do and downplay what they can't do."

ADPs give clients an opportunity to get out and socialize with their neighbours. They also provide a range of care services, such as bathing, exercise programs, foot care, hand and nail care, weight and blood pressure monitoring, and music, pet, and art therapy. Most provide a full-course hot meal.

The CCAC enables access to ADPs in the South West. When case managers are planning care for their clients, they consider if an ADP would be a good option and make arrangements with a nearby program, along with other care services.

For caregivers, ADPs provide a much-needed break. "The biggest thing is peace of mind, knowing that Mum is not sitting home alone," says Mary Anne, a caregiver for her elderly mother. "I know she's being well taken care of." Angev, also a caregiver, agrees. "You become stressed, so it gives you that time to be on your own and settle down."

Mary Ellen says she keeps a close eye on her clients, and lets family members know if she notices any health



concerns. "We've prevented some hospital trips because I caught something early," she says.

She notes that the programs are designed to be age-appropriate and respond to the needs and interests of participants. "When you focus on the positive, it's amazing what spills out," she says. "This is an opportunity to engage and be alive."

To find out about Adult Day Programs in your area, talk to your case manager or search www.thehealthline.ca.

Saying Thank-You in a Special Way



Would you like to thank and recognize a special case manager, support worker, nurse, therapist, neighbour, friend or other care provider in your life? Why not nominate him or her for a **Heroes in the Home Award**? Last year more than 400 paid and unpaid caregivers were honoured at ceremonies across the region. Check www.thehealthline.ca in August 2012 for this year's nomination forms and details or talk to your case manager.

Caring Together for our Communities

For information about health and social services across the South West visit www.thehealthline.ca.

For more information about the CCAC visit www.sw.ccac-ont.ca or call **310-CCAC** (2222).



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