

Respite Providers Service Network

16 April 2024 Meeting Summary

Present: Val Bishop de Young, Chair (VHA), Joanna Chisnell (Marianhill), Jennifer Lalonde (OWCS), Sarah Hess and Chantale Saucier (Carefor, EC), Kelly Dedekker & Krystal Whitford (J.W. MacIntosh), Jeanne Pronovost (ROSSS), Chris Cobus & Reem Haddad (CCSN).

1. **Welcome** – Val welcomed participants to the meeting.
2. **Agenda** – accepted as circulated.
3. **30 January 2024 Meeting Summary** – accepted as circulated.
4. **Business Arising from 30 January 2024 meeting notes:**
 - a) **Client Co-pay** – Val reported that she was recently informed that other regions of Ontario Health East (SE and CE) do not require a **client co-pay for Respite or Homemaking**. The former Champlain LHIN insisted on client fees as part of the funding being allotted in Champlain for this service. This topic will be further addressed at the next OH East CSS Advisory Committee meeting (in May).
She asked providers what recommendation they wanted her to bring back to OH East. They agreed it is good news for clients who need this assistance and can't afford the co-pay and that to eliminate the co-pay would also be less confusing for clients who have had service at no cost through HCCSS and are then transitioned to CSS and currently pay a fee. However, to sustain the service, most agencies would need to receive this balance of funding from Ontario Health if they were to implement **no** co-pay. It wouldn't likely be until the 2025-26 fiscal before OH could possibly do something about this for Champlain Providers. In the meantime, good to know that providers have some flexibility re: client fees, if their resources allow. **Action:** Val to circulate an email in follow-up to the May OH East CSS Advisory Committee meeting with the results of the regional co-pay discussion.
 - b) **Respite Service Standards** – Val shared the Respite Standards approved by this group with Ontario Health East and was asked if they could share them with other regions. The group agreed with sharing this document. **Action:** Val to pass this on to Ontario Health East, acknowledging the reference to the co-pay section would not be applicable in the other areas.
5. **New Business:**
 - a) **Program status:**
 - **Marianhill** (Joanna Chisnell) – Recruited more staff, but still a challenge in some areas. Did not meet targets but expecting to be at full capacity this year. Experiencing a slight increase in referrals from HCCSS. Offers Homemaking (regardless of personal care requirements), as no private Homemaking alternatives available in her region and this alleviates some of the Caregiver stress if they score high on the CWBI scale. Continues to find CWBI useful to help prioritize waitlist. Caregivers scoring 5-8 on CWBI given priority.

- **J.W. MacIntosh** (Krystal Whitford) – Staffing good. Targets low, tied to Respite apartments. Hope to implement use of the CWBI.
- **VHA** (Val Bishop de Young) – Still struggling re: staff recruitment. 74% of targets. Concerned about how tolerant OH will be in future if targets not met. Do not offer Homemaking if personal care not required as private homemaking services available in her region. Hope to implement use of the CWBI.
- **OWCS** (Jennifer Lalonde) – Increase in demand for Respite in the last 6 weeks. Do not offer Homemaking if personal care not required as private homemaking services available in her region. Hope to implement use of the CWBI.
- **Carefor, EC** (Sarah Hess) – targets low. Many referrals for Respite seeking Homemaking. Hope to implement use of the CWBI.

Action: Chris to circulate the most recent training slides and copy of the CWBI tool provided by Inter-RAI.

Next meeting: The group agreed to reconvene in September.