### **Respite Providers Service Network**

### 12 Sept 2024 Meeting Summary

**Present:** Val Bishop de Young, Chair (VHA), Joanna Chisnell (Marianhill), Jennifer Lalonde (OWCS), Sarah Hess, Chantale Saucier (Carefor, EC), Krystal Whitford (J.W. MacIntosh), Jeanne Pronovost (ROSSS), Morgan Denby (Regional Municipality of Durham), Erin Stoner (Lakeview Manor, North Durham), Melissa McDougall (CHS Lanark County), Ayaan Mohamed (Community Care Durham), Tracey Ferguson (CPH Care), Cindy Weese (VON, Napanee), Chris Cobus, Reem Haddad and Nathalie Lafrenière (CSS Shared Resources, East Region).

- Welcome Val welcomed participants to the meeting and there was a round of introductions, with each participant acknowledging their agency's role in providing respite services.
  While LTC Homes receive some dollars for residential respite, this group is intended to focus discussions on the operation and value of 'in-home' respite services.
- 2. **Agenda** accepted as circulated.
- 3. **16 April 2024 Meeting Summary** accepted as circulated.

#### 4. Business Arising from 16 April meeting notes:

## a) Client Co-pay – CAPS

In follow-up to the client co-pay discussion at the last meeting, participants shared information about their current co-pay/client fees related to the various respite services throughout the region. It quickly became evident that while consistent amounts have not been mandated across the region, all respite programs have some form of client fee/copay associated with them, to help cover costs of service provision. Client fees/co-pay is not something unique to Champlain Respite providers. Realizing this, impacts on proposed approach to CAPS completion this year.

#### 5. New Business:

# a) Program status – waitlists, challenges, successes:

Participants shared information on the status of their various programs with a focus on key challenges and successes.

### Key challenges identified:

- not getting many/inconsistency in frequency of referrals from Ontario Health @ Home.
- difficulty finding staff to serve rural areas.
- operating at reduced capacity due to clients being unable/unwilling to pay fees.
- lack of awareness about CSS services among referral sources (hospitals, OH@H, community at large)

- staff turnover within other health sectors, e.g., hospitals, OH@Home, makes education efforts re: CSS services difficult/time consuming.
- specific client fees mandated by OH, making service unaffordable for many.
- family and clients challenged by the immediate 'cut off' of CSS services when they are admitted to LTC.

### **Key successes identified:**

- Partnerships with other providers for referrals e.g., ABI.
- referrals from family and doctors in the community.
- availability of funds from OH to subsidize a portion of service in some cases.
- ability of some agencies to choose lower end of a range proposed by OH for client fees.

### b) Opportunities:

- This year CSS are to be reviewing and renewing their CAPS with Ontario Health; potential to submit some messaging re: consistent challenges/opportunities.
- CSS Shared Resources, East Region could circulate a survey in follow-up to today's meeting to summarize some of the information shared about respite services across the full region.
- use of a 'common definition' for respite has benefits as CSS proceeds to streamline e-Referral processes to improve client access to the services they need (e.g., Access CSS).
- Home First Directive an opportunity for CSS to demonstrate the value of the sector's contributions to the health system, but only if additional resources are made available to enable timely response to systemic needs (e.g., efforts to reduce ALS designations, referral of low acuity clients from OH@H to CSS).

**Action:** CSS shared Resources, East Region to circulate among today's participants a survey to gather information shared on various CSS respite programs across the region. Information gathered to help inform future efforts of this group.

**Next meeting:** Anticipated to take place in November, once survey results have been collated to support this group in moving forward.