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ALS-HRS Providers Service Network
Meeting Notes
28 May 2025

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Attendees:
Jennifer Lalonde (Co-Chair), Su'ad Ahmed & Billie Jo Williams (Otttawa West Community Suppport), Sandy Woodhouse (Co-Chair) & Michelle Hamilton (Thrive Housing & Support), Valerie Bishop de Young & Stacey Norris (VHA - Visitng Homemaking Association, Ottawa), Lindsay Selleck (J.W.MacIntosh, Winchester), Jessica Chong & Tanya MacDonald (Perley Health, Ottawa), Monique Thibodeau-Laflamme (Montfort Renaissance- Centre des Services Guigues, Ottawa), Sara Hess (Carefor, Eastern Counties), Sylvie Lebevre & Isabelle Lalonde (Service Communautaire Prescott-Russell), Augusta Goldie & Megan Bowles (Barry's Bay & Area Home Support), Helen Esilman (NRLTC), Emily Hamilton (Renfrew Victoria Hospital) Michaela McClymont (Arnprior Regional Hospital), Rachelle Levesque (PSS, Community Care City of Kawartha Lakes), Ayan Mohamed (Community Care Durham), Michael Eden (Legion Village), Melissa Dion & Samantha Crowley (VON), Donna Mohar (Cheshire Support to Independent Living), Veronique Rollin, Veronica Racine, & Anisha Mehreja (Bruyere), Isabelle Meunier (OH@H), Chris Cobus (CSS Shared Resources, Ontario East).

1. **Welcoming Remarks**
   Jennifer Lalonde, Co-Chair, welcomed everyone and invited them to say hello in the chat.

2. **Agenda** – accepted as circulated.

3. **Last Meeting notes (26 March 2025)** – accepted as circulated.

4. **Report from the Sub-Committee on direct vs indirect hours of care.**
   Chris Cobus reported on the sub-committee meeting held on 12 May 2025 with Michelle Hamilton, Jessica Chong, Helen Esilman, and Sara Hess in attendance.
   After discussing the experience of those on the sub-committee, which spanned the various types of ALS programs (rural/urban, community/congregate, unionized/non-unionized), and taking into consideration the discussion at the last meeting of the larger group, the following recommendation was being brought back to the larger group:

   > Until the Ministry makes a decision on whether to change the current reporting directive on splitting hours of care into these two domains (or not), there is really no value in trying to have agencies throughout OHE align in their definitions. To do so, would actually go against what the group had formerly submitted to Ontario Health and The Ministry of Health questioning this division of hours in the first place (when other sectors are not required to do so), **and** individual agencies are not likely to change their current practices (based on their individual definitions) due to the varied resources and Board policies of each agency.

   Since the last full meeting of OHE ALS-HRS Providers, several ALS Providers received a memo from Ontario Health noting the requirement to report both 'direct & indirect' hours of care and were provided with a definition of each. The memo was shared with the group.
   It was acknowledged that, while Ontario Health remains firm on their request that agencies report direct and indirect hours at this time, there could be value in agencies counting the same thing, in the same way, i.e., by counting **scheduled hours of direct care**.

5. **Ontario Health Capacity Reporting:**

Ontario Health have begun requesting agencies to report on their ALS capacity every two weeks as of May 2025. Questions arose as to what is to be done with this data, is anyone using it, what will happen if a report gets missed/is late (due to staff being away sick/on vacation), and is there enough 'change' within ALS to warrant its collection so frequently?

OH Access & Flow Committee is discussing capacity within CSS and this is one way OH hopes to be able to share ALS capacity in CSS with others in the health system, e.g., to help with hospital discharge. Time will tell if it makes sense or not to collect it this frequently. Missed/late reports are being followed up by OH.

There was discussion to clarify the various reporting requests coming from Ontario Health (capacity reporting) and OH @H (vacancy form issued only in Champlain, to obtain more information than is available via HPG).

6. **Agency Updates/questions to bring to the group:**
   There were no agency highlights to share but several questions arose for group discussion.
   - Are agencies allowed to adjust targets across geographic areas/sites if demand for service fluctuates, to allow resources to be used where demand is dictating it is needed most? Discussion revealed that some agencies have set targets assigned per specific geographic areas/sites that cannot be adjusted without OH approval, while others have an overall target, allowing ALS spaces to be moved across their catchment area according to fluctuating needs.
   - Do agencies do a 'quick' intake when they receive a referral (at the time of the referral) to ensure the client is eligible for ALS services, before placing them on waitlist? Yes
   - Are referrals from hospital given priority over community referrals? Yes
   - Do programs offering ALS-HRS (for high risk seniors) have an age specification, i.e., at what age is someone considered a 'senior'? In general, programs seem to consider clients who are 65 yrs. of age **or** if younger, when they have a geriatric profile, e.g., early onset dementia.

7. **Apples to Apples update:**
   Chris Cobus noted to the group that interviews are underway with CSS agencies throughout OHE region to gain a better understanding of both the variances and commonalities among CSS service implementation and reporting. Today's discussions reinforce the need to do this work to enable service networks such as this one, to talk 'apples to apples' when they are looking at data, best practices, and evaluation. Aggregate results from this project's data collection will be presented back to the various CSS service network tables to help them define their future directions and where they want to invest their energy in future.

8. **Other:**
   Sandy Woodhouse expressed appreciation for this regional service network, recognizing the value in having discussions with other CSS Providers offering similar areas of service. She expressed gratitude for being able to participate in the network and have opportunity to be Co-Chair.

9. **Next Meeting –** being planned for the fall 2025, when results from the Apples to Apples project can be shared. A series of meeting invites to be circulated for every other month from Sept 2025-March 2026.