

# Service Reference Document

Community Support Sector / 2015



**Ontario**

Local Health Integration  
Network

Réseau local d'intégration  
des services de santé

# Revisions List

Version 1

Release Date : March 2015

Version 2

Release Date: November 2015

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# How to use this Document

This Service Reference Document provides sector information and baseline data for Community Support Services in Champlain. It is intended to be beneficial to a variety of audiences including funders, agency administration, board members, direct service staff, and anyone else who has a stake in the sector.

The size of the document and the amount of information it contains can be overwhelming. It is not necessarily meant to be read from cover to cover, and not every section is of interest to all parties.

Use the hyperlinks (in [blue](#)) throughout the document to jump to the sections that are of interest. Also included are hyperlinks to external partner sites to give additional background material.

## Maps

There are 16 maps, two per Functional Centre.

The Catchment Area maps outline the geography served by each agency. The boundaries were made using the postal codes of actual clients. It does not represent the limit of the area an agency might serve.

The Supply/Demand maps illustrate the demand for a service using colour. The darker the shade of colour, the more services are needed relative to the amount of service already available. The percentages represented by the colour can be found in each map's legend.

**An example:** If the colour aligns to 79-99% on the legend this means that between 79 and 99% of people who might seek this service will not have access. Where it is white the service available is sufficient to support the demand.

The size of the dot represents the raw number of individuals who might seek to access that service.

**An example:** A darkly shaded area with a large dot indicates that there are many individuals seeking a service that is relatively unavailable. But if the area is darkly shaded with a small dot it means there are still relatively few services, but there are also a small number of people affected by the lack of service.

## Data Table

The last section is made up of a table with an immense amount of qualitative and quantitative data. The meat of this work can be found in this table. Pieces can be extracted for regional and local comparisons. The data is presented in a way to present only the data indicators or elements that are relevant to each functional centre.

It should be noted that looking at any indicator in isolation can be problematic. The number of clients served or units of service must also be determined to calculate the cost per unit. Only then can valuable comparisons be made.

And remember, this document is intended to provide a point-in-time snapshot of the sector. It is a comprehensive understanding of the Community Support Services sector in Champlain in the fiscal year 2013-14, and will not reflect any changes that have occurred since then.

# Preamble

Strengthening home and community services is a key priority for the [Ministry of Health and Long-Term Care](#) (MOHLTC). It has implemented changes to enable Ontario's seniors to continue to live safely in their homes and communities. The [Champlain Local Health Integration Network](#) (LHIN) is responsible for supporting regional community program development and sector planning. In order to better understand the scope and current state of Champlain's Community Support Sector (CSS), the LHIN, in collaboration with the CSS sector, has undertaken a comprehensive review.

The need for this review was made evident by these emerging provincial and local initiatives in the CSS sector:

- The MOHLTC's funding increases to the community, to support provincial goals
- The transition of low-needs clients from the [Champlain Community Care Access Centre](#) (CCAC) to CSS agencies
- The formation of a Provincial Ontario Healthcare Reporting Standards (OHRS) working group to address data and reporting inconsistencies in the OHRS database
- Recent amendments to Regulation 386/99 of the [Home and Community Services Act](#) which enabled the LHIN to fund CSS agencies to deliver Personal Support Services
- The reliance on the accuracy of OHRS data to successfully implement and monitor changes to Personal Support Services, namely the Personal Support Worker wage enhancement

For an effective understanding of the CSS sector in Champlain, an in depth review of eight Functional Centres was undertaken. These eight

programs receive the bulk of the sector's attention and/or funding from the LHIN:

- 72 5 82 45 [Assisted Living Services](#)
- 72 5 82 33 [Personal Support/ Independence Training](#)
- 72 5 82 20 [Day Services](#)
- 72 5 82 34 [Respite](#)
- 72 5 82 14 [Transportation](#)
- 72 5 82 10 [Meals Delivery](#)
- 72 5 82 05 [Service Arrangement/ Coordination](#)
- 72 5 82 31 [Homemaking](#)

This document provides a snapshot in time of the CSS sector, using baseline data from fiscal year 2013-14, for the above-mentioned Functional Centres. With support from the CSS sector, program reviews were conducted at each relevant agency. Practices of care and data collection were compared against formal expectations, as outlined by OHRS. The datasets were then re-validated at the agency level. This exercise provides, for the first time, an overarching understanding of the CSS sector in Champlain.

This document contains the following information for each Functional Centre in scope: The OHRS definition, the number of Health Service Providers who offer it, the number of clients served annually, the units of service, the annual LHIN funding, and the proportion of total LHIN funding. There is also a program description for each Functional Centre that explores the background, overview, current state, and current initiatives. And, graphs that show LHIN funding, program expenses, the number of clients supported, and the number of services provided annually, by agency. Also included are detailed maps, one outlining the program locations and service catchment area the other showing supply and demand for each program.

# Community Support Services in Champlain

## Agencies

In Champlain, 58 Health Service Providers are funded by the [Local Health Integration Network](#) (LHIN) to provide Community Support Services (CSS). A comprehensive list of agencies is available in [Appendix A](#) and are mapped, by location of head office, on the following page.

## Lead Agencies

The lead agency approach for program organization has proven to be a key strategy in improving the coordination and integration of services in Champlain. Since 2010, the Champlain LHIN has funded and expanded CSS programs based on this approach.

Of the eight Functional Centres under analysis in this document, six have dedicated lead agencies or a similar coordinated intake process.

The following is a list of the Functional Centres that currently operate under this model and the corresponding lead agency or agencies:

### **72 5 82 14 – Transportation:**

Carefor Health and Community Services (Renfrew County) is the lead agency for the Champlain Community Transportation Collaborative.

(Additional information on Carefor Health and Community Services (Renfrew County) can be found in [Appendix B](#).)

### **72 5 82 20 – Day Services:**

The [Champlain Community Care Access Centre](#) (CCAC) coordinates the intake process and manages the wait list for Adult Day Programs.

### **72 5 82 31 – Homemaking:**

Marianhill Inc. is the lead service provider for Renfrew County and area. Carefor Health and Community Services is the lead agencies for the Eastern Counties and, in Ottawa, it shares this responsibility with Ottawa West Community Support.

### **72 5 82 33 – Personal Support/Independence Training:**

VHA Health and Home Support coordinates the intake process and manages the wait list for Attendant Outreach and Supportive Housing.

### **72 5 82 34 – Respite:**

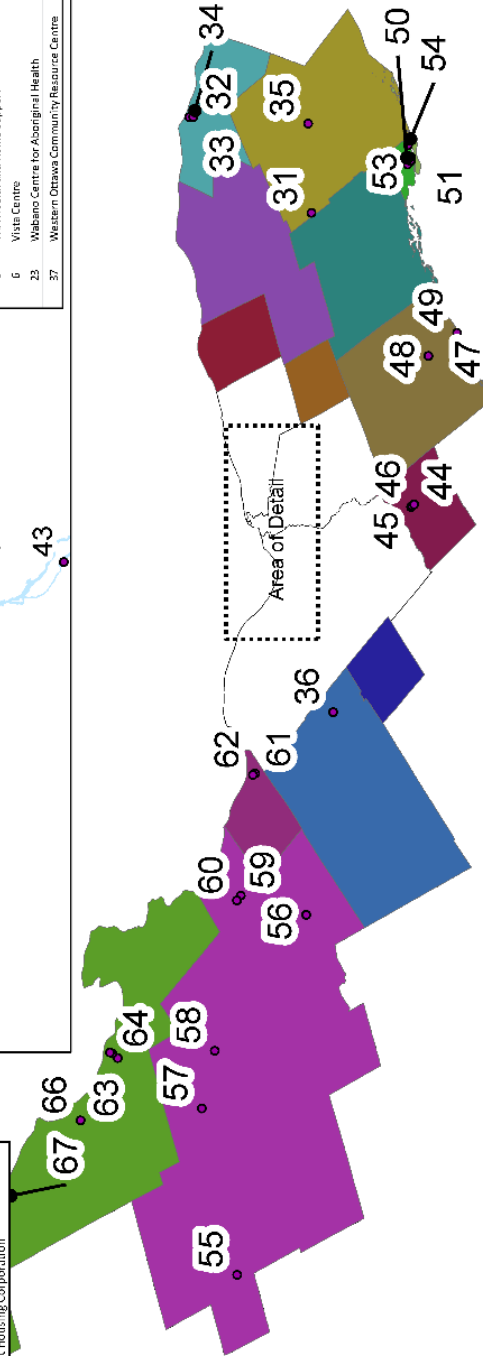
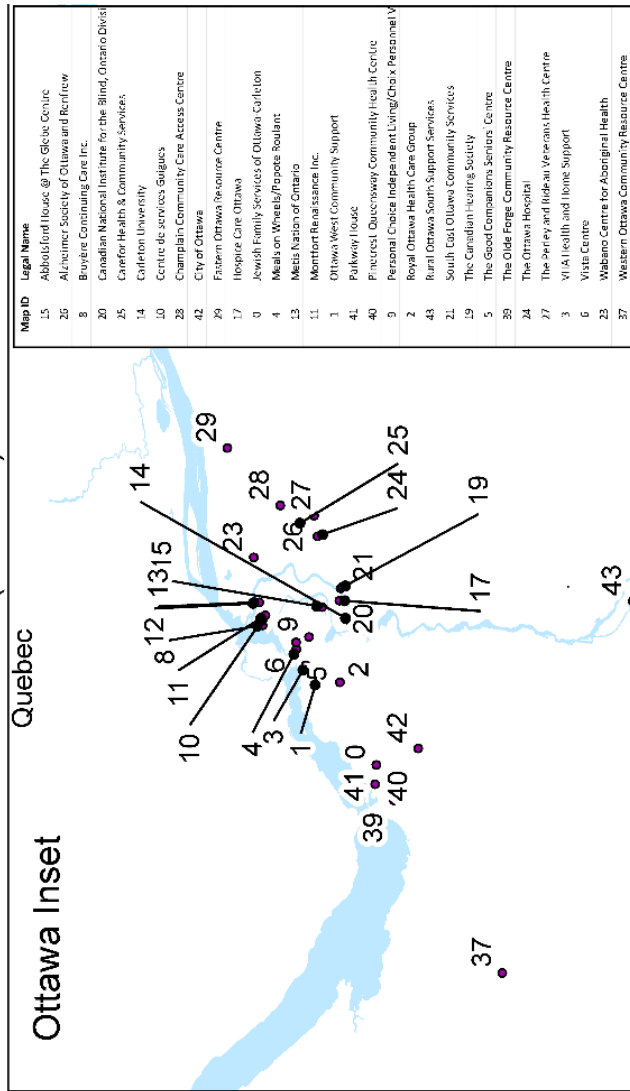
A group of seven agencies are funded to support clients discharged from the Champlain CCAC: Ottawa West Community Support and VHA Health and Home Support in urban Ottawa, Rural Ottawa South Support Services in rural Ottawa and North Grenville, Marianhill Inc. in Renfrew County, Mills Community Support Corporation in North Lanark, and Carefor Health and Community Services in the Eastern Counties.

### **72 5 82 45 – Assisted Living Services:**

The Champlain CCAC coordinates the intake process and manages the wait list for Assisted Living Services for High Risk Seniors.

## CSS Service Providers in Champlain. Head Office Locations (numbers)

Map ID	Legal Name
57	Algonquins of Pikwikanagan
58	Alzheimer Society of Cornwall & District/Société Alzheimer de Cornwall
62	Ampror Regional Health
61	Ampror, Braxide, Mink Services at Home Program Inc.
56	Berry's Joy & Area Senior Citizens Home Support Services
45	Bern Donovan Hospice
56	Calabogie and Area Home Support Program Inc.
63	Canadian Red Cross-Cornwall
63	County of Renfrew
47	Dundas County Hospice
58	Eganville & District Senior Citizens' Needs Association
35	Glenaghy Inter-Agency Group Inc.
51	Glen-Stor-Lodge (City of Cornwall)
32	Groupe Action pour l'enfant, la famille et la communauté de Prescott
49	Home Support Services - Merrisburg and District
34	Hôpital Général de Hawkesbury & District General Hospital
44	Kempville and District Home Support Inc.
64	Merrill Hill Inc.
31	Maxville Manor
36	Mills Community Support Corporation
51	Mishawik Council of Alkwasone
67	North Renfrew Long-Term Care Services Inc.
66	Renfrew Aboriginal Friendship Centre
59	Renfrew and Area Seniors' Home Support Inc.
60	Renfrew Victoria Hospital
33	Services communautaires de Prescott et Russell
48	Williamsburg Non-Profit Housing Corporation



There are 58 CSS agencies in this report. Map IDs come from a database that has greater than 58 CSS agencies due to integrations, satellite offices, etc.

## Functional Centres

Ontario Healthcare Reporting Standards (OHRS) sets the definitions for all CSS Functional Centres in the province. In Champlain, CSS Health Service Providers report under one, or more, of 29 Functional Centres (listed below). The definitions for the eight Functional Centres in

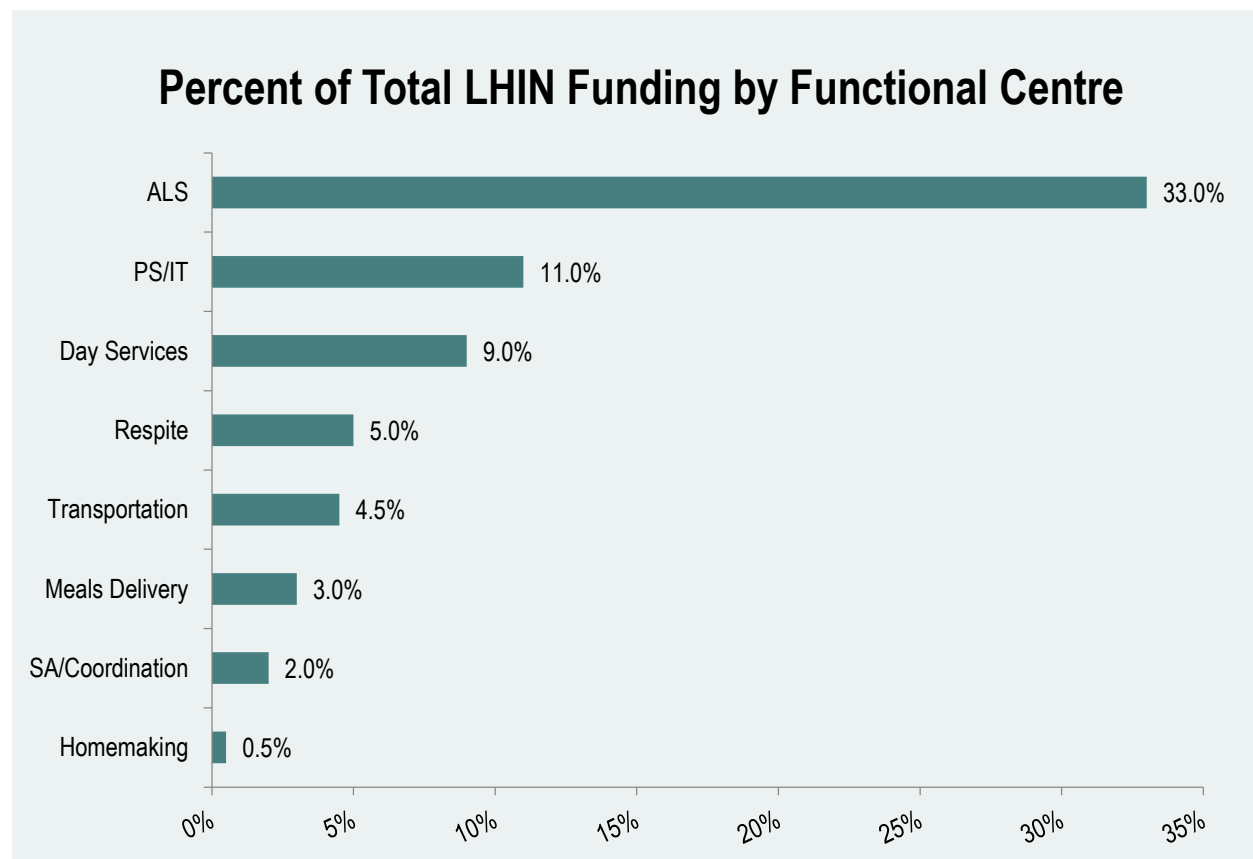
scope (highlighted below) guided the collection of data throughout the project. The formal definition of each Functional Centre can be found in OHRS Chapter 10 and under each *Detail by Functional Centre* section of this document.

OHRS #	Name
725509410	COM Health Promotion Education - Palliative Care Interdisciplinary
725509490	COM Health Promotion Education - Palliative Care Physician
725509491	COM Health Promotion Education - Palliative Care Pain and Symptom Management
725509610	COM Health Promotion Education - General Geriatric
725509676	COM Health Promotion Education - Psycho-Geriatric
7258205	COM In-Home Community Services - Service Arrangement/ Coordination
7258209	COM In-Home Community Services - Case Management
7258210	COM In-Home Community Services - Meals Delivery
7258212	COM In-Home Community Services - Social and Congregate Dining
7258214	COM In-Home Community Services - Transportation Client
7258215	COM In-Home Community Services - Crisis Intervention and Support
7258220	COM In-Home Community Services - Day Services
7258231	COM In-Home Community Services - Homemaking
7258232	COM In-Home Community Services - Home Maintenance
7258233	COM In-Home Community Services - Personal Support/ Independence Training
7258234	COM In-Home Community Services - Respite
7258240	COM In-Home Community Services - Overnight Stay Care
7258245	COM In-Home Community Services - Assisted Living Services
7258250	COM In-Home Community Services - Caregiver Support
7258255	COM In-Home Community Services - Emergency Response Support Services
7258260	COM In-Home Community Services - Visiting Social and Safety
7258265	COM In-Home Community Services - Visiting Hospice Services
7258270	COM In-Home Community Services - Foot Care Services
7258275	COM In-Home Community Services - Vision Impaired Care Services
7258277	COM In-Home Community Services - Deaf, Deafened, and Hard of Hearing Care Services
7258320	CSS Acquired Brain Injury - Day Services
7258333	CSS Acquired Brain Injury - Personal Support/ Independence Training
7258410	CSS Community Support Initiatives - Support Service Training
7258430	CSS Community Support Initiatives - Personal Support Worker Training

## Funding

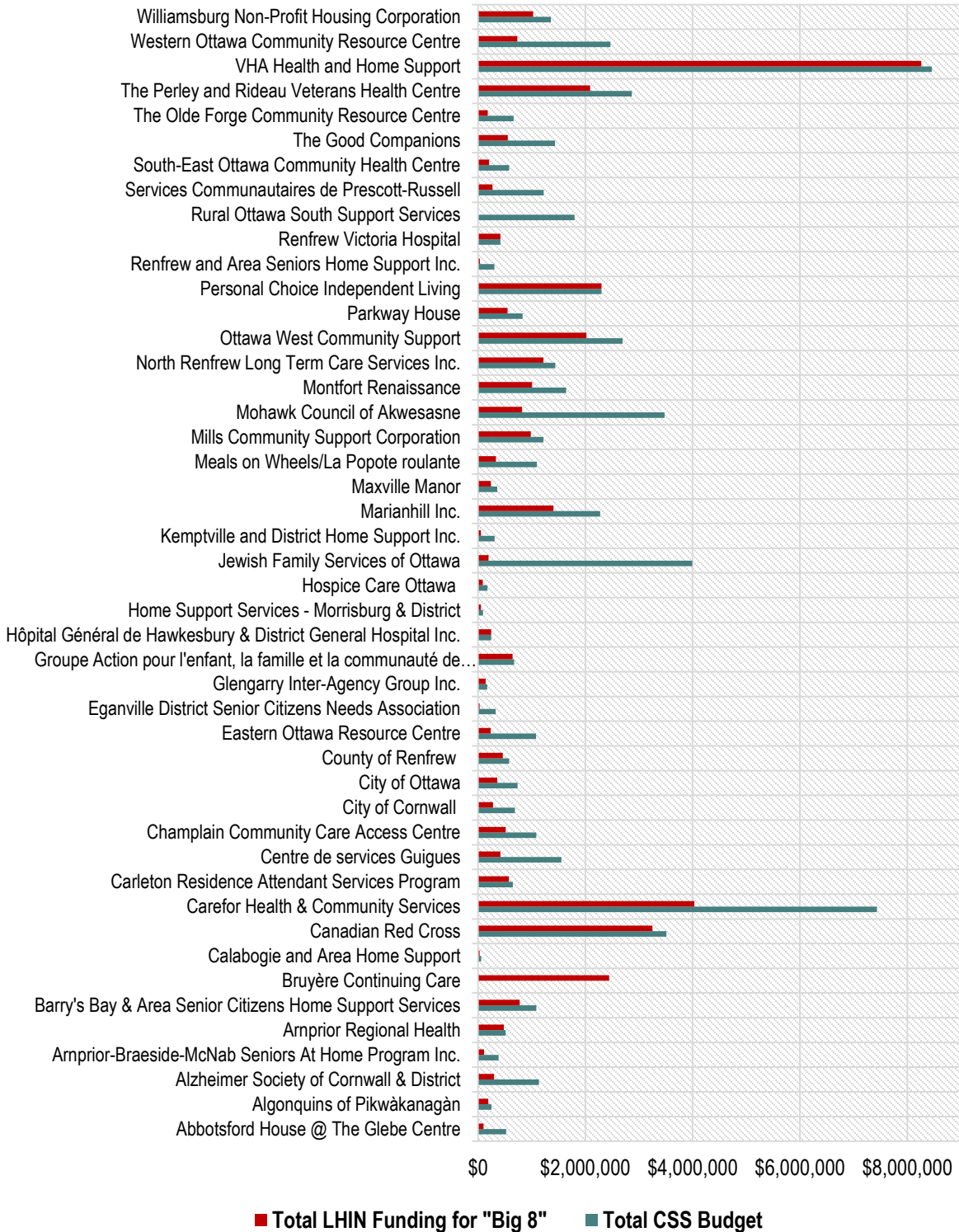
In the fiscal year 2013-14 the Champlain LHIN funded \$60,089,363 to Health Service Providers to deliver Community Support Services in Champlain. The eight Functional Centres under review in this document accounted for \$40,684,235 (or 68%) of the total Champlain LHIN funding to the CSS sector that year. The

funding by Functional Centre is delineated in the graph below. The following page holds a graph that compares each Health Service Provider's total agency budget against LHIN funding for CSS services. It reveals that some agencies rely fully on LHIN funding, whereas others have significant backing from other sources.



CSS Health Service Provider	LHIN Funding	Percent of Total LHIN Funding
Assisted Living Services for High-Risk Seniors	\$20,009,727	33.0%
Personal Support/Independence Training	\$ 6,423,852	11.0%
Day Services	\$ 5,373,964	9.0%
Respite	\$ 3,060,429	5.0%
Transportation	\$ 2,733,651	4.5%
Meals Delivery	\$ 1,515,708	3.0%
Service Arrangement/Coordination	\$ 1,230,096	2.0%
Homemaking	\$ 336,808	0.5%
<b>Total</b>	<b>\$ 40,684,235</b>	<b>68.0%</b>

## Total CSS Budget & Total LHIN Funding for Functional Centres in scope





# Detailed Information by Functional Centre

The [Local Health Integration Network \(LHIN\)](#) undertook an extensive data collection and verification process in order to present an accurate “point-in-time” snapshot of the Community Support Services (CSS) sector in Champlain.

This section is organized by Functional Centre to offer an understanding of the services delivered, the clients served, and the associated funding. Each Functional Centre summary includes the Ontario Healthcare Reporting Standards (OHRS) definition, the number of clients served annually, total funding (from all sources), and the distribution of costs and client co-payments (if applicable). A data-based mapping exercise produced an accurate list of Health Service Providers, their locations and service catchment areas, and a supply versus demand gap analysis. All of which is contained within this section. Maps are also included, defining the service gaps in terms of both the raw number of additional clients who require service, as well as the percentage relative to demand.

## Program Cost Calculations

The program costs are defined as the cost of client co-payments plus the cost of service. The cost of client co-payments is set per unit of service per client. For most programs, costs are determined by the LHIN. Such a standard does not exist for all programs, in which case cost is estimated by dividing funding by the total units of service.

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<sup>1</sup> <http://www.statcan.gc.ca/pub/89-628-x/89-628-x2007001-eng.pdf>

<sup>2</sup> Clarke, P. and A. Colantonio, 2005. Wheelchair Use Among Community-Dwelling Older Adults: Prevalence and Risk Factors in a National Sample. *Can. J. Aging*, 24:191-198

## Methodology of the Gap Analysis

The data used to assess demand in this exercise was obtained from two sources. [Statistics Canada's 2006 Participation Activity Limitation Survey](#)<sup>1</sup> informed the demand data for Meals Delivery, Day Services, Transportation, and Respite. Data from the Participation Activity Limitation Survey were mined at the respondent level for profiles that would typically receive the above mentioned services from the [Community Care Access Centre \(CCAC\)](#). The percentages of individuals found needing the specified services were then applied over geographical sub-areas of Champlain. The percentages used in the calculations were created by the [Population Based Allocation Model](#) team from the [Centre for Research in Health Engineering](#). The data were then grown forward, using age-specific growth rates, to 2014.

The second source of data was the [2011 Canadian Census](#), which was used to estimate the number of people requiring Personal Support/Independence Training, Assisted Living Services, and Homemaking. Here, research-based proportions of individuals requiring the above mentioned services were applied to each Champlain LHIN geographical dissemination area to estimate demand. These numbers were also grown forward to 2014.<sup>2,3,4</sup>

## Adjusting the Demand

The demand data was adjusted for material deprivation (used as a proxy for income) and for rurality. Fifty percent of demand from the lowest

<sup>3</sup> Percent population 75+ living alone with low income

<sup>4</sup> 3.45% of the 75+ population with ADLs



quintiles of [Material Deprivation Index for Ontario](#)<sup>5</sup> for each Champlain dissemination area was added to dissemination areas with the highest quintiles of material deprivation (proportionally to the population size of the dissemination area). The addition and subtraction was done in order to keep the total demand constant across Champlain.

Adjustment for rurality was performed in a similar fashion. Rural dissemination areas, as determined by [PCCF](#)<sup>6</sup>, were given 50% more demand than the urban dissemination areas.

### Supply Data

The two elements that comprise supply are the total number of clients served (service level) and the geographic area being served (service catchment). Service level data were collected from each Health Service Provider and validated to achieve accurate volumes for each Functional Centre in scope. The service catchments were determined by [geocoding](#) the postal codes of each client served, then connecting the points to generate a service catchment area.<sup>7</sup> Some subjectivity was required on the part of the epidemiologist to make useful conclusions.

### Gap Analysis

To determine the gaps in service of each Functional Centre, total supply was subtracted from the total demand in each of the Champlain LHIN's 34 geographic sub-areas. Each map indicates the severity of the percent gap (gap divided by adjusted demand) byway of a background colour, grouped using [Jenks' natural breaks](#).

### Extensions of the Methodology

The determination of the gaps in service allows for additional analyses which can inform detailed service level planning. The results of the analysis can guide the creation of targeted policies to improve the gaps in various services and allow estimates of the costs required to establish consistent levels of service. Consequently, service gaps may be addressed proactively and funds may be distributed in a planned manner to ensure equitable access across Champlain.

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<sup>5</sup> <http://www.torontohealthprofiles.ca/onmarg.php>

<sup>6</sup> *Postal CodeOM Conversion File (PCCF), Reference Guide, 2013*. Statistics Canada Catalogue no. 92-154-G.

<sup>7</sup> ArcGIS world service geocoder

## Assisted Living Services for High Risk Seniors

### Functional Centre – 72 5 82 45 – Assisted Living Services

OHRS DEFINITION	<p>Pertaining to the activities provided to service recipients who are living in a supportive housing setting or own residence and require assisted living services, accessible on a 24-hour basis. This service may include homemaking, personal support, attendant services and core components of independence training. The supportive housing setting is a location where organization may be responsible for providing services to a number of service recipients who live in their own units and housing is not a component of the service. Organizations providing these services will ensure their staff in various locations are onsite and/or accessible on a 24-hour basis.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>• Compensation costs - homemaking, personal support, attendant workers and related care coordination</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>• Building operations and maintenance costs which will be recorded under the Plant Operations functional centre</li> <li>• Costs of homemaking – cleaning supplies, etc.</li> <li>• Service recipients receiving services in this Functional Centre are excluded from reporting in the homemaking and personal support/independence training Functional Centres</li> <li>• Volunteer compensation</li> </ul> <p>Each visit is a service arrangement complete for a service recipient. A service being arranged can be one-time or for providing service for a series of intervals.</p>		
NUMBER OF HSPs	19	LEAD HSP(s)	Nil
CLIENTS SERVED	1,099	UNITS OF SERVICE	275,375 resident days
LHIN FUNDING	\$20,009,727	PROPORTION OF TOTAL FUNDING	33%
<p><b><u>Notable Exceptions:</u></b></p> <ul style="list-style-type: none"> <li>○ Of the 19 Health Service Providers reporting four provide Supportive Housing not Assisted Living Services: Carleton University Attendant Services Program, Marianhill Inc., Parkway House, and VHA Health and Home Support (formerly The In Community).</li> <li>○ Carleton University Attendant Services Program supports students at Carleton University and Algonquin College. It reports under this Functional Centre for its provision of Supportive Housing. It is a novel program and can support international students with physical disabilities.</li> <li>○ The units of service data is missing for two Health Service Providers; hence, the number of resident days is, in fact, higher than 275,375.</li> </ul>			

## Program Description

### Overview

As per the policy, Assisted Living Services for High Risk Seniors has multiple objectives:

- To reduce unnecessary and/or avoidable Emergency Room visits by high risk seniors
- To reduce unnecessary and/or avoidable admissions to Long-Term Care by high risk seniors
- To increase the number of high risk seniors who are discharged from hospital without an Acute Level of Care designation
- To reduce the length of stay for high risk seniors in hospital after receiving a designation of Alternate Level of Care
- To reduce time waiting for discharge from hospital for high risk seniors who live in the community
- To increase the length of time that high risk seniors remain safely at home after a hospital discharge

Assisted Living Services are intended to meet the needs of high risk seniors who can reside at home but require Personal Support and Homemaking services on a 24-hour basis. The following services are provided to seniors enrolled in the Assisted Living Services program:

- 24-hour urgent/on-call response
- Security checks or reassurance services
- 24-hour (seven days per week, 365 days per year) pre-scheduled Personal Support and Homemaking services
- Care Coordination

### Background

In January 2011, the [Ministry of Health and Long Term Care](#) (MOHLTC) introduced the [Assisted Living Services for High Risk Seniors](#) policy, which expanded this program to better meet the needs of more complex clients who are frail or cognitively impaired. This replaced the Assisted

Living Services in Supportive Housing Policy of 1994.

Assisted Living Services is an essential part of the continuum of care for high risk seniors. In Champlain, the need for services to care for this population was informed by a number of studies, particularly the [Champlain Balance of Care Project](#) and the Affordable Supportive Housing Implementation Plan. These studies concluded that a significant percentage of clients on the waitlist for Long-Term Care could be diverted from Long-Term Care to their own homes if community supports were provided.

A significant proportion of the Champlain LHIN [Aging at Home](#) funding was allocated to the development of a new Assisted Living Services for High Risk Seniors program (formerly Supportive Housing). In addition to the policy changes, the Champlain LHIN developed a singular, common approach to the provision of Assisted Living Services for High Risk Seniors in the region.

The implementation process for the expanded Assisted Living Services for High Risk Seniors was facilitated by the Assisted Living Services for High Risk Seniors Care Coordinator workgroup and the Executive Director/ Managers of Assisted Living Services for High Risk Seniors workgroup. Both working groups included representation from CSS, the Champlain CCAC, [le Réseau des services de santé en français de l'Est de l'Ontario](#), and the Champlain LHIN. Their work included service development, communication, process approval, and rapport building.

### Current State

Of the 19 Health Services Providers reporting under this Functional Centre, 15 provide Assisted Living Services for High Risk Seniors across assigned geographies. Each of the Health Service Providers designated to provide Assisted Living Services for High Risk Seniors is responsible for both coordination of services and direct patient care. Referral administration, eligibility determination, and waitlist management are performed by the Champlain CCAC.

Staffing guidelines for Assisted Living Services for High Risk Seniors, as outlined in both the [Champlain LHIN Operational Plan](#) and the formal Service Agreements between the LHIN and each Health Service Provider, are as follows:

- One Full-Time Equivalent (staff) for 10 every clients during the day (Personal Support Worker and/or Homemaker)

- One Full Time Equivalent (staff) for 10 every clients during the evening (Personal Support Worker and/or Homemaker)
- One Full Time Equivalent (staff) for 20 every clients during the night (Personal Support Worker and/or Homemaker)

Furthermore, there is a mandatory staffing ratio of 0.5 Care Coordinators per 20 clients. Health Service Providers modified the Personal Support Worker staffing model to meet the needs of the client groups within the available funding envelope. The per diem was revised in 2013 to \$55.00 (or \$402,506 per 20 clients per year).

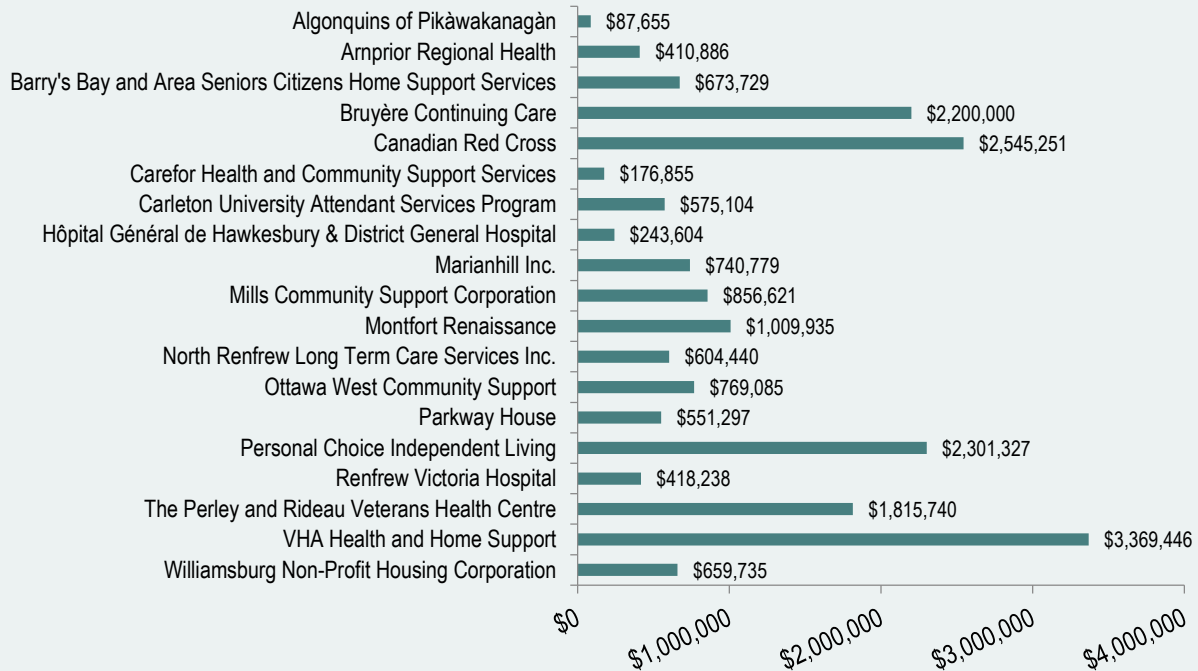
### Current and Planned Initiatives

The Ontario MOHLTC is in the process of reviewing the client characteristics for eligibility to Assisted Living Services for High Risk Seniors. It is anticipated that this may increase the acuity of care needs for some client groups.

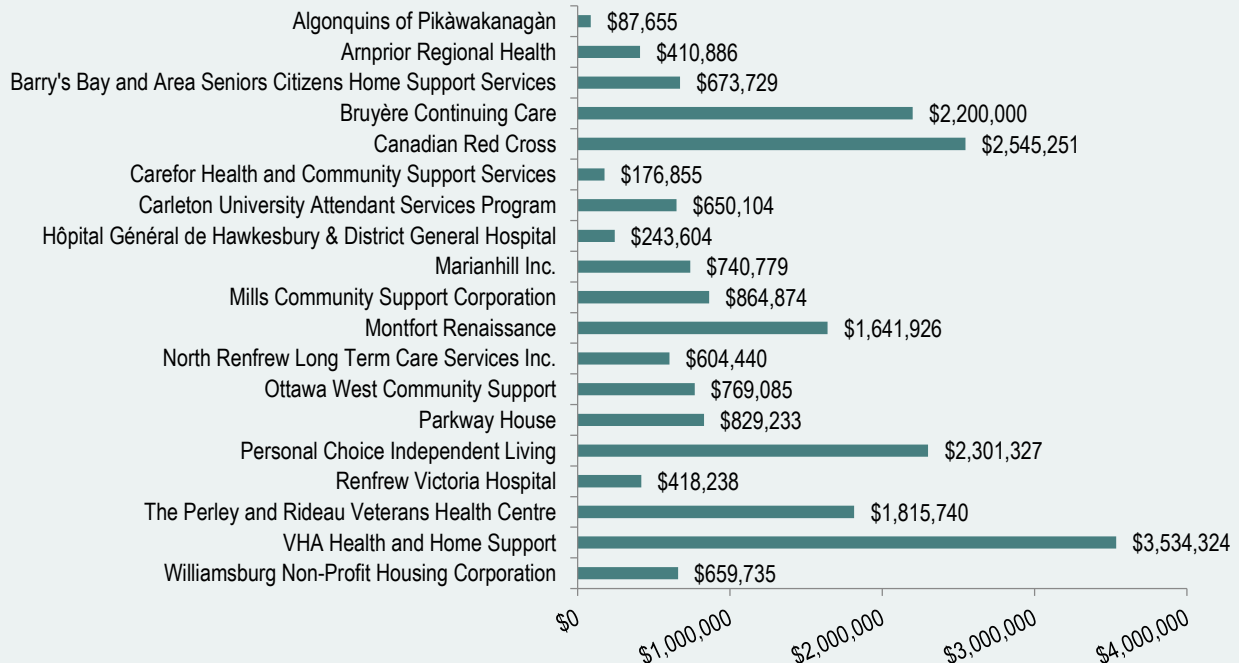
### Program Cost

COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
COST PER SERVICE (LHIN DESIGNATED)			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 55.00	\$ 55.00	\$ 55.00	\$ 55.00

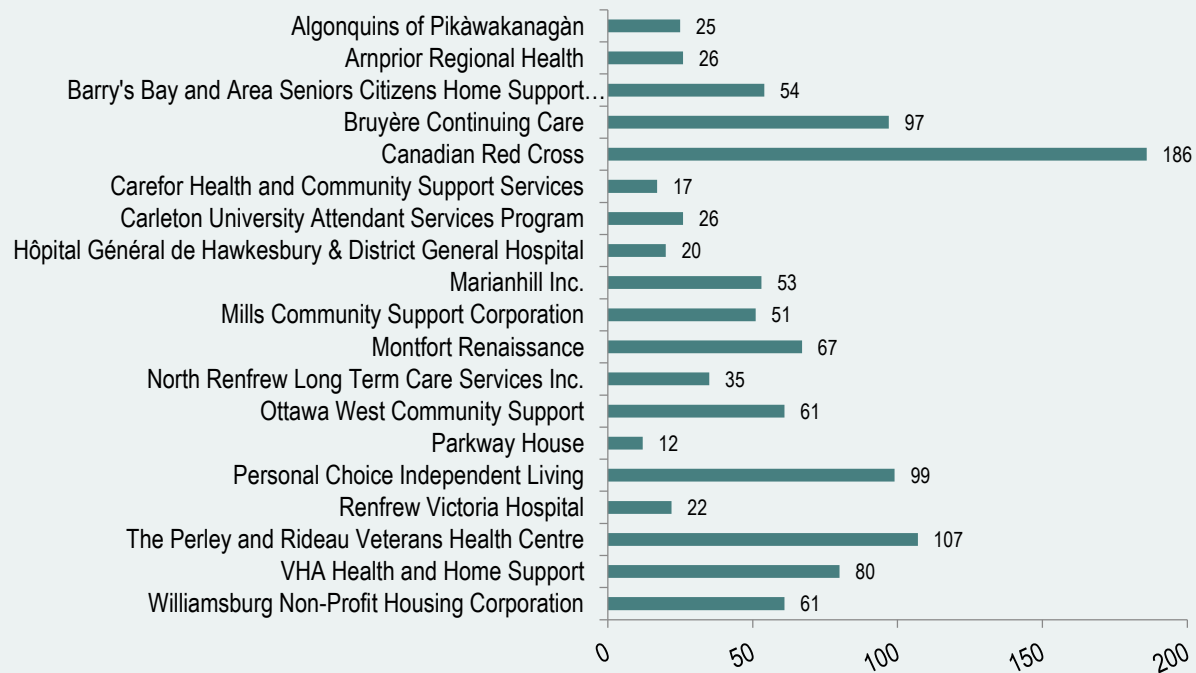
## Assisted Living Services for High Risk Seniors LHIN Funding



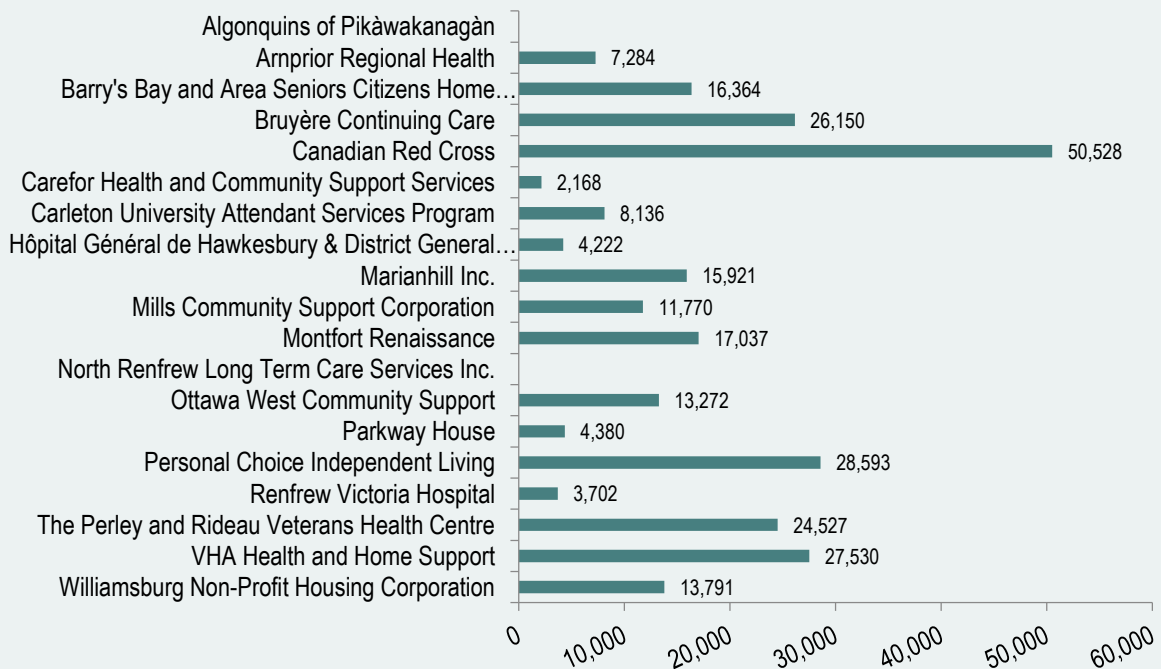
## Assisted Living Services for High Risk Seniors Program Expenses



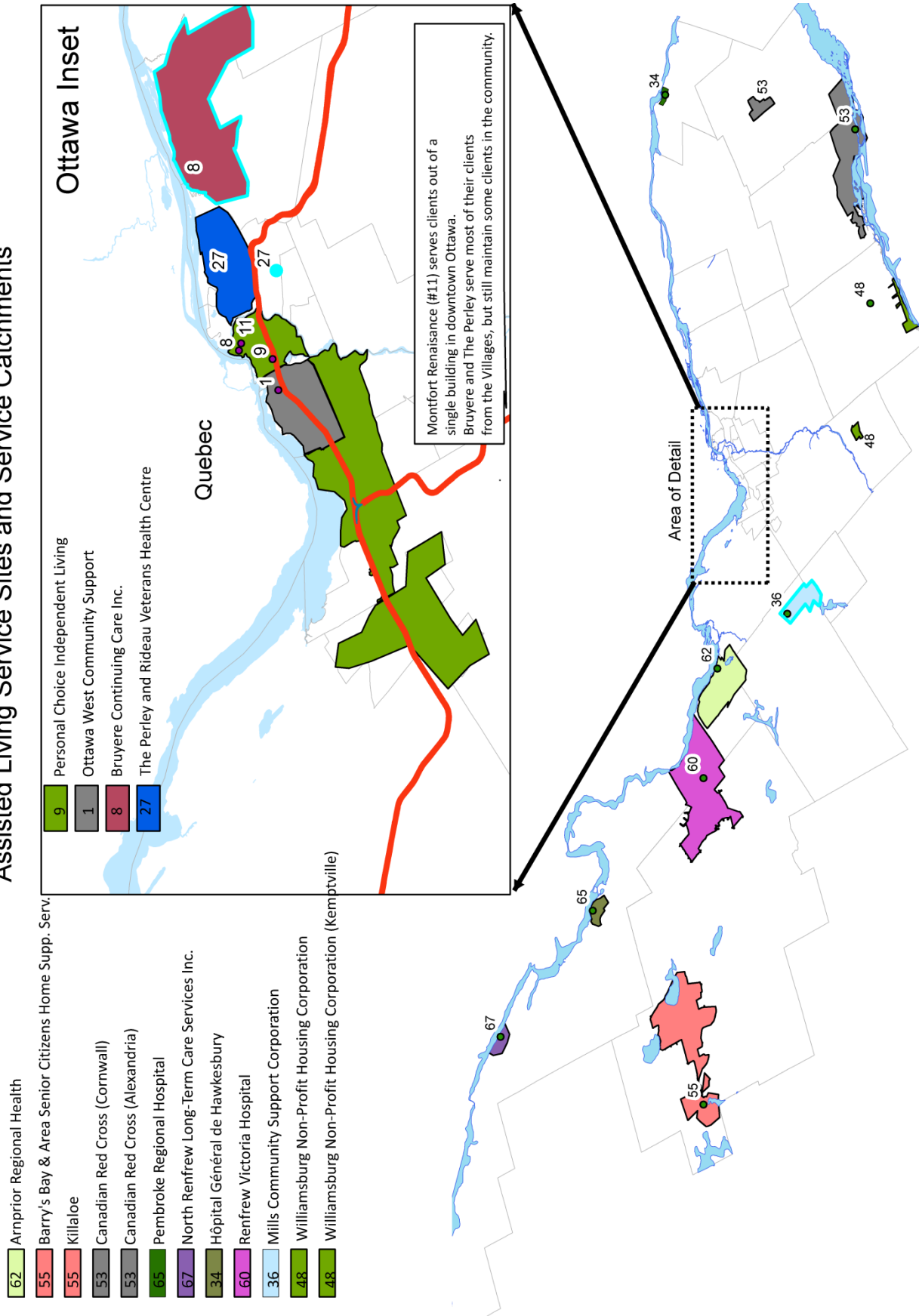
## Assisted Living Services for High Risk Seniors Clients Served



## Assisted Living Services for High Risk Seniors Resident Days



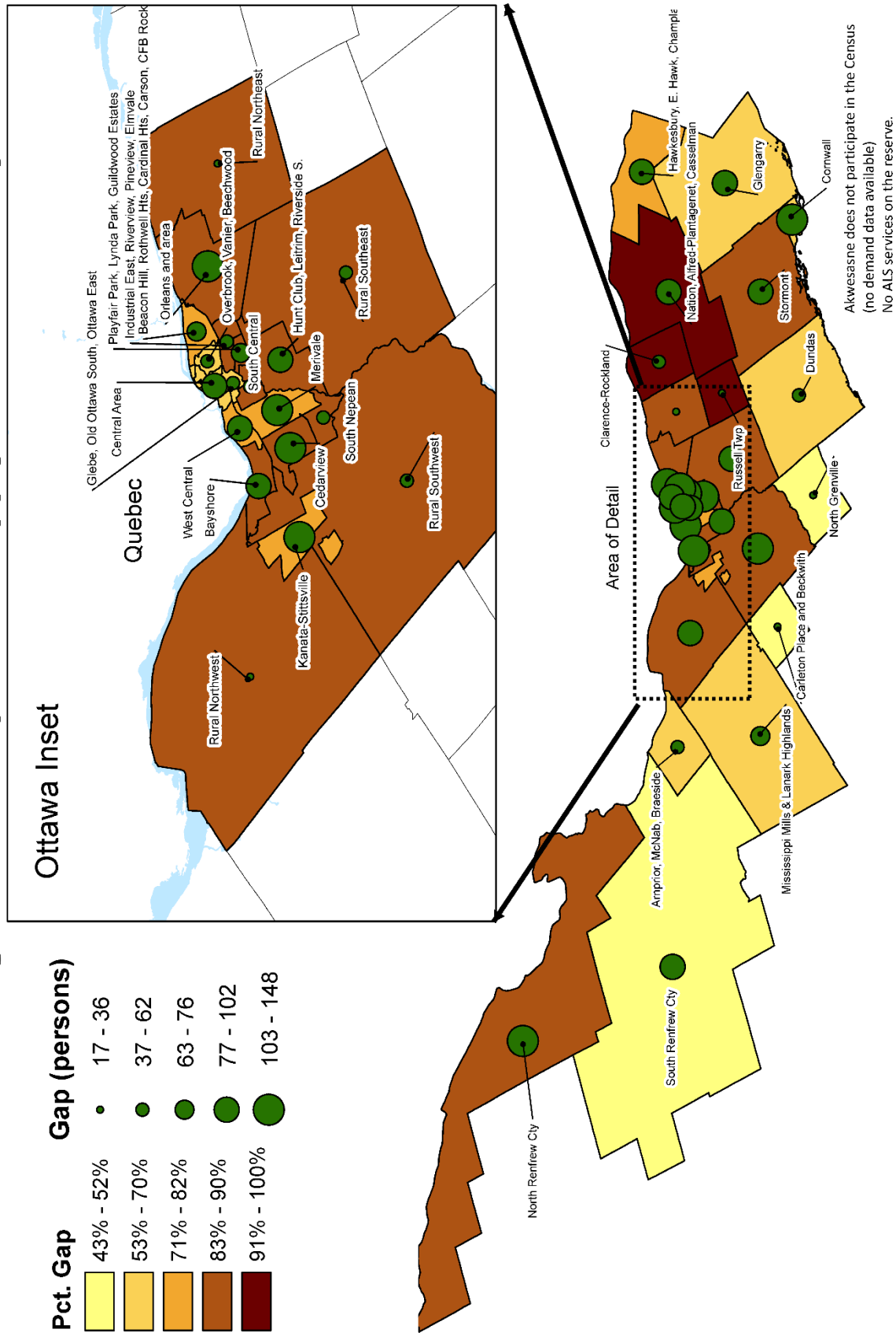
## Assisted Living Service Sites and Service Catchments



Service catchments were based on 15 minute drive time from a central location. Marianhill, VHA (The In Community) and the Algonquins of Pikwakanagan report their supportive housing programs under this functional centre. Carleton University also reports their attendant services under this functional centre.



# Assisted Living Services Spaces: Supply/Demand Analysis



Supply of assisted living spaces allocated to 33 areas based on provider catchment areas. Demand based on research-established proportions of the population aged 75+ (2011 census), adjusted based on average socioeconomic status in the area ('material deprivation index' per Ontario Marginalization Index). Gap = supply - adjusted demand. Percent gap = gap/adjusted demand.



## Personal Support/ Independence Training

### Functional Centre – 72 5 82 33 – Personal Support/ Independence Training

OHRs DEFINITION	<p>Pertaining to services to assist service recipients with routine personal hygiene activities, activities of daily living, and train the service recipient to carry out these activities. This may include the core components of independence training service; through working with service recipients and/or family members to teach the activities of daily living and necessary skills to increase personal independence. The skills may be taught include physical development and health, sensory-motor development, communications and social skills, emotional and spiritual development, independent living skills and behavioural management. This service is provided for service recipients living with families as well as those living in institutions and making arrangements for living in the community. The services are provided at the service recipient's residence and may be on a continuous basis.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>• Coordination costs - direct staff compensation, e.g. personal support workers and independence trainers</li> <li>• Compensation for employees delivering the training</li> <li>• Transportation costs to service recipient's location, where applicable</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>• Service recipients receiving assisted living services as this is a component of the combined services</li> <li>• Direct costs of homemaking – cleaning supplies, etc.</li> <li>• Individuals receiving service in the Day Services Functional Centre that attend an independence training session provided in this Functional Centre as part of the components of the day program</li> <li>• Volunteer compensation</li> </ul>		
NUMBER OF HSPs	5	LEAD HSP(s)	VHA
CLIENTS SERVED	2,194	UNITS OF SERVICE	140,413 hours of care
LHIN FUNDING	\$6,423,852	PROPORTION OF TOTAL LHIN FUNDING	10.7%
<p><b><u>Notable Exceptions:</u></b></p> <ul style="list-style-type: none"> <li>○ The number of Health Service Providers increases to seven if Carefor is divided into its three regions.</li> <li>○ VHA Health and Home Support administers a single application process for people needing Attendant Services throughout Champlain.</li> <li>○ Mohawk Council accounted for the support it provided to a group of individuals with physical disabilities under this Functional Centre.</li> </ul>			

## Program Description

### Overview

Personal Support/ Independence Training, or Attendant Services as they're also called, provides physical assistance by a trained Attendant to those with a physical disability for [Activities of Daily Living](#). Attendant Services is limited to non-medical activities. There are three types of Attendant Services in Ontario:

- **Attendant Care Outreach Program:** Individuals accepted into this program can receive Attendant Services in their home, a workplace, or at a post-secondary education facility. Services are scheduled on a pre-arranged visitation basis. Attendant Services are complimented by professionals such as Occupational Therapists, Physiotherapists, and/or Social Workers. In Champlain, this program is administered and delivered by the CCAC.
- **Support Services Living Unit or Supportive Housing Unit:** In this program recipients are co-located in Support Services Living Units. Services are scheduled, during beforehand; though staff are immediately available if necessary, as the office is on-site. The services are shared between approximately six and 20 clients. This program is complimented by professional services such as Occupational Therapy, Physiotherapy, and/or Social Work, provided by the Champlain CCAC.
- **Direct Funding Program administered by the Ottawa Independent Living Resource Centre:** In this case, clients self-direct the services required as the employer of the support staff. The client is therefore responsible for advertising jobs, conducting interviews, completing police record and reference checks, and other employee administrative tasks such as payroll

deductions, leaves of absence, and payment. The MOHLTC provides funding directly to each client and assigns an accountant. This program is not suitable for everyone as it requires substantial planning and care arrangement. As well, this is not a shared service as each person directs his or her individual care plan.

To be eligible for Attendant Services applicants must meet all of the following criteria:

- Be insured under the Health and Insurance Act of Ontario
- Be able to direct his or her own care
- Be at least 16 years of age
- Have a permanent physical disability and require assistance with [Activities of Daily Living](#)
- Be able to have services provided in his or her home, workplace, or adult education centre
- Not have his or her needs met through other existing programs or services (i.e. an insurance settlement)
- Demonstrate an understanding of his or her disability, attendant services, and the specific services they require
- Demonstrate good judgement and problem solving skills
- Demonstrate the ability to provide direction to attendants which allows him or her to provide safe, effective, and quality care
- Be able to make concrete choices about care and manage the delivery of the service
- Be involved in his or her own care planning process

### Background

In 1998 VHA Health and Home Support was asked by the Ontario MOHLTC to develop and administer a one-stop application process for people requiring Attendant Services in the greater Ottawa area. In 2008, the program's central

application process was improved and updated to include Attendant Services agencies across all of Champlain.

The central application process for Attendant Care Services, administered by VHA Health and Home Support on behalf of the Champlain Attendant Services Network, allows for a single point of access to care. Applicants need only complete a single application to access all attendant service available in the region.

#### Current State

Two Health Service Providers, Groupe Action pour l'enfant, la famille et la communauté de

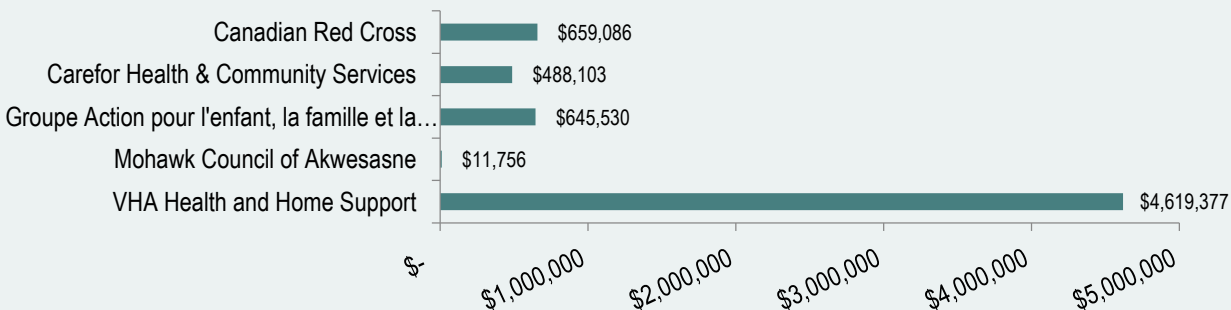
Prescott-Russell and the Canadian Red Cross, provide Attendant Care services in the Eastern Counties, VHA Health and Home Support covers the Ottawa area, and The Ontario March of Dimes (funded by the South East LHIN) provides Attendant Care services to Leeds, Lanark, and Renfrew Counties.

In September 2013, a total of 215 people were on the wait list for Attendant Care Outreach in Champlain. The Champlain LHIN has approved an investment of \$973,192 to address waitlist pressures.

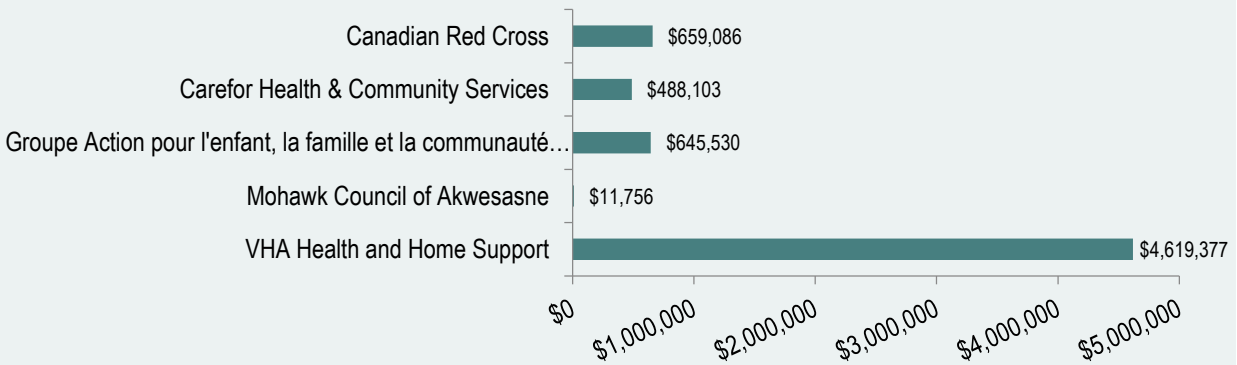
#### Program Cost

COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
COST PER SERVICE			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 12.38/hour	\$ 39.97/hour	\$ 36.45/hour	\$ 67.08/hour
<b>Note:</b> <ul style="list-style-type: none"> <li>There are no fees for Attendant Care services, Personal Support services under the Going Home Program, or Mohawk Council's Recreational Program.</li> <li>The cost per service was estimated using the annual program expense, divided by the total annual service units per agency.</li> </ul>			

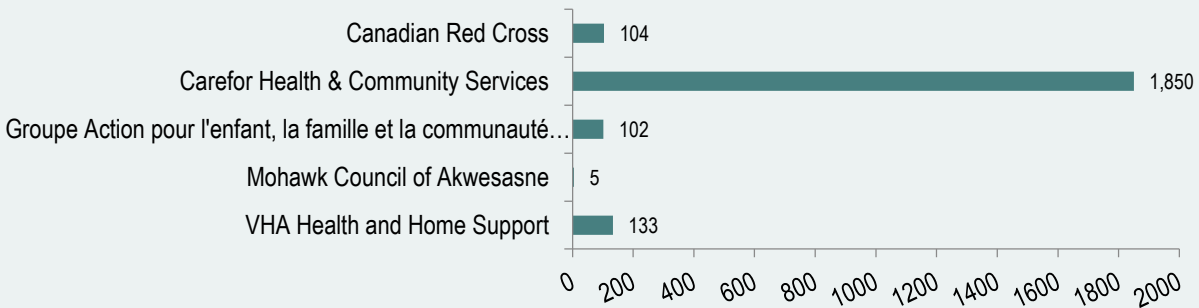
### Personal Support/ Independence Training LHIN Funding



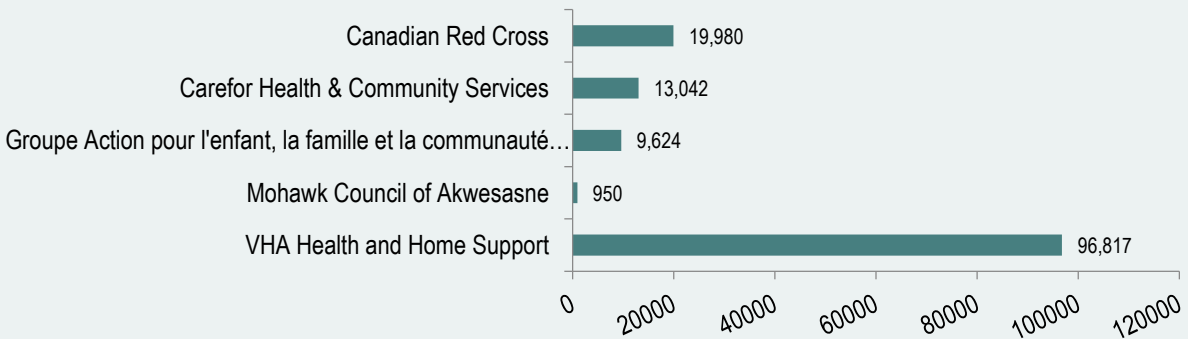
## Personal Support/ Independence Training Program Expenses



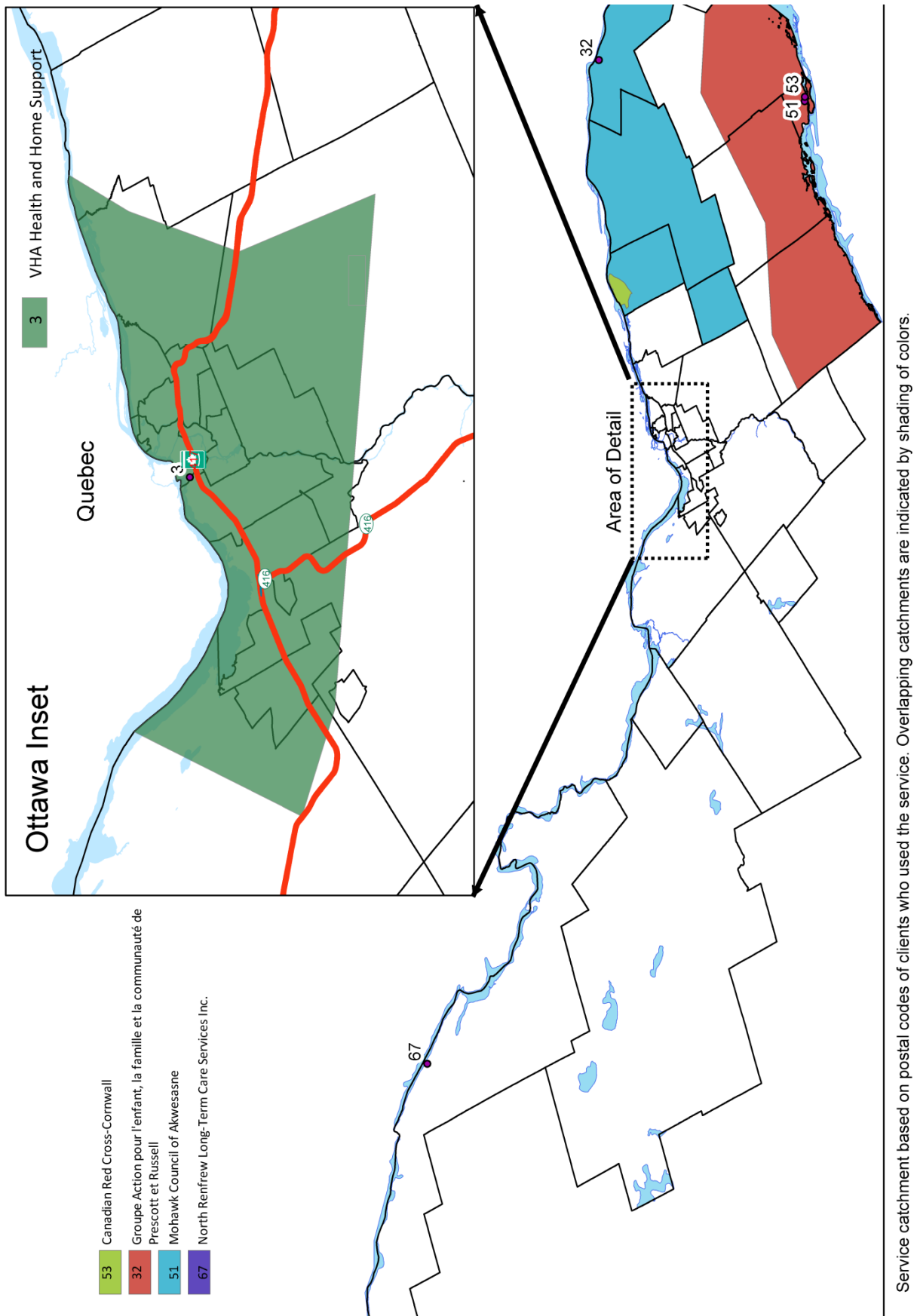
## Personal Support/ Independence Training Clients Served



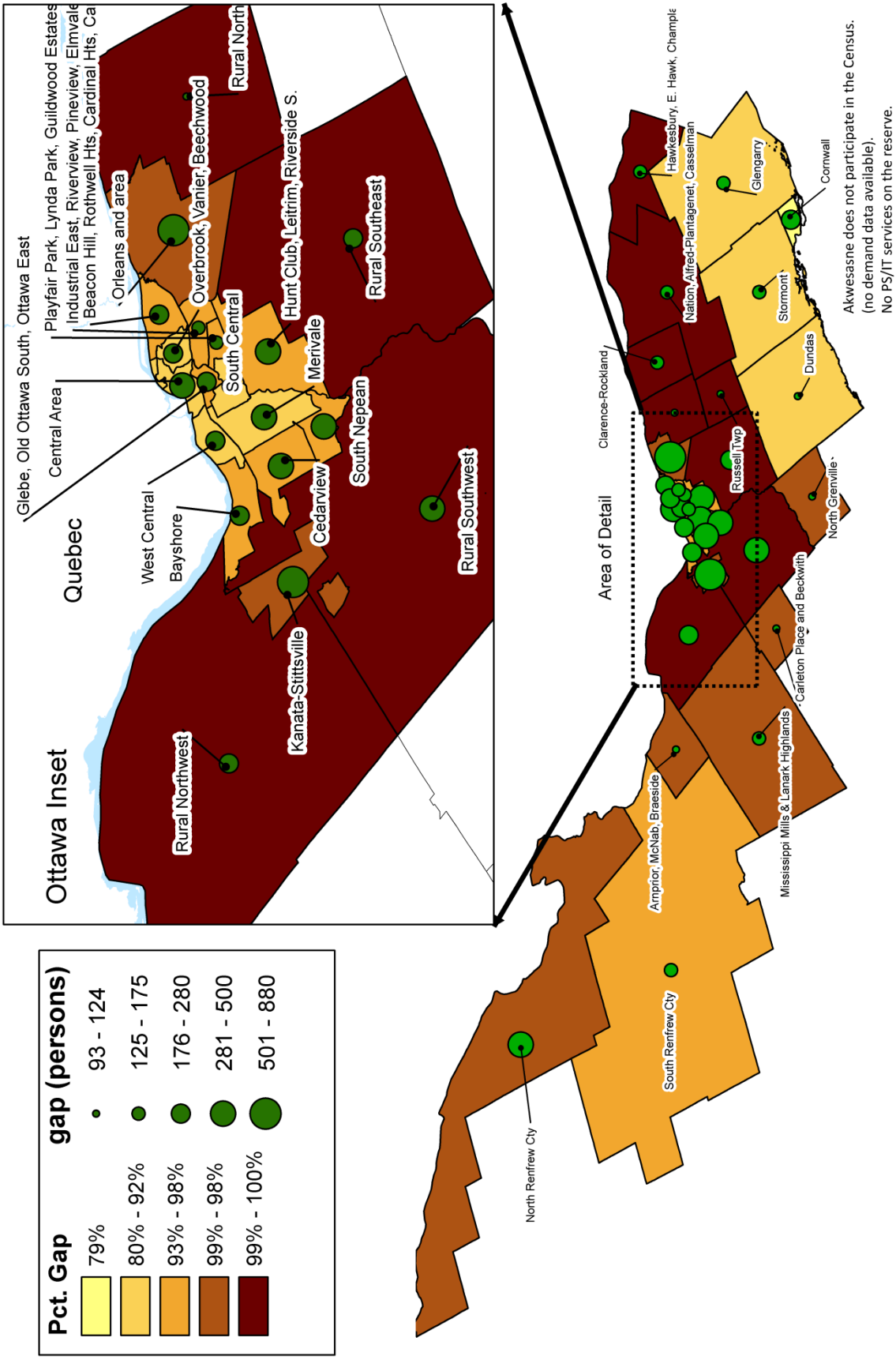
## Personal Support/ Independence Training Hours of Care



# Personal Support and Independence Training Service Providers and Service Catchments



# Personal Support & Independence Training: Supply/Demand Analysis



Supply of adult day program spaces allocated to 33 areas based on provider catchment areas. Demand based on research-established proportions of the population with disabilities 0.7% for Ontario based on Canadian Census of Disability, adjusted based on average socioeconomic status in the area ('material deprivation index' per Ontario Marginalization Index). Gap= supply - adjusted demand. Percent gap = gap/adjusted demand.

## Adult Day Programs

### Functional Centre – 72 5 82 20 – Day Services

OHRS DEFINITION	<p>An integrated support service which provides supervised programming in a group setting for service recipients who require close monitoring and assistance with personal activities (e.g. hygiene, dressing, etc.) The service recipients include the frail and elderly and those with Alzheimer disease or related disorders, or physically impaired individuals who are relatively independent and can manage certain personal activities. Individuals may attend this service for five to twelve hours on average for a fee. This service assists the participants to achieve and maintain their maximum level of functioning, to prevent early or inappropriate institutionalization and provides respite and information to their significant others. Components of the service include planned social and recreational activities, meals, assistance with the activities of daily living and minor health care assistance; e.g. monitoring essential medications.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>• Direct employee compensation, e.g. attendant, supervision</li> <li>• Supplies for social or other activities, e.g. fees for guest speakers</li> <li>• Cost of food, if meals are provided</li> <li>• Service recipient fees, where applicable</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>• Individuals receiving service in the Personal Support/Independence Training Functional Centre that attend living skills related sessions provided in the Day Services Functional Centre</li> <li>• Volunteer compensation</li> <li>• Individuals and/or CSS clients from other Functional Centres that happen to “sit in” or “drop by” to attend some programs in the Day Services</li> </ul>		
NUMBER OF HSPs	25	LEAD HSP(s)	Nil
CLIENTS SERVED	1,975	UNITS OF SERVICE	65,307 attendance days
LHIN FUNDING	\$5,373,964	PROPORTION OF TOTAL LHIN FUNDING	8.9%
<p><b>Notable Exceptions:</b></p> <ul style="list-style-type: none"> <li>○ Day Services are provided by Carefor in the Eastern Counties and in Ottawa. The number of Health Service Providers increases to 26 if Carefor is divided per region. As well, in 2013-14, Western Ottawa Resource Centre accounted not only for its Adult Day Programs but also for those provided by Harmer House. If these 2 were to be separated the total number of Health Service Providers would increase to 27. Effective fiscal year 2014-15, Carefor – Ottawa accounts for Harmer House.</li> <li>○ The Vista Centre also provides Day Services to people with Acquired Brain Injuries, a client group which is outside of the scope of this document.</li> <li>○ Some data are not available for Rural Ottawa South Support Services.</li> <li>○ Glengarry Inter-Agency Group Inc. reports, as required, their home maintenance program under this Functional Centre. The number of individuals served and the units of service reported here represent the agency's Days Services statistics only.</li> </ul>			



## Program Description

### Overview

Of the 40 Adult Day Programs offered across Champlain, two are offered on weekends and the remainder occur throughout the work week. All provide a range of social, recreational, and personal support services. In many cases, medication reminders, meal assistance, and assistance with personal hygiene and transfers are also provided. Programming is based on the specific needs of the client groups being served.

To be eligible for an Adult Day Program a person must meet all of the following criteria:

- Be insured under the Health and Insurance Act of Ontario
- Be 18 years of age or older
- Require service as a result of a physical disability, an illness, a diminished physical capacity to carry out activities necessary to live independently, a cognitive impairment, or an acquired brain injury
- Reside in Champlain
- Present no serious risk to staff or volunteers
- Have care requirements which do not exceed the programs environmental or physical resources including staff expertise;
- Be willing and able to participate<sup>8</sup>

### Background

Adult Day Programs have existed in Champlain since the 1980s and are an important component of the service delivery continuum. There have been several recent initiatives to improve access for clients, including but not limited to the creation of an updated program inventory, a common intake and referral form, and a common waitlist and referral process.

### Current State

[Appendix C](#) provides a fulsome list of all the Health Service Providers that offer LHIN-funded Adult Day Programs, each site, and the availability of Personal Support Services in the program. In 2014-15, Carefor Eastern Counties received funding to provide Palliative Day Services across the Eastern Counties. It is collaborating with Dundas County Hospice do so, and is expected to begin implementation in 2015.

### Current and Planned Initiatives

Health Service Providers continue to encourage potential clients and families to become aware of the value of Adult Day Programs. Regionally, there is ongoing engagement with community partners to implement services to better meet the needs of clients with dementia, including planning to address issues of transportation. Recommendations from the Adult Day Program Coordinated Access Project are detailed in [Appendix D](#).

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<sup>8</sup> MOHLTC, *Ontario Healthcare Reporting Standards CSS*, Chapter 10, March 2014.



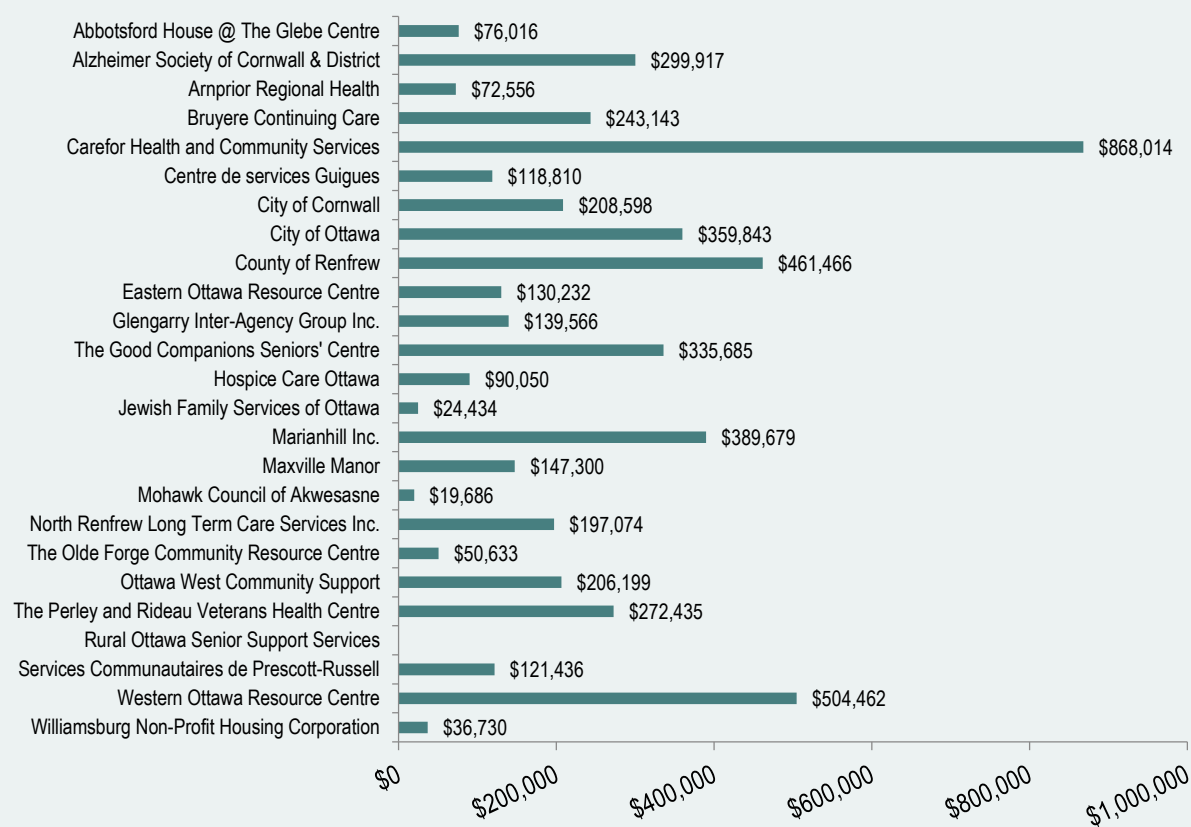
## Program Cost

COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.00	\$ 16.00	\$ 17.00	\$ 30.00
COST PER SERVICE			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 27.07	\$ 88.34	\$ 88.39	\$ 187.24

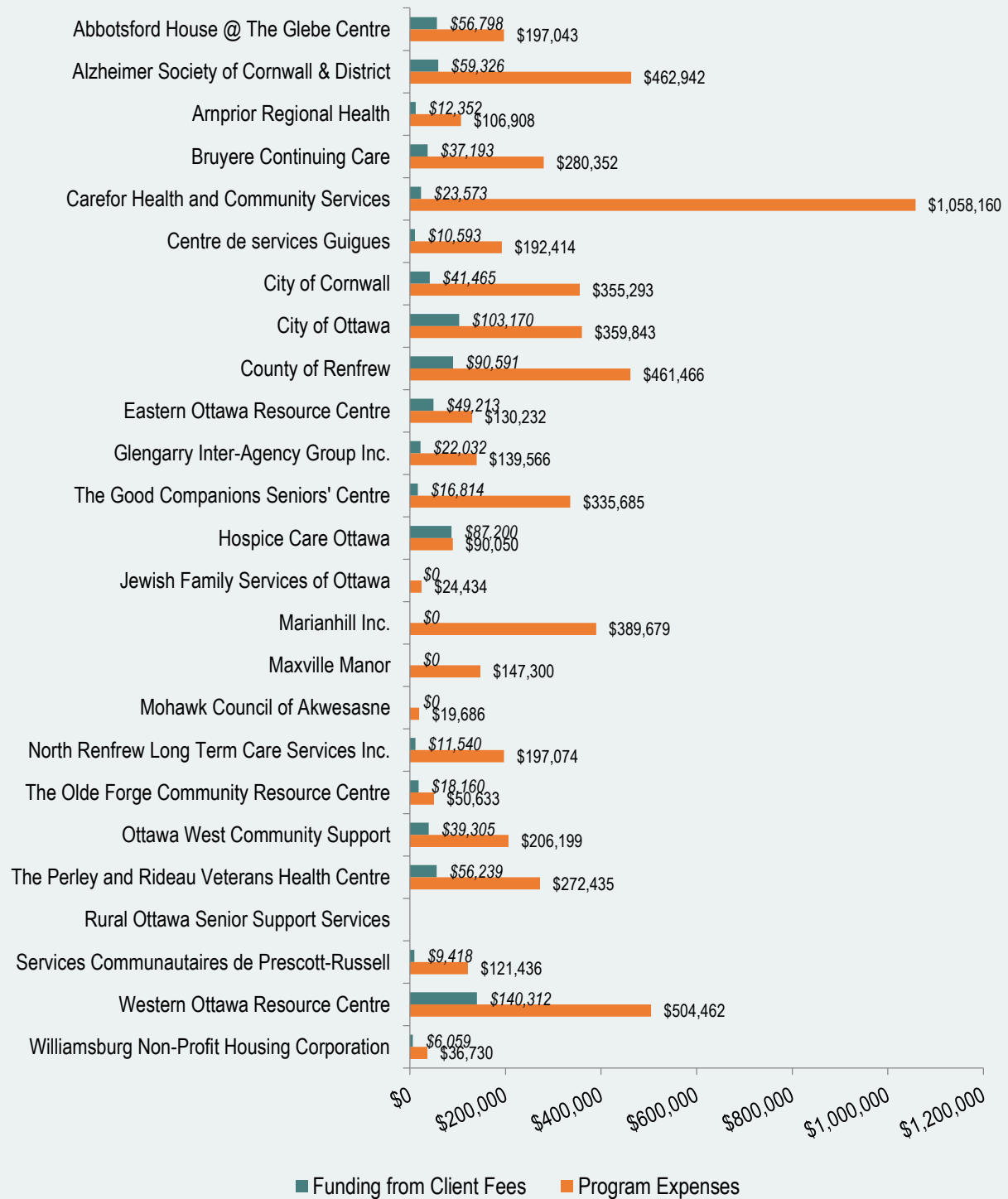
### **Note:**

- The cost of client co-payment represents the fee charged to the client participate in a program. It does not account for the transportation fee charged by 16 of 25 Health Service Providers.
- The fee structure does not cover the cost of transportation especially in the rural areas.
- The data above lacks input from Rural Ottawa South Support Services as their data were not made available.
- The cost per service was estimated using the annual program expense divided by the total annual service units per agency

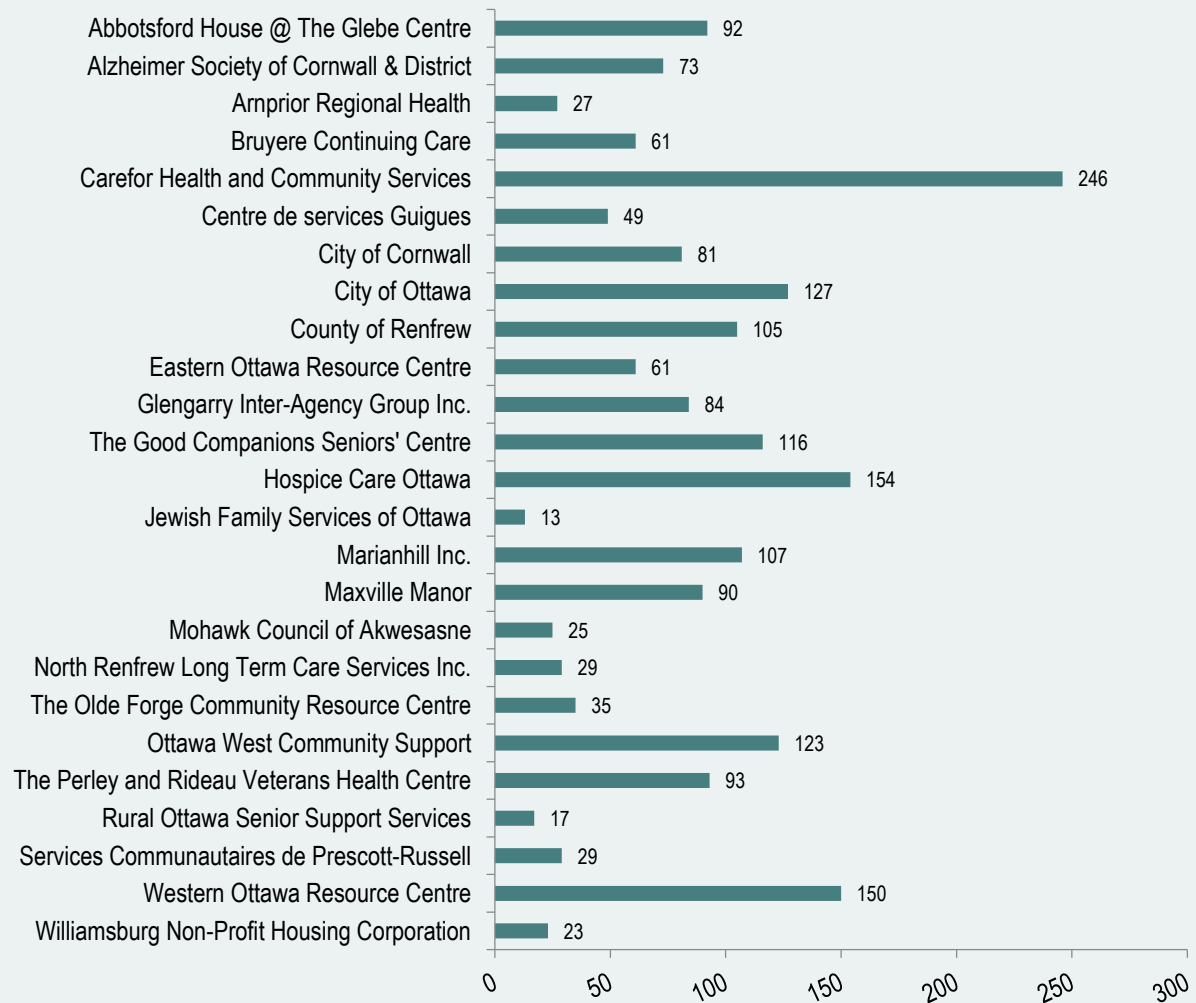
## Day Services LHIN Funding



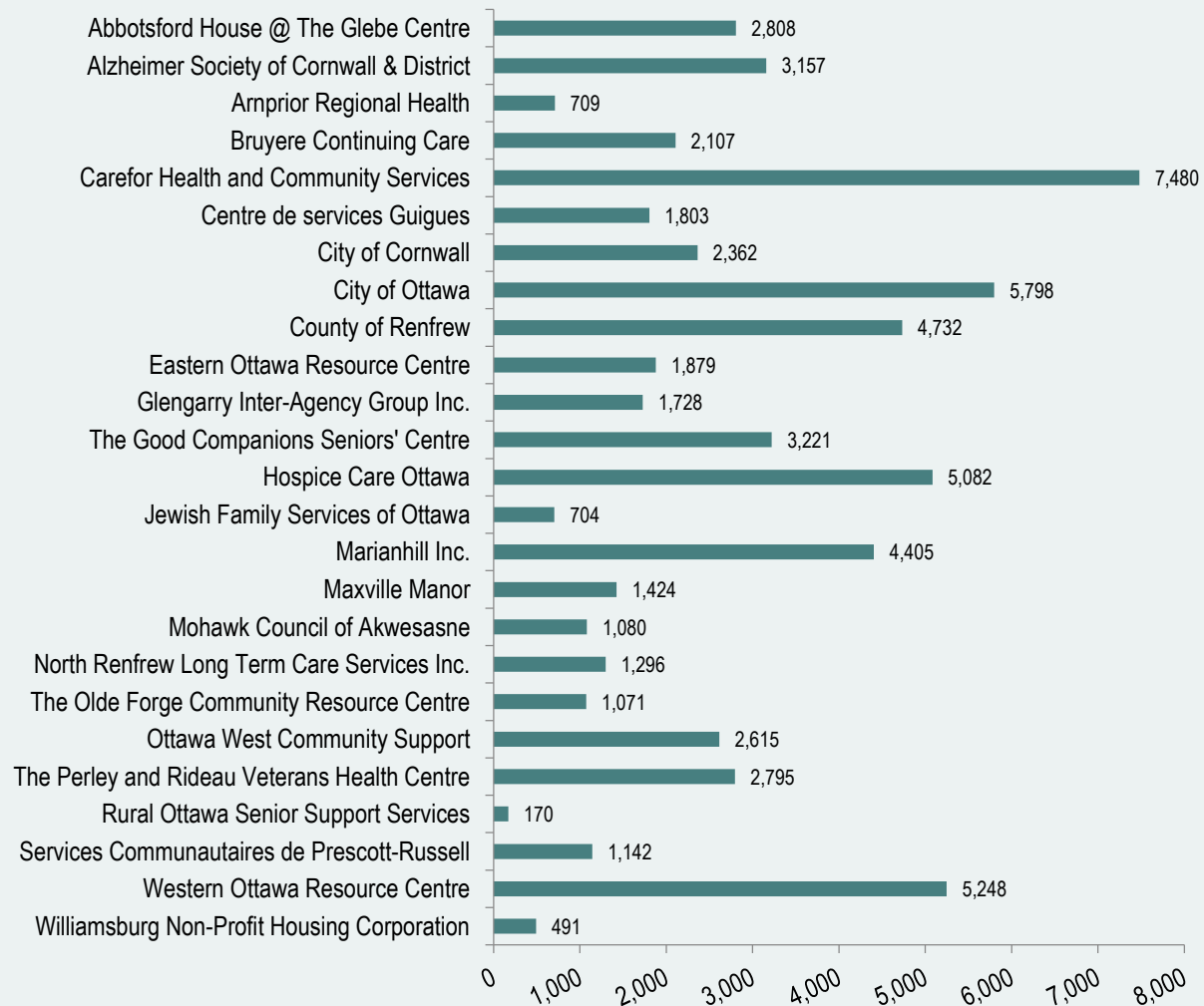
## Day Services Expenses and Client Funding



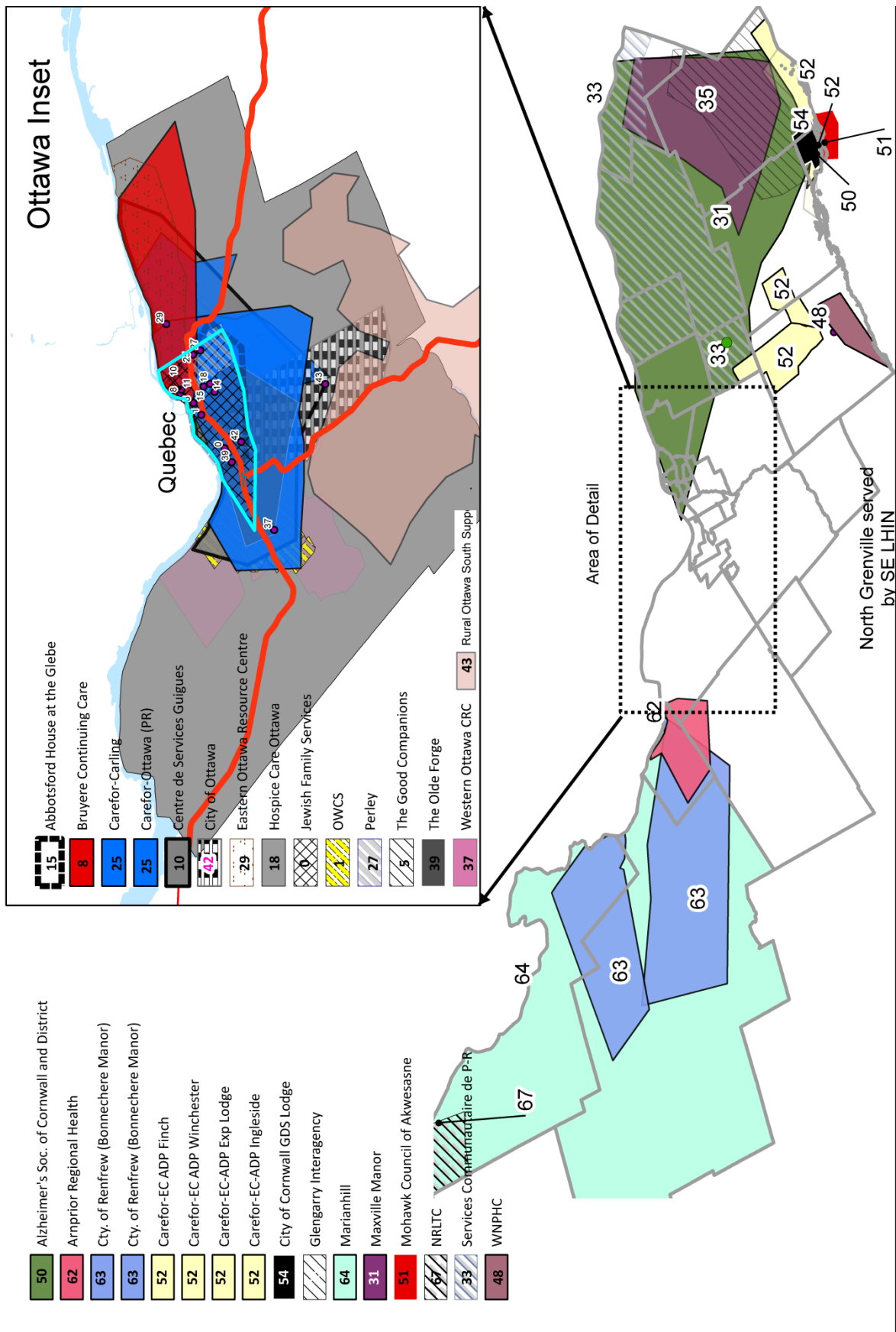
## Day Services Clients Served



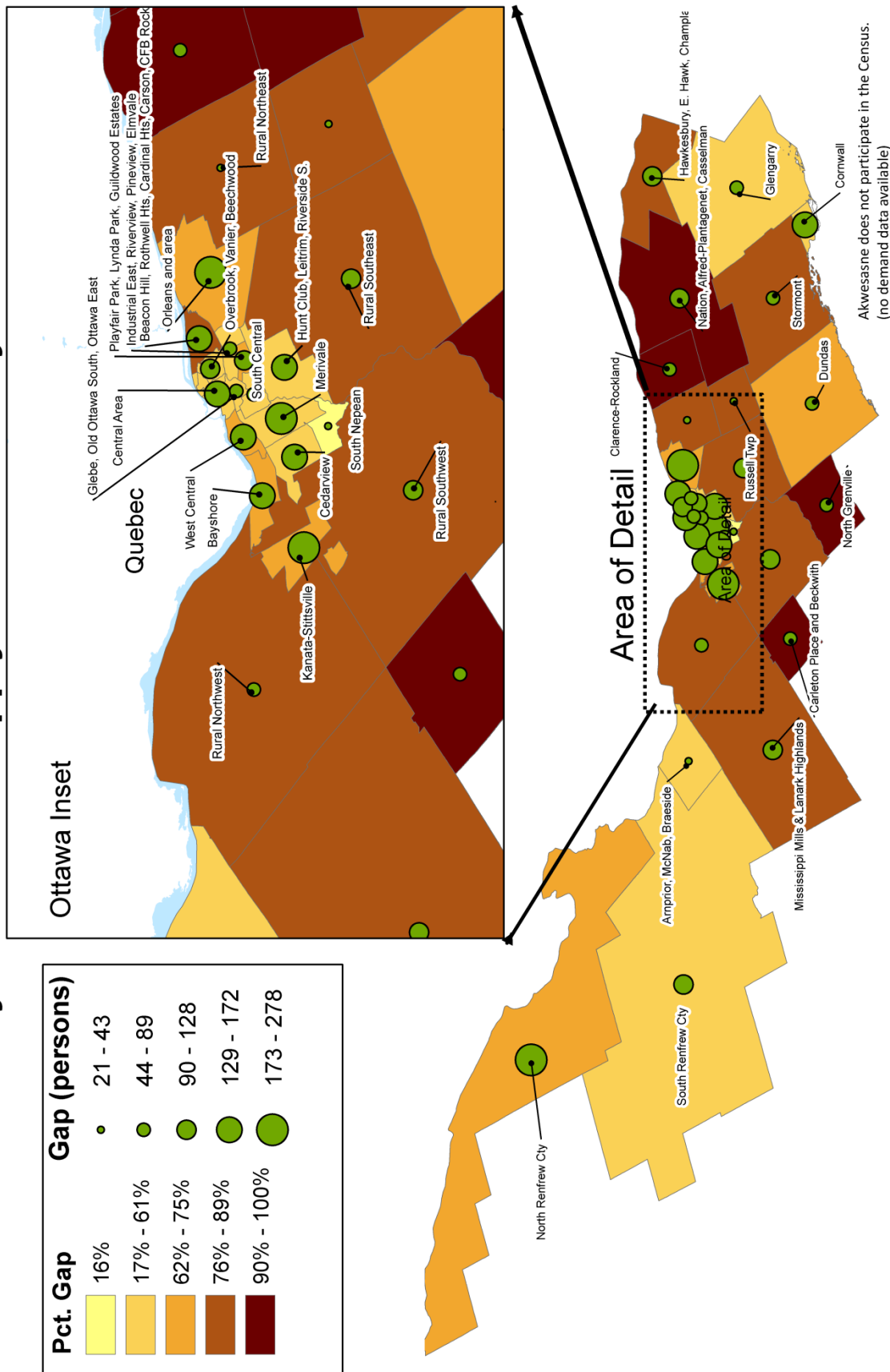
## Day Services Number of Sessions



# Adult Day Program Sites & Service Catchments



# Adult Day Services: Supply/Demand Analysis



Supply of adult day program spaces allocated to 33 areas based on provider catchment areas. Demand based on research-established proportions of the population aged 75+ (2006 census and projected forward to 2014), adjusted based on average socioeconomic status in the area ('material deprivation index' per Ontario Marginalization Index). Gap = supply - adjusted demand. Percent Gap = gap/adjusted demand.

## Respite

### Functional Centre – 72 5 82 34 – Respite

OHRS DEFINITION	<p>The provision of short or long-term significant others relief within service maximums and available resources through a Personal Support Worker. The service may include homemaking, some personal care, light housekeeping, attendant care, monitoring, supervision, and/or activation.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>Employee compensation for providing direct services – homemaking and respite workers</li> <li>Coordination costs - direct staff compensation</li> <li>Transportation costs (e.g. fuel, public transit costs, gas, and mileage)</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>Volunteer compensation</li> </ul>		
NUMBER OF HSPs	10	LEAD HSP(s)	Nil
CLIENTS SERVED	1,469	UNITS OF SERVICE	126,860 hours of care
LHIN FUNDING	\$3,060,429	PROPORTION OF TOTAL LHIN FUNDING	5.1%
<p><b><u>Notable Exceptions:</u></b></p> <ul style="list-style-type: none"> <li>The Champlain CCAC received \$516,625 to provide a Mediation Program which is accounted for under this Functional Centre. Of the total number of clients, 135 were clients of the CCAC and reported 10,868 staff hours.</li> <li>Crisis beds available through Carefor – Eastern Counties are also accounted for under this Functional Centre. 27 clients accessed the crisis beds and received a total of 8,730 hours of care in 2013-14.</li> <li>North Renfrew Long-Term Care accounts for one short-stay Long-Term Care bed and 11 long-stay Long-Term Care beds under this Functional Centre. 29 clients received 13,961 hours of care in these setting in 2013-14.</li> <li>Some data are not available for Rural Ottawa South Support Services.</li> </ul>			

## Program Description

### Overview

Respite services are integral to the care and support of people in their homes. Personal care is provided to clients who are unable to do so independently and thereby provide relief to their caregiver. Respite services are provided in the client's home.

The Respite program in Champlain has multiple objectives:

- To provide care to clients, including personal care and bathing
- To reduce client anxiety about isolation
- To reduce the client's risk of injury
- To prevent premature institutionalization
- To prevent unnecessary hospitalization

Standardized assessments are completed to decide a person's eligibility. This is used to define the level of personal care or respite needed. Once that determination is made, the service is arranged.

### Background

For over 20 years, most Respite services in Champlain were available and delivered on a contractual basis through a brokered model of services delivery. Prior to the 1990s, there were very few employee models of Respite services delivered by Health Service Providers in Champlain. In Stormont, Dundas, and Glengarry, Respite services were piloted, established, and expanded as part the [Community Residential](#)

[Alternatives to Institutional Care](#) project in response to the area's high percentage of seniors. This model, developed in the Stormont, Dundas, and Glengarry area, was adopted in Renfrew County shortly thereafter. The services were provided to clients for a fee and reported under this Functional Centre.

In 2012, seven Health Service Providers across Champlain received new annualized base funding to support the expansion of an employee model of Respite care with standardized co-payments for clients.

### Current State

Since 2012, a group of seven Health Service Providers provide Respite to eligible clients at a subsidized rate of \$9.00 per hour. These agencies are listed in the table below.

The Mohawk Council of Akwesasne provides Respite in the tri-district area of Akwesasne and there is no fee for service.

### Current and Planned Initiatives

Health Service Providers are currently engaged in providing support to light needs clients transitioned from the Champlain CCAC.

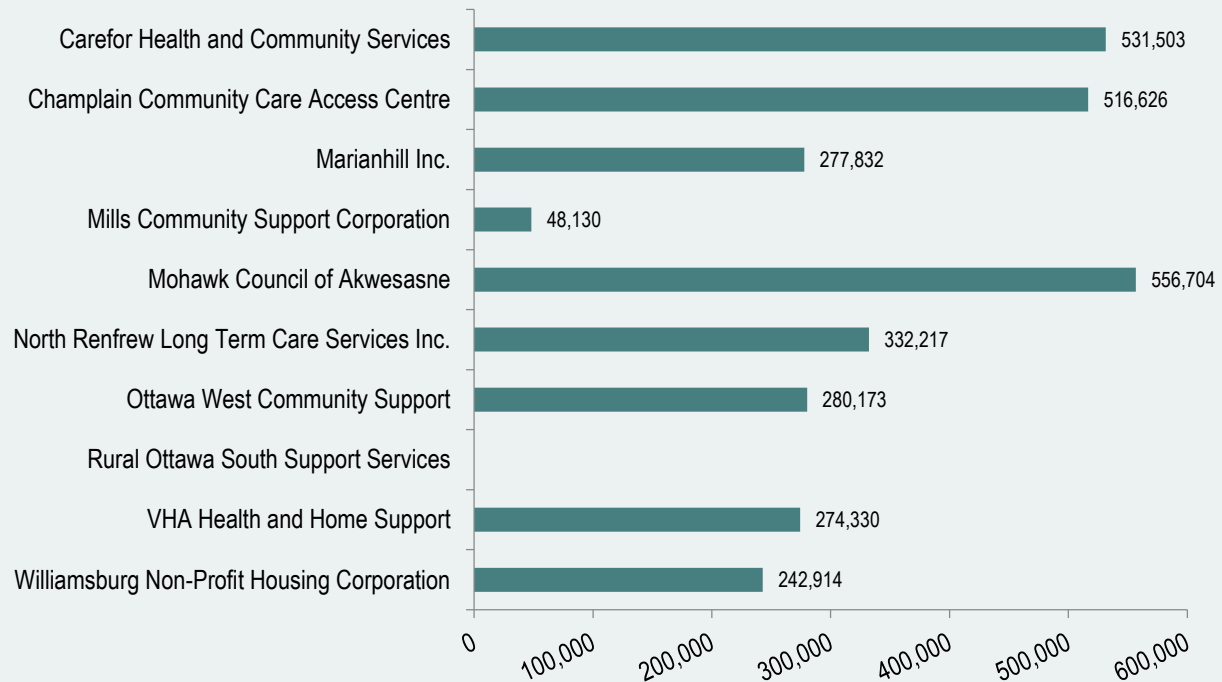
Health Service Provider	Catchment
Carefor Health and Community Services	Stormont, North Dundas, Glengarry, Prescott, Russell
Marianhill Inc.	Renfrew County
Mills Community Support Corporation	North Lanark
Ottawa West Community Support	Ottawa
VHA Health and Home Support	Ottawa
Rural Ottawa South Support Services	Rural Ottawa South and Kemptville areas
Williamsburg Non Profit Housing Corporation	South Dundas



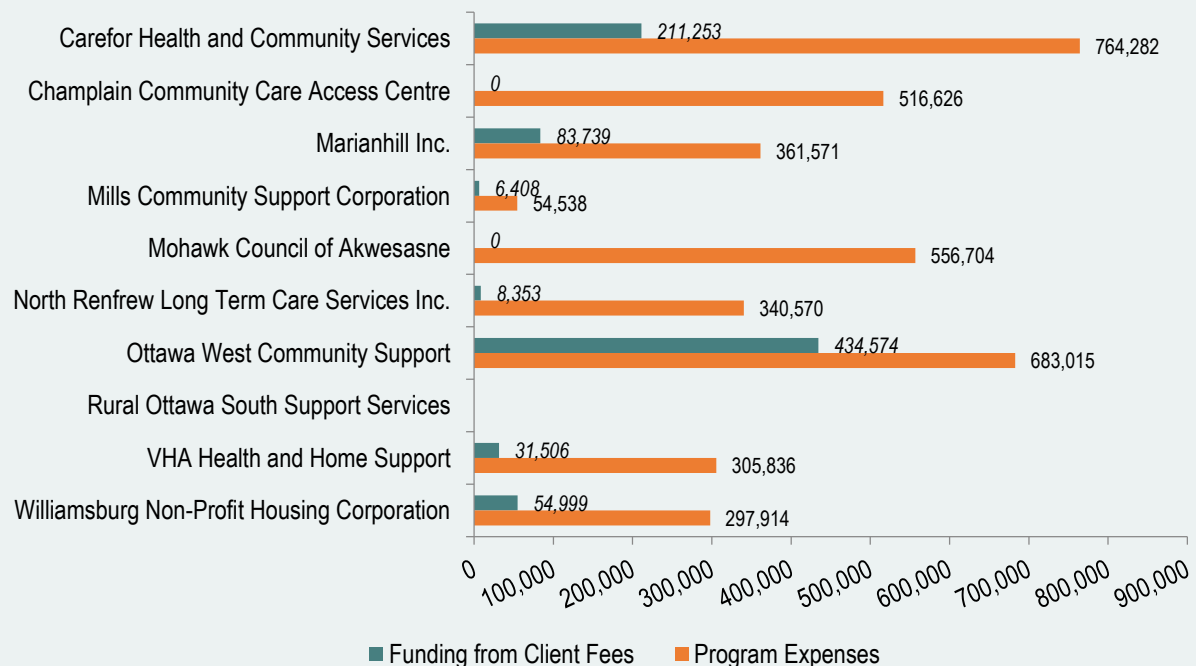
## Program Cost

COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.00	\$ 7.00/hour	\$ 9.00/hour	\$ 21.00/hour
COST PER SERVICE			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 8.84/hour	\$ 35.35/hour	\$ 29.16/hour	\$ 65.48/hour
<b>Notes:</b> <ul style="list-style-type: none"> <li>The co-payment considers both the subsidized and non-subsidized rates for service. With the exception of the CCAC, Mohawk Council, and North Renfrew Long Term Care, the subsidized rate for Respite is between \$9.00/hr for up to 15 hours per week. Some Health Service Providers have a non-subsidized fee-for-service care ranging from \$9.00 to \$21.00 per hour.</li> <li>The cost per service was estimated using the annual program expense divided by the total annual service units per agency</li> <li>The above-mentioned includes the data related to the CCAC Mediation Program which does not account for direct hours of care.</li> <li>Data from Rural Ottawa South Support Services are not included as they were not made available.</li> <li>The Long-Term Care beds provided by the North Renfrew Long Term Care charge a per diem of \$36.45 for the single short-term Long-Term Care bed and no fee for the 11 long-stay Long-Term Care beds.</li> <li>The table below represents the programs costs without the data from the Champlain CCAC Mediation Program and the North Renfrew Long Term Care short term and long term stay beds. It also represents the subsidized fee for service of \$9.00 per hour.</li> </ul>			
COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.00	\$ 7.88/hour	\$ 9.00/hour	\$ 9.00/hour
COST PER SERVICE (LHIN DESIGNATED)			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 32.74/hour	\$ 32.74/hour	\$ 32.74/hour	\$32.74/hour

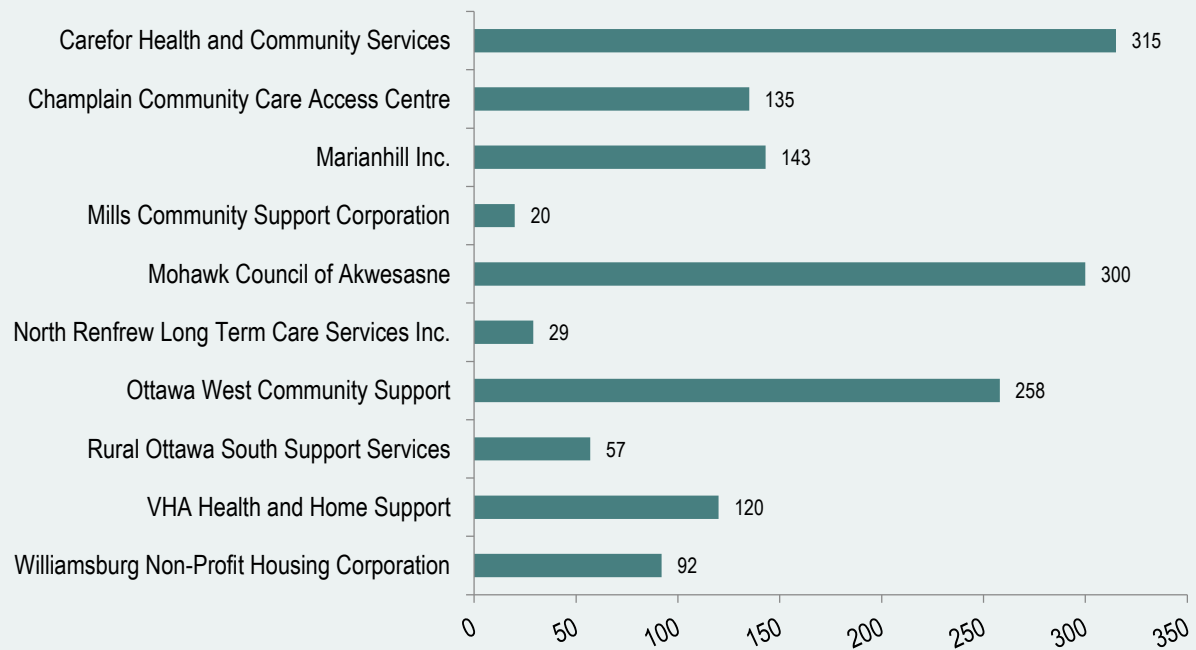
## Respite LHIN Funding



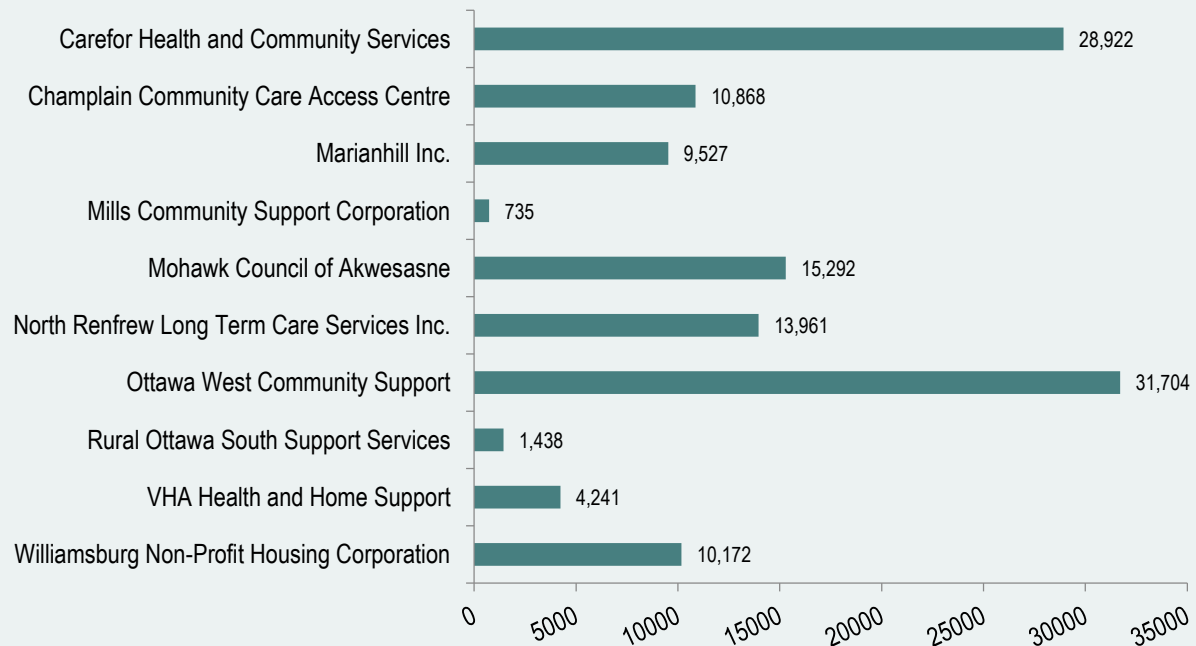
## Respite Expenses and Client Funding



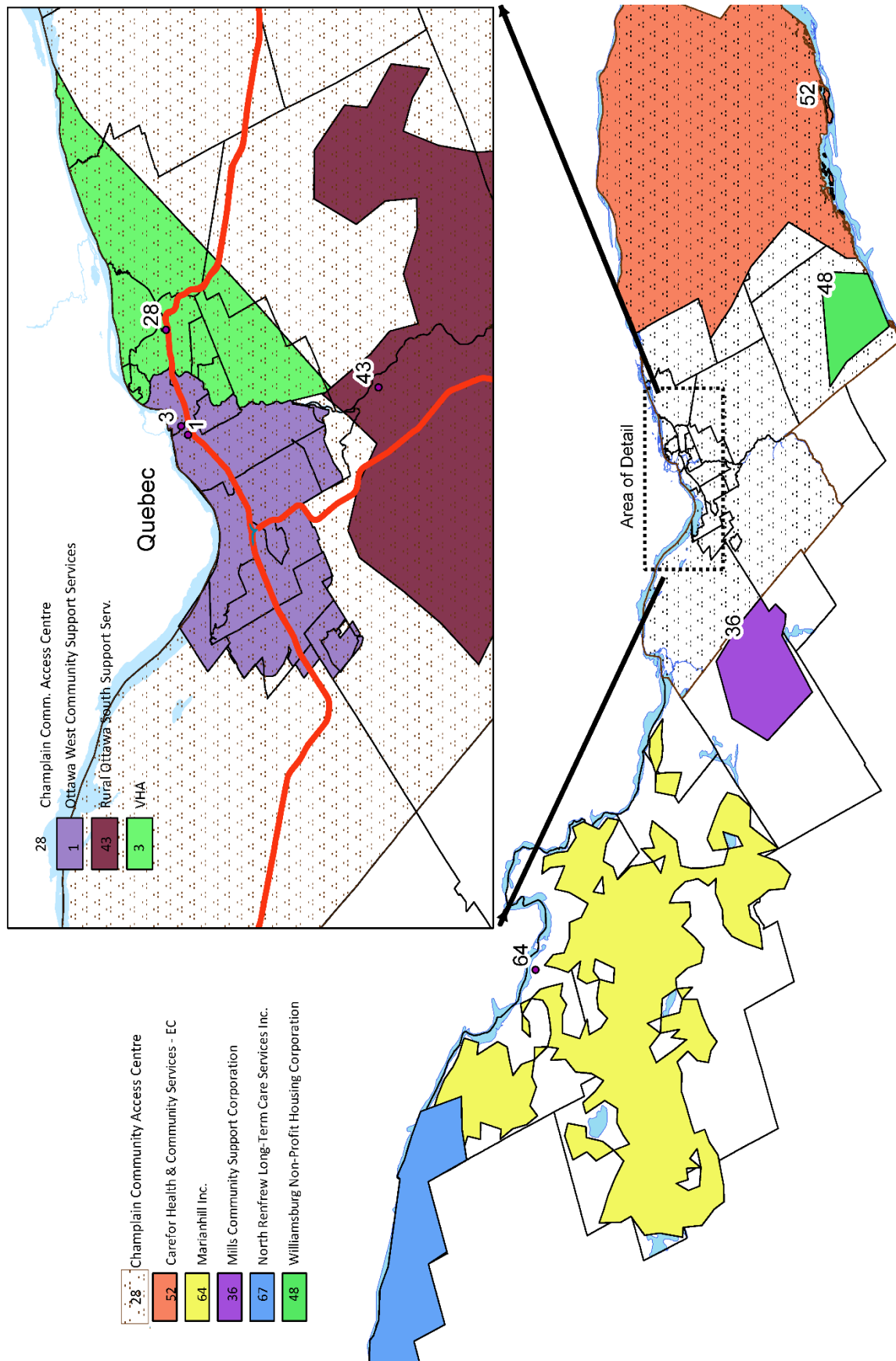
## Respite Clients Served



## Respite Hours of Care

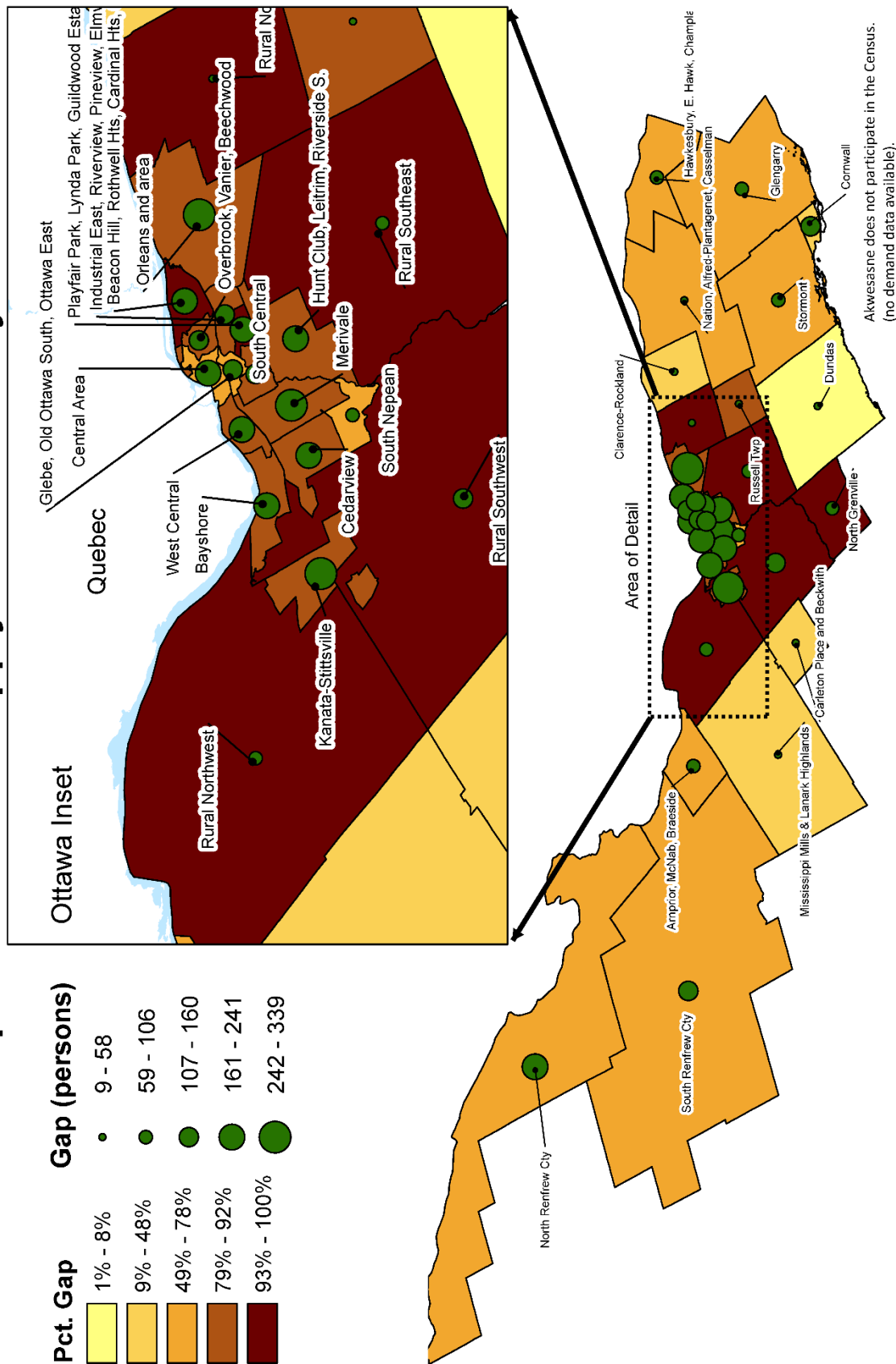


## Respite Service Sites Providers and Service Catchments



Service catchment based on postal codes of clients who used the service. CCAC service began in Eastern Counties and has recently expanded into the Ottawa area. Service catchment for CCAC not based on postal codes due to lack of data. The CCAC catchment is most likely over-represented in western Ottawa.

# Respite Services: Supply/Demand Analysis



Supply of respite services allocated to 33 areas based on provider catchment areas. Demand based on research-established proportions of the population that might require respite service (2006 Census projected to 2014) and then adjusted based on average socioeconomic status in the area ('material deprivation index' per Ontario Marginalization Index). Gap= supply – adjusted demand. Percent gap = gap/adjusted demand.

## Transportation

### Functional Centre – 72 5 82 14 – Transportation Client

OHRS DEFINITION	<p>Pertaining to activities that arrange to provide transportation to medical appointments, shopping and to various social activities and programs. Transportation is provided by the entity's staff or volunteers to eligible service recipients using private cars, entity's vehicles, and public transportation or assisting the service recipient to walk to the destination.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>· Coordination costs - direct staff compensation</li> <li>· Expenses incurred by volunteers, such as public transportation, etc. when they accompany or transport the service recipient</li> <li>· Costs related to vehicles owned and used by the providers to provide the service</li> <li>· Cost recoveries from service recipients</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>· Volunteer compensation</li> </ul> <p>Group statistics are not reported for this Functional Centre.</p>		
NUMBER OF HSPs	24	LEAD HSP(s)	Carefor-RC
CLIENTS SERVED	10,901	UNITS OF SERVICE	207,274 rides
LHIN FUNDING	\$2,733,651	PROPORTION OF LHIN FUNDING TO CSS SECTOR	4.5%
<p><b><u>Notable Exceptions:</u></b></p> <ul style="list-style-type: none"> <li>○ Transportation is provided by Carefor in all catchment areas of Champlain as part of the Going Home Program and as part of their regular CSS services in Renfrew County and in the Eastern Counties. The number of Health Service Providers increases to 26 if Carefor is divided into its three regions.</li> <li>○ Carefor is the Lead Agency for the Champlain Community Transportation Collaborative. All LHIN funded Transportation providers are included in this group.</li> <li>○ Financial data from Rural Ottawa South Support Services are not included as they were not made available.</li> </ul>			

## Program Description

### Overview

The benefits of many CSS programs cannot be realized if clients are unable to transport themselves to the site of the program. This is particularly evident, in Champlain, in rural areas and during the isolating winter months. Transportation is provided by CSS agencies though it is not direct care, to provide residents with a means of getting to health promoting activities such as medical appointments, food shopping, and day programs. Transportation and coordination is provided by CSS staff or volunteers for eligible service recipients using private cars, agency vehicles, or even by assisting the service recipient to walk to their destination.

### Background

In 2011, the [Champlain Community Transportation Collaborative](#) was formed to improve the coordination of transportation and collaboration between agencies. As part of this initiative a Microsoft SharePoint platform was developed as a vehicle to improve communication and coordination of services. The affordable non-urgent Transportation system worked towards the following goals:

- Effectively integrating and coordinating services as appropriate for each of the sub-regions of Champlain
- Implementing best practices in the provision of service
- Increasing access and satisfaction by clients using the system
- Increasing awareness and education of services available by clients, agencies, and staff
- Reducing delays in discharging clients home from acute care settings

The Champlain LHIN considered a variety of factors which influenced the decision to invest in the project:

- Twenty-four Health Service Providers were funded to provide non-urgent transportation in Champlain
- The membership of three Coalitions were assuming varying roles related to non-urgent Transportation in Ottawa, Renfrew County and Area, and the Eastern Counties
- There was a total of 600 volunteer and 30 paid drivers
- The fleet of vehicles consisted of 23 vans
- The number of rides was over 150,000 in the fiscal year 2010-11
- The types of rides provided were primarily for medical appointments, community and social activities, Day Services, and Respite
- The support to clients in need of dialysis and/or cancer treatments was minimal, despite the growing demand
- The average cost per ride ranged from between \$0.35 and \$0.45 per kilometre, and in some cases clients were paying as much as \$300 per trip
- Subsidy rates varied as did the process for acquiring subsidies
- Non-urgent Transportation was deemed a top priority by CSS Health Service Providers in Champlain in 2011-12.<sup>9</sup>

The Champlain LHIN invested \$734,000 annualized funding to address the demand, hire more drivers, and improve coordination. In addition, a one-time investment of \$124,000 was

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<sup>9</sup> Champlain LHIN, *Non-Urgent Transportation "NUT"- A proposal to enhance non-urgent transportation services delivered by CSS in Champlain*, September 2010, p. 3.

earmarked for the purchase of vehicles.<sup>10</sup> The investment aligned with Champlain LHIN priorities around increased access to Day Services, caregiver Respite, and support to people in need of dialysis and at high risk for emergency room admissions.<sup>11</sup>

A short-term plan was developed and approved for the transformation of Transportation services. Carefor Health & Community Services in Pembroke was approved as the Lead. Each sub-region of Champlain received funds to plan for local needs.

As of 2013/14, all non-urgent Transportation providers in Champlain were required by the LHIN to adopt a common information system for the coordination of Transportation services.

#### Current State

Given the nature of this service, the demand for rides continues to increase. A subsidy calculator is being piloted and is expected to be fully implemented in fiscal year 2015-2016. Health Service Providers of non-urgent Transportation

meet within each sub-region to address local concerns and issues.

The development of an interim bridge from SharePoint to CIMS-HR is underway in order to alleviate issues for Health Service Providers.

#### Current and Planned Initiatives

Pending approval, the following activities are due to occur between December 2014 and March 31, 2016 in support of the implementation of a common information system for the coordination of transportation services:

- Build and test the SharePoint bridges for the Health Service Providers
- Explore SharePoint solutions for the 2 non-CIMS-HR Health Service Providers
- Implement the Subsidy Calculator in Champlain
- Review the regional coordination function across Champlain
- Consult clients and caregivers, through at least one engagement activity per catchment, on the services provided via the Champlain Community Transportation Collaborative

#### Program Cost

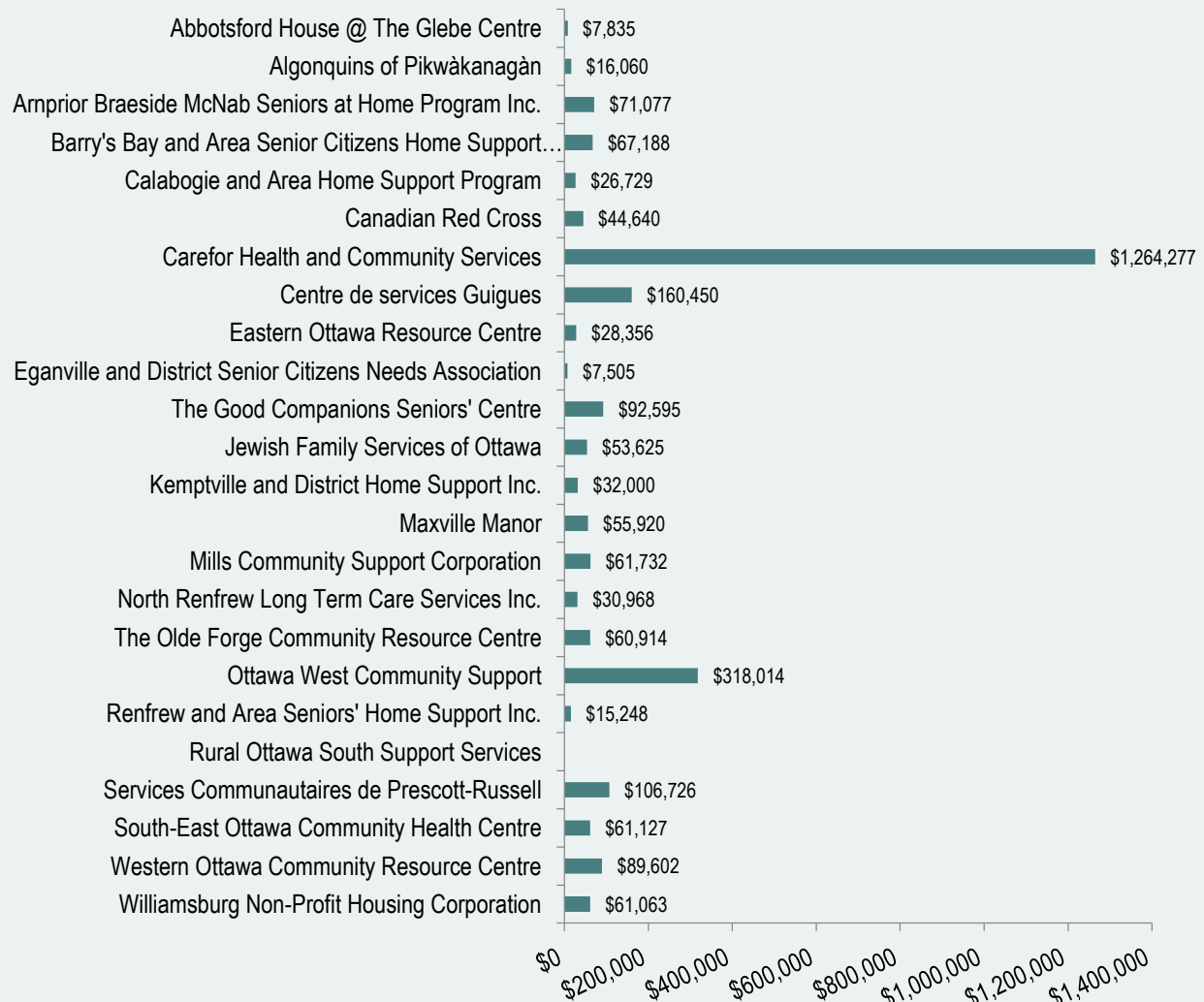
COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.40/km	\$ 0.47/km	\$ 0.43/km	\$ 0.90/km
COST PER SERVICE			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 1.33	\$ 16.13	\$ 13.17	\$ 43.40
<b>Notes:</b> <ul style="list-style-type: none"> <li>○ The co-payment is based on the per kilometre rate of 14 of the 24 providers. The other 10 have established flat rates for their catchment areas. The calculations used to arrive at each rate is unknown.</li> <li>○ The cost per service was estimated using the annual program expense divided by the annual service units.</li> <li>○ Some Health Service Providers have a range of per kilometre rates depending on the type of vehicle used or the distance travelled. In those cases, the highest per kilometre rate was used.</li> <li>○ There is no cost for rides provided by either the Going Home Program or the Aging In Place Program.</li> </ul>			

<sup>10</sup> Champlain LHIN, *Non-Urgent Transportation "NUT"- A proposal to enhance non-urgent transportation services delivered by CSS in Champlain*, September 2010, p. 7.

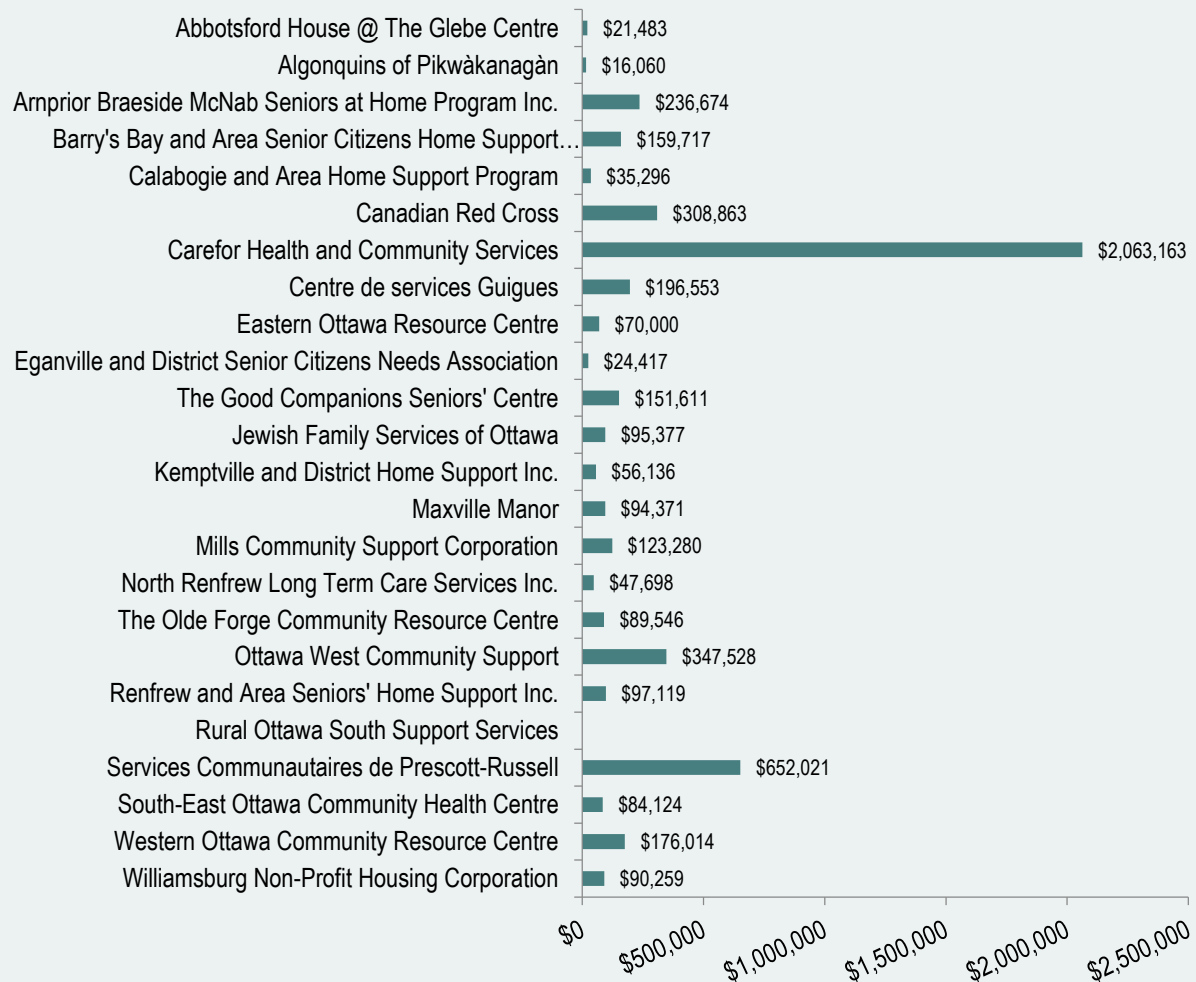
<sup>11</sup> Champlain LHIN, *Non-Urgent Transportation "NUT"- A proposal to enhance non-urgent transportation services delivered by CSS in Champlain*, September 2010, p. 8.



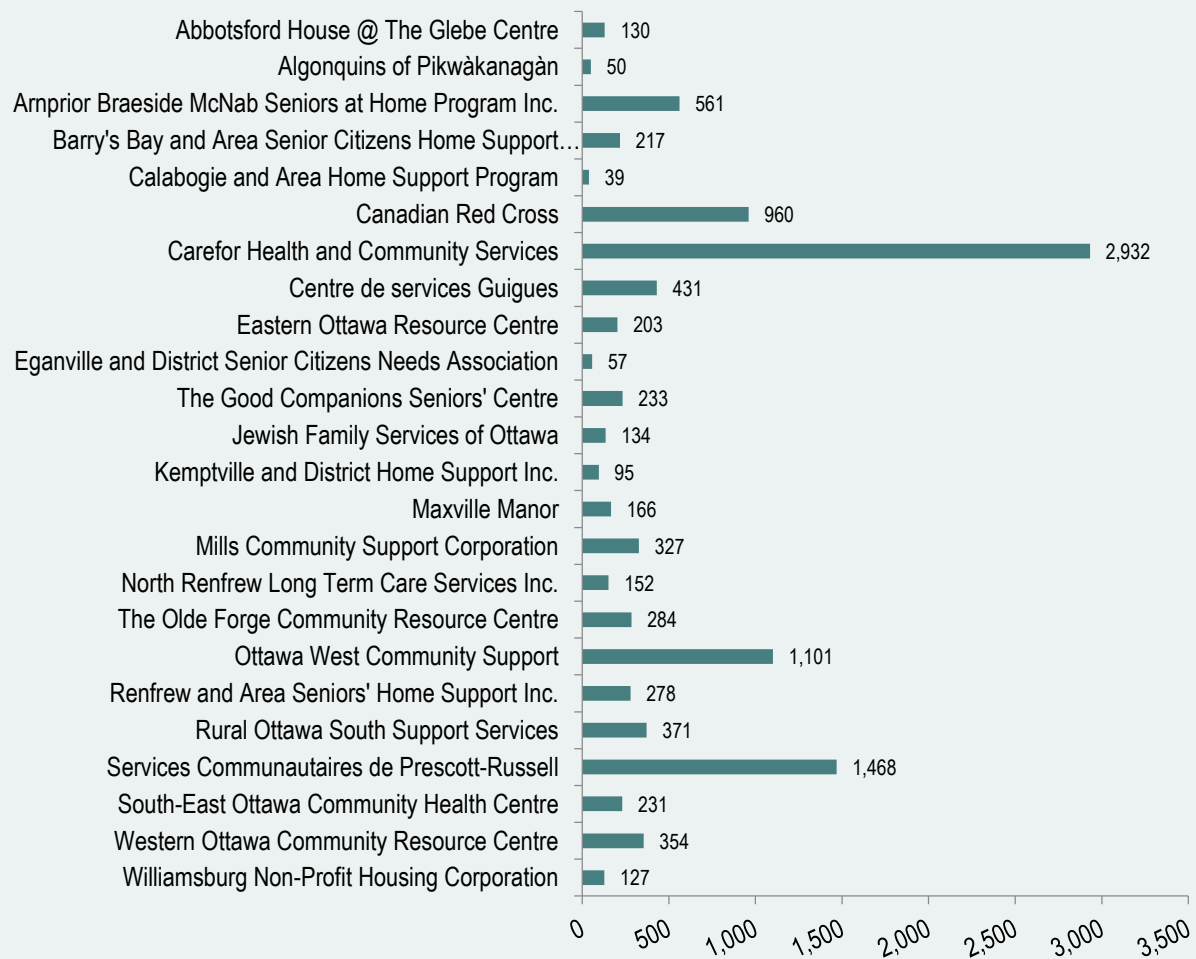
## Transportation LHIN Funding



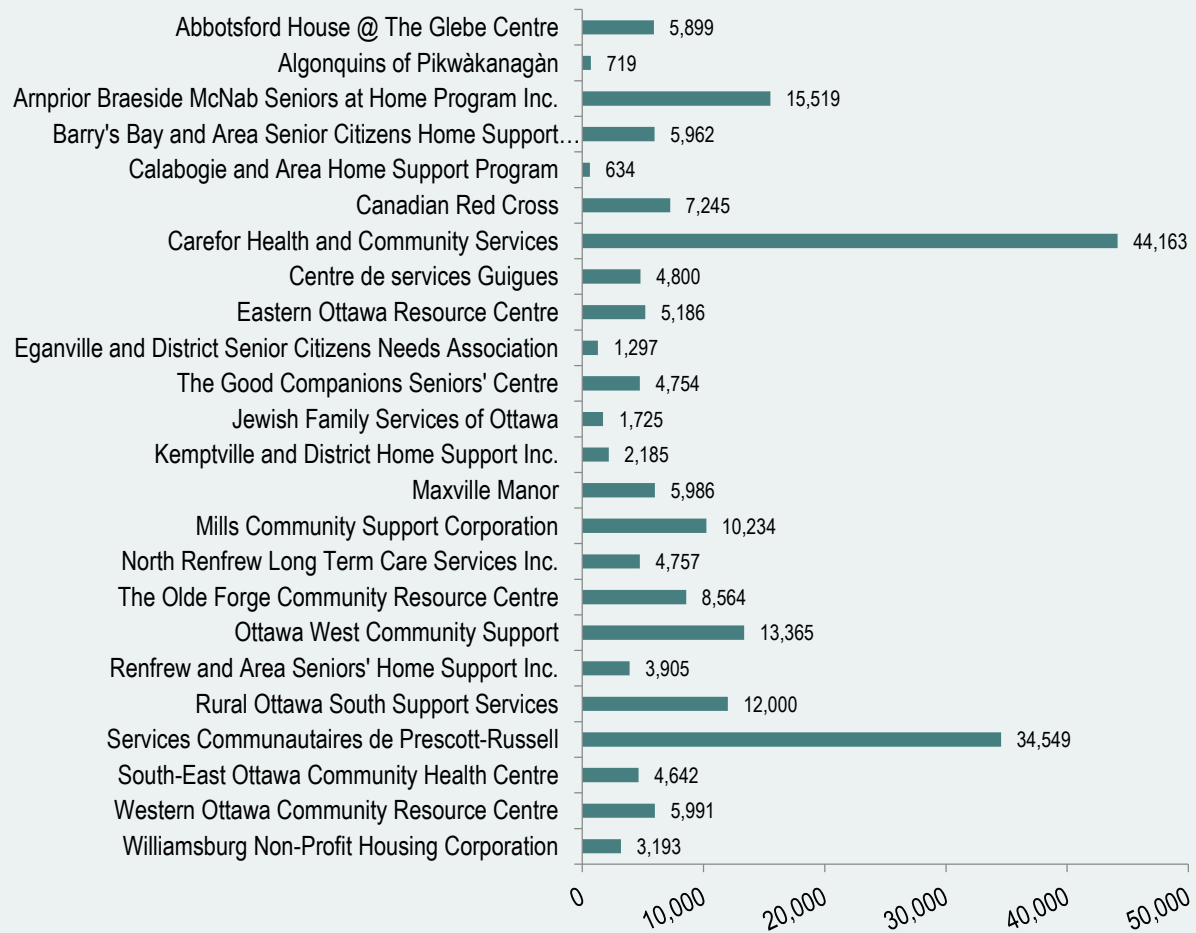
## Transportation Program Expenses



## Transportation Clients Served

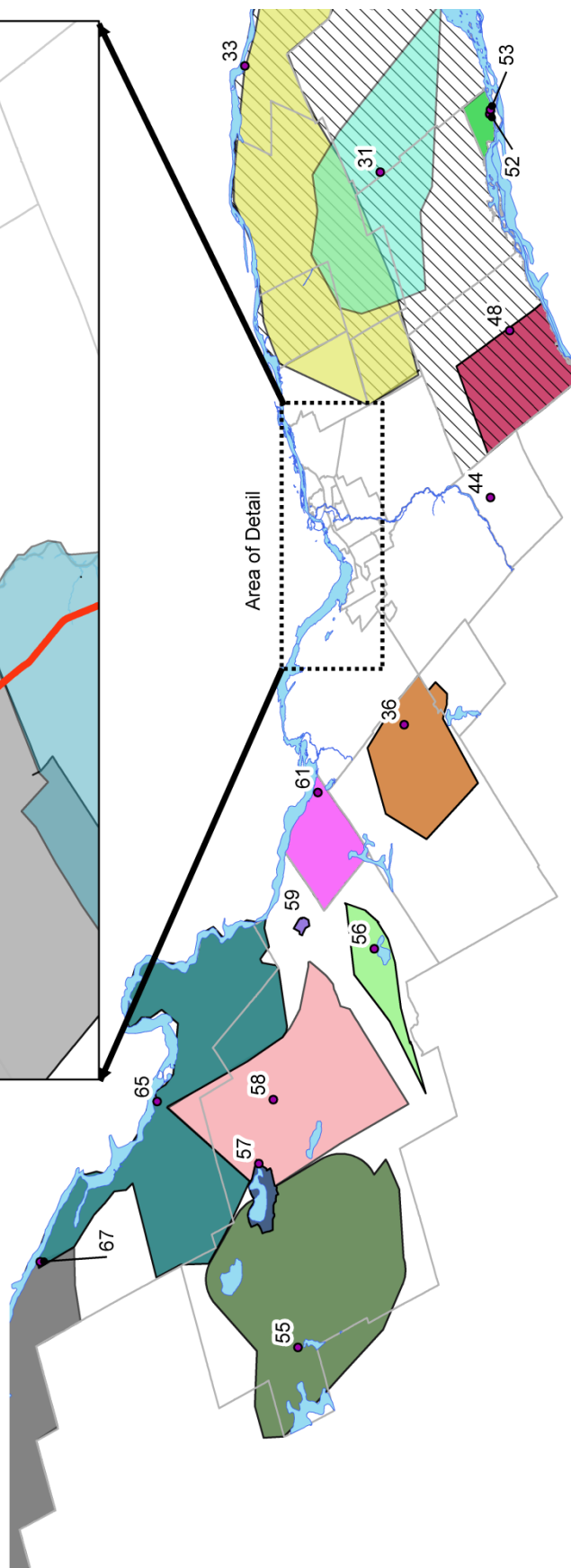
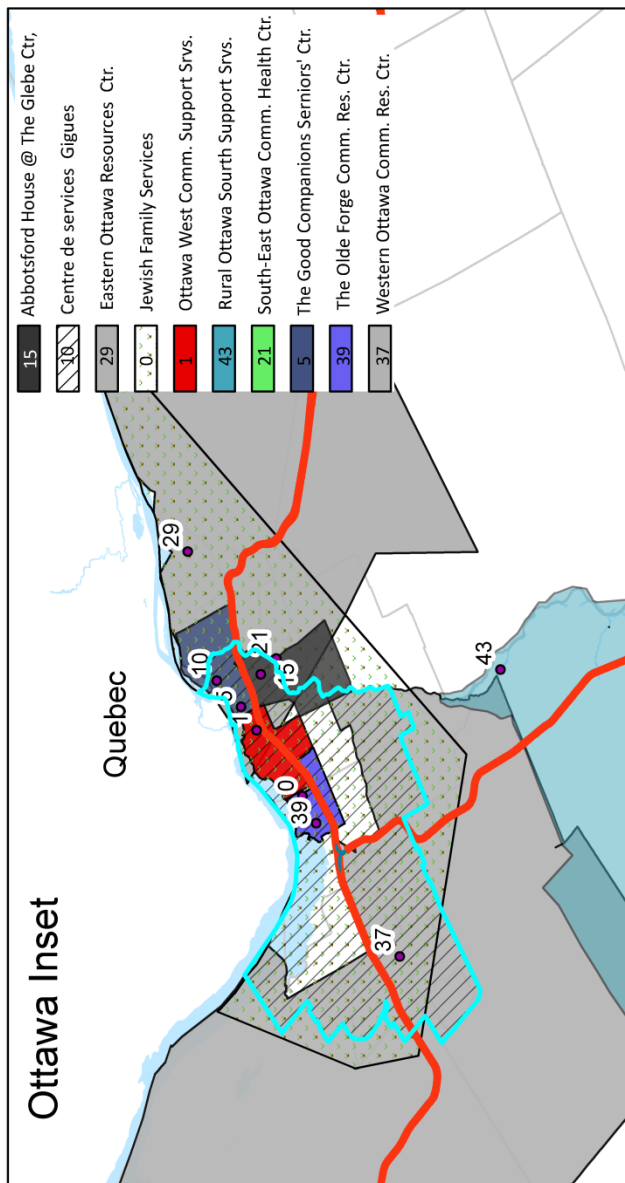


## Transportation Total Rides



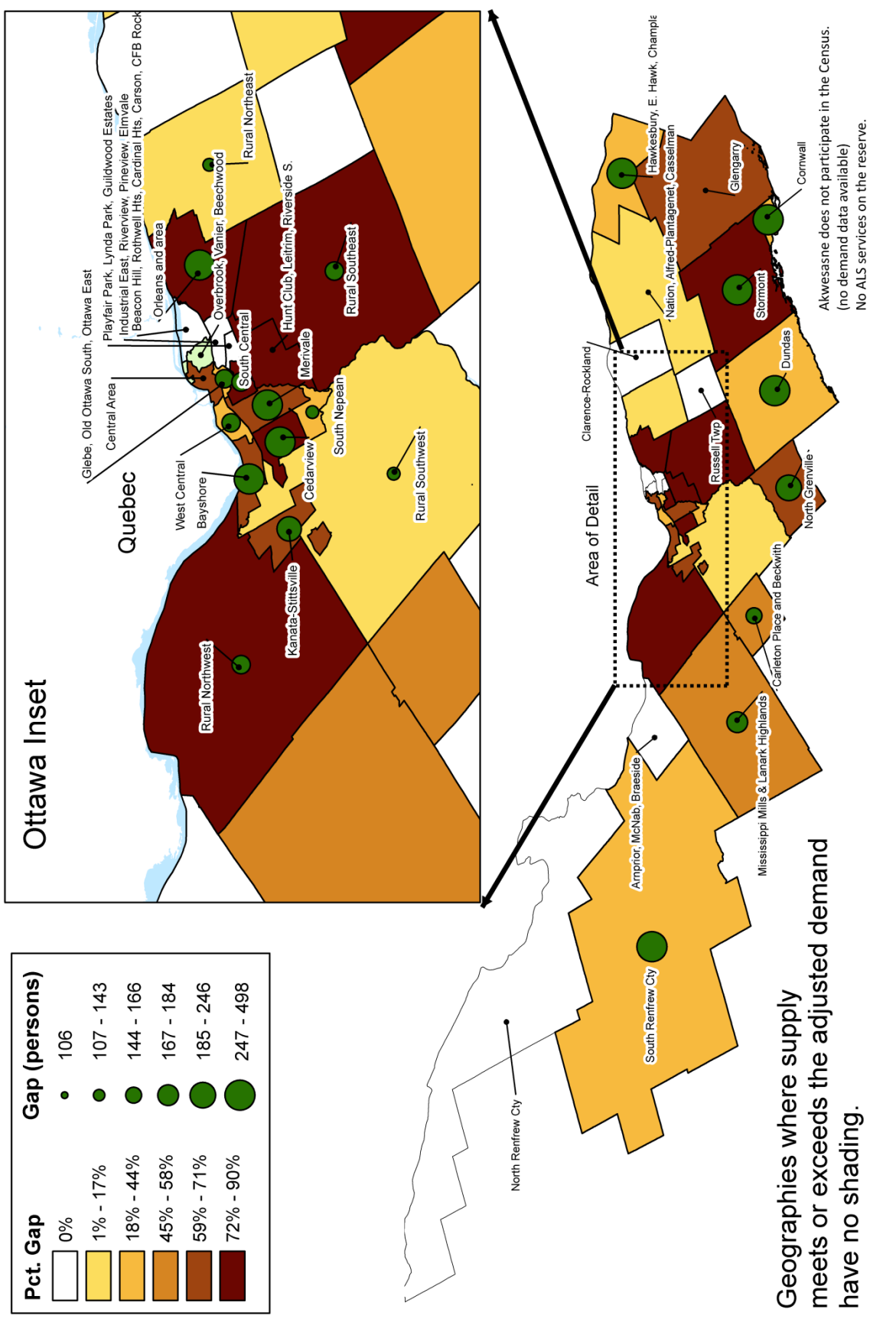
# Transportation Service Providers in Champlain. Office Locations and Service Catchments

- |    |  |
|----|--|
| 57 | Algonquins of Pikwākanagān                               |
| 61 | Arnprior, Braeside, McNab Seniors at Home Program Inc.   |
| 55 | Barry's Bay & Area Senior Citizens Home Support Services |
| 56 | Calabogie and Area Home Support Program Inc.             |
| 53 | Canadian Red Cross-Cornwall                              |
| 52 | Carefor Health & Community Services - EC                 |
| 66 | Carefor Health & Community Services, Renfrew Cty.        |
| 58 | Eganville & District Senior Citizens' Needs Association  |
| 44 | Kemptville and District Home Support Inc.                |
| 31 | Maxville Manor   |
| 36 | Mills Community Support Corporation                      |
| 67 | North Renfrew Long-Term Care Services Inc.               |
| 59 | Renfrew and Area Seniors' Home Support Inc.              |
| 33 | Services communautaires de Prescott-Russell              |
| 48 | Williamsburg Non-Profit Housing Corporation              |



Service catchment based on postal codes of clients who used the service. Overlapping catchments are indicated by shading of colors.  
May be difficult to discern boundaries in central Ottawa

# Transportation Services: Supply/Demand Analysis



## Meals Delivery

### Functional Centre – 72 5 82 10 – Meals Delivery

OHRS DEFINITION	<p>Pertaining to activities that arrange meals delivery to service recipients at their residence to meet their nutritional requirements. The meals are delivered by volunteers who may provide a regular social contact and check the health and safety of the service recipients.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>• Coordination costs - direct staff compensation</li> <li>• Meal costs</li> <li>• Client fees to assist in covering the food costs</li> <li>• Transportation costs (e.g. mileage, public transit costs, gas) – which will be reported using F. 6 23 00Travel Expense – Staff Delivery of Service Recipient Service</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>• Volunteer compensation</li> <li>• The number of meals delivered can be reported at combined or detailed level but not both.</li> </ul>		
NUMBER OF HSPs	20	LEAD HSP(s)	OWCS for AIP Carefor for GH
CLIENTS SERVED	6,830	UNITS OF SERVICE	294,574 meals
LHIN FUNDING	\$1,515,708	PROPORTION OF TOTAL LHIN FUNDING	2.5%
<p><b><u>Notable Exceptions:</u></b></p> <ul style="list-style-type: none"> <li>○ Some data are not available for Rural Ottawa South Support Services.</li> </ul>			

## Program Description

### Overview

The Meals on Wheels program delivers nutritious meals to people in order to assist them to maintain their health and independence at home. The meal is delivered by trained volunteers who provide personal contact and a safety and security check. A range of meal delivery options are available across the region of Champlain. Typically, people have access to a Hot Meal Program and/or a Frozen Meal Program.<sup>12</sup> The Hot Meal Program offers a variety of meals consisting of soup, a main dish, fresh fruit or salad, and dessert while the Frozen Meal Program offers an array of main dishes, soups, and desserts.

### Background

In Champlain, the Meals on Wheels programs have been available for over 40 years. The Champlain LHIN currently funds 20 different Health Service Providers for meals delivery.

### Current State

The table on the next page lists the 20 Health Service Providers, their meal offerings, the number of kitchens each operates, and the key challenges they faced in 2013-14.

Although they are not funded by the Champlain LHIN for meal delivery, the Renfrew Victoria Hospital does provide hot meals for delivery within the town limits of Renfrew. The same is true for the Miramichi Lodge which delivers meals within the limits of the City of Pembroke and the Town of Petawawa.

### Current and Planned Initiatives

A regional work group representing Health Service Providers funded for Meals Delivery is to be established to focus primarily on the harmonization of fees and the standardization of practices for meals delivery.

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<sup>12</sup> <http://mealsonwheels-ottawa.org/wp-content/uploads/2014/09/mow-brochure-english-web.pdf>



Health Service Provider	Meal Offerings		Number of Kitchens	Key Challenges
	Hot	Frozen		
Arnprior-Braeside-McNab Seniors At Home Program Inc.	Yes	Yes	1	lack capacity
Barry's Bay and Senior Citizens Home Support Services	Yes	Yes	1	lack capacity
Carefor – Eastern Counties	Yes	Yes	3	volunteer recruitment long travel distances
Carefor – Renfrew County	No	Yes	0	
City of Cornwall	Yes	No	1	
Eastern Ottawa Resource Centre	Yes	Yes	1	
Eganville and District Senior Citizens Needs Association	Yes	Yes	1	lack capacity
Home Support Services – Morrisburg and District	Yes	Yes	1	
Jewish Family Services Of Ottawa	Yes	Yes	1	
Kemptville and District Home Support Services Inc.	Yes	Yes	1	
Maxville Manor	Yes	Yes	1	lack capacity
Meals on Wheels/La Popote roulante	Yes	Yes	11	cost recovery, resulting in increase of fees
Mills Community Support Corporation	Yes	No	1	
Mohawk Council of Akwesasne	Yes	No	1	
North Renfrew Long Term Care Services Inc.	Yes	No	1	
Ottawa West Community Support	Yes	No	1	
Renfrew and Area Seniors' Home Support Inc.	No	Yes	1	serving clients out of town
Rural Ottawa South Support Services	Yes	Yes	2	travel distances (>100 km)
Services Communautaires de Prescott-Russell	Yes	No		
Western Ottawa Resource Centre	Yes	Yes	4	volunteer recruitment
Williamsburg Non-Profit Housing Corporation	Yes	Yes	1	volunteer recruitment

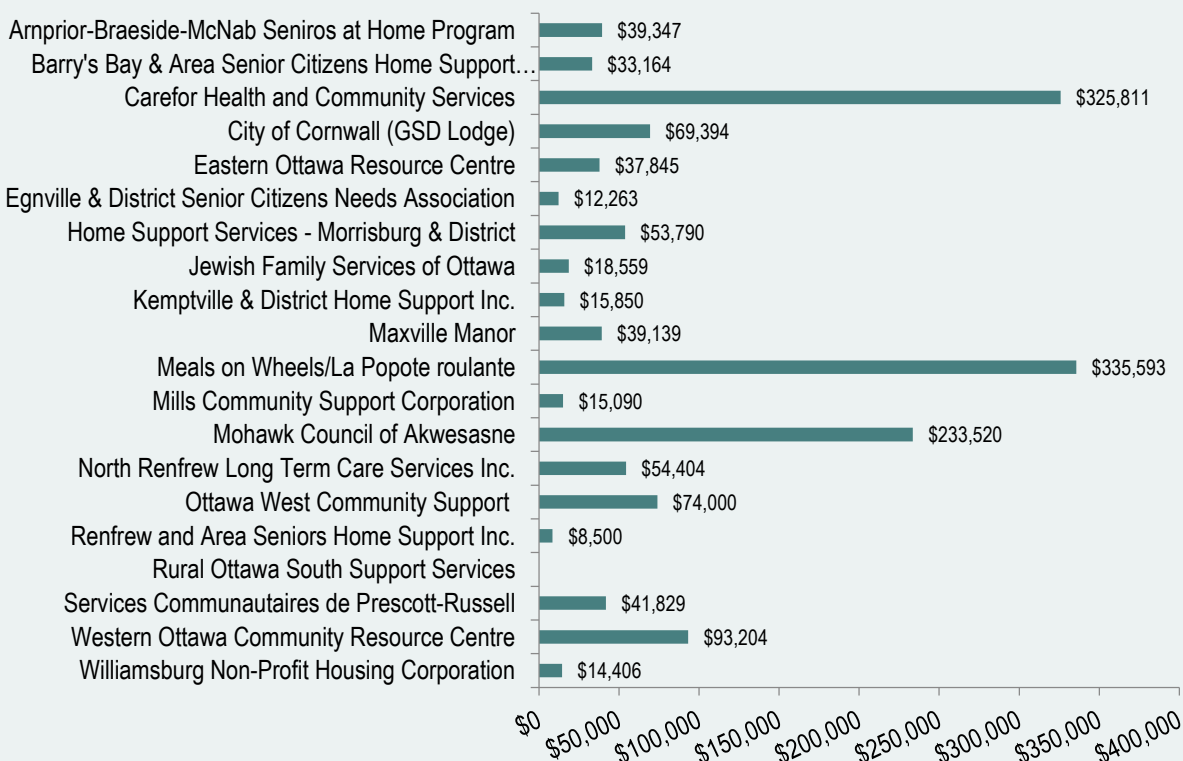
## Program Cost

COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.00	\$ 5.00	\$ 5.00	\$ 10.00
COST PER SERVICE			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 2.31	\$ 8.74	\$ 6.84	\$ 23.75

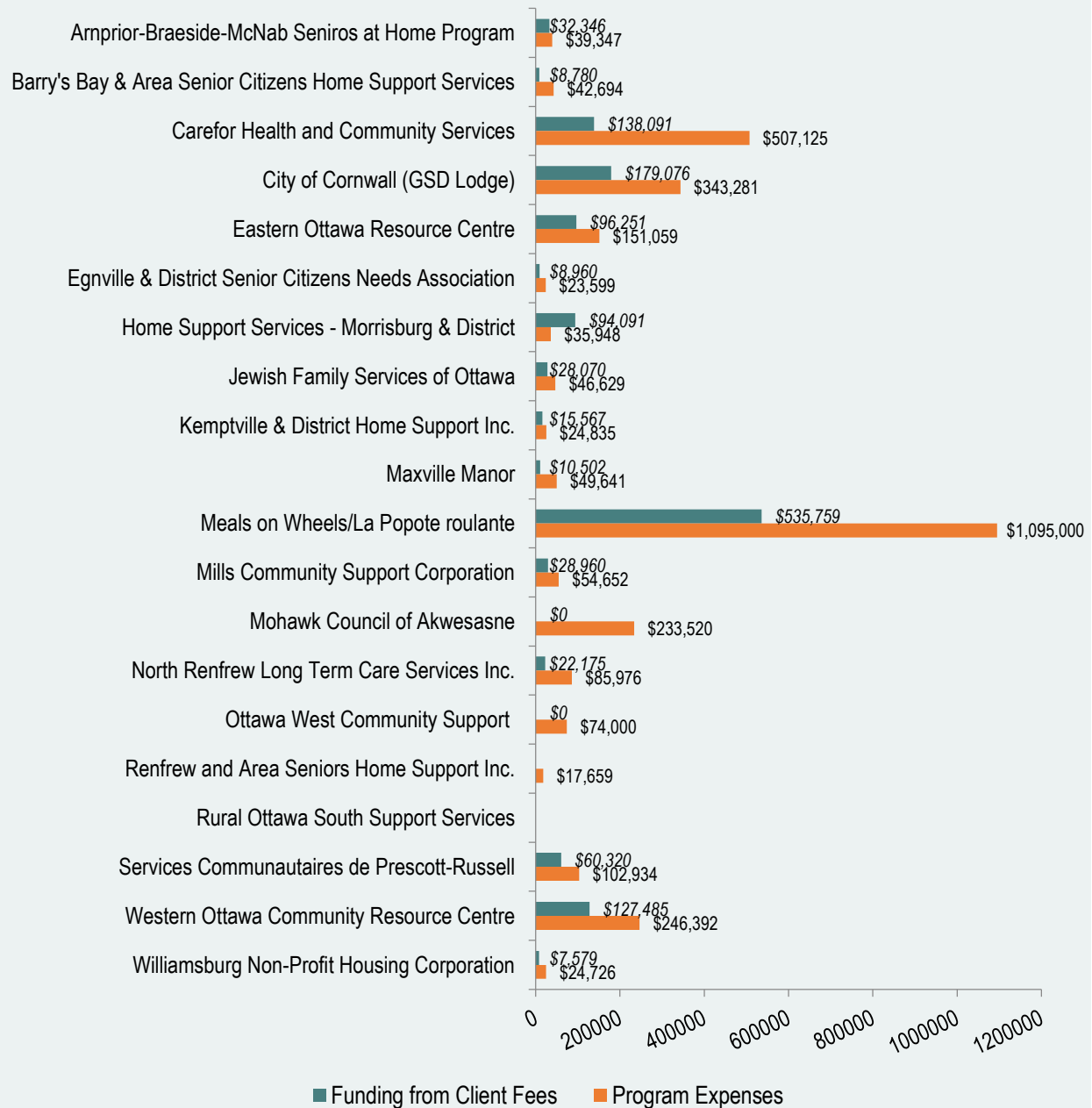
**Notes:**

- The cost of the client co-payment represents the fees for hot and frozen meals does not account for gourmet meals as offered by one Health Service Provider or for frozen meal packages as offered by three Health Service Providers.
- The cost per service was estimated using the annual program expense divided by the total annual meals served per agency.
- The above-mentioned excludes Rural Ottawa South Support Services as their data were not available.

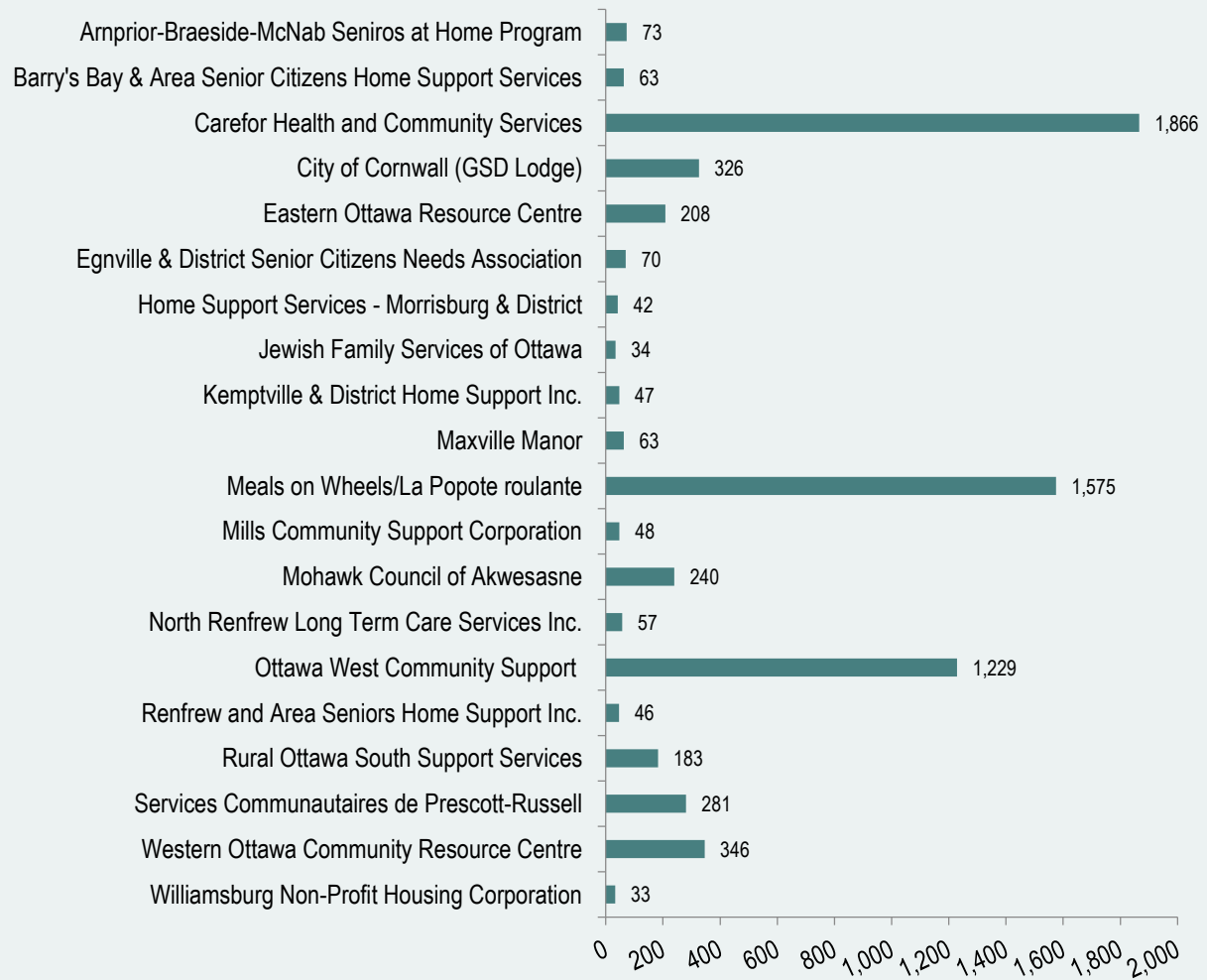
## Meals Delivery LHIN Funding



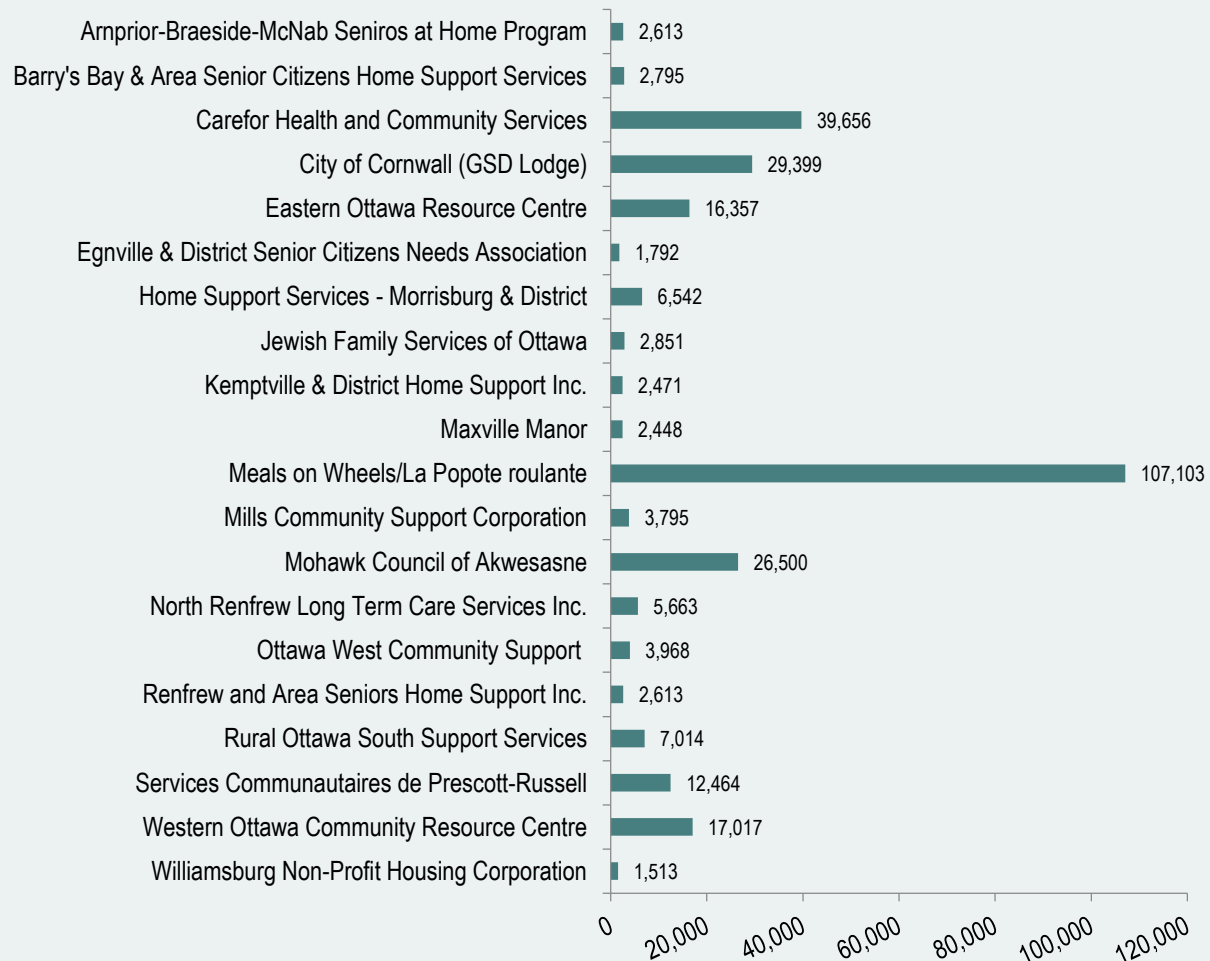
## Meals Delivery Program Expenses and Client Fees



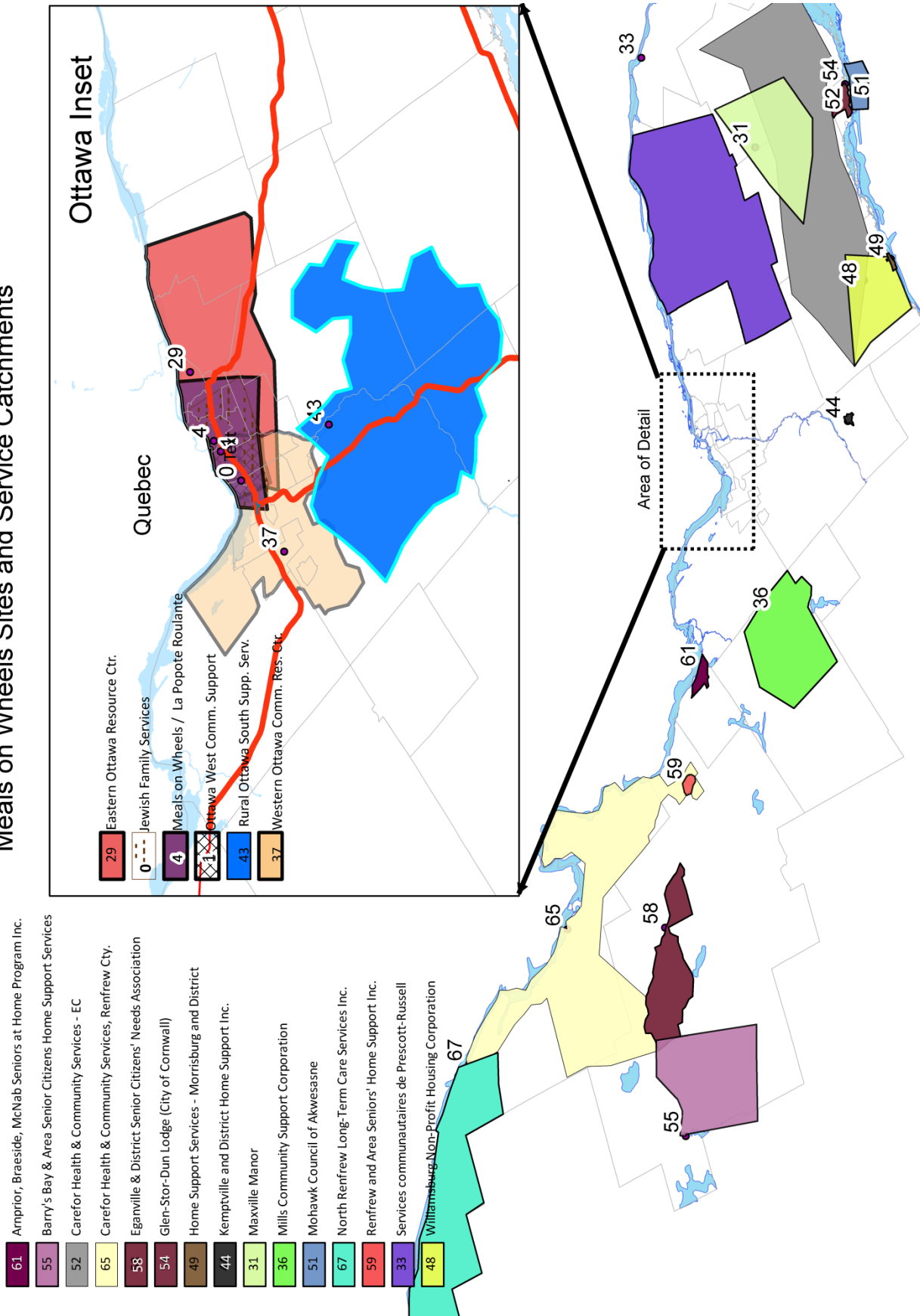
## Meals Delivery Clients Served



## Meals Delivery Meals Served

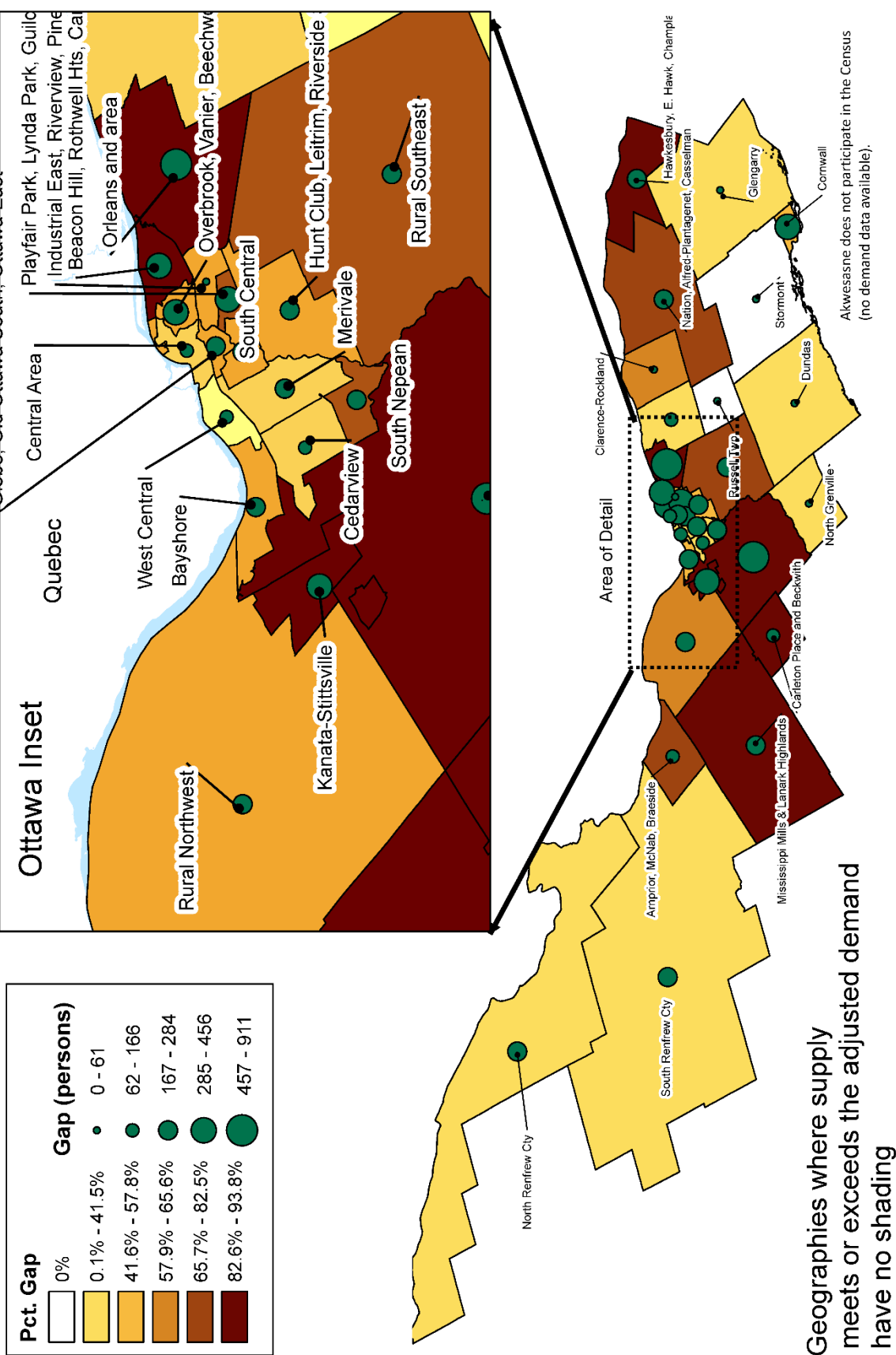


## Meals on Wheels Sites and Service Catchments



Service catchment based on postal codes of clients who used the service. Provider catchments overlap greatly in the centre of Ottawa. May be difficult to discern boundaries. Renfrew Victoria Hospital serves the Renfrew area, but is not included as it is not CSS service provider.

# Meals on Wheels: Supply/Demand Analysis



Supply of meals on wheels allocated to 33 areas based on provider catchment areas. Demand based on research-established proportions of the population aged 75+ (2011 census), adjusted based on average socioeconomic status in the area ('material deprivation index' per Ontario Marginalization Index) and rurality. Gap=supply – adjusted demand. Percent gap= gap/adjusted demand.

## Service Arrangement/ Coordination

### Functional Centre – 72 5 82 05 – Service Arrangement/ Coordination

OHRS DEFINITION	<p>Pertaining to the activities that arrange services to be provided in a service recipient's home. Generally, the job is beyond the service recipients' or their caregiver's capability to undertake or arrange themselves. The job may be undertaken regularly, occasionally or one time only. The jobs arranged may include home maintenance, repair and homemaking and respite services. The entity may use brokerage, contractors and/or volunteers for the services. The funding is not for the labour and transportation cost of providing the services at the service recipient's residence.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>Service coordination costs - direct staff compensation (linking service recipients with services and supports)</li> <li>Monitoring and evaluation of services provided to recipients</li> <li>Client fees for the job, if applicable</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>Labour costs and direct costs to complete the job, e.g. cleaning supplies</li> <li>Volunteer compensation</li> </ul>		
NUMBER OF HSPS	19	LEAD HSP(S)	Carefor for GH
CLIENTS SERVED	6,543	UNITS OF SERVICE	9,749 (Face to Face) 1,449 (Non Face to Face)
LHIN FUNDING	\$1,230,096	PROPORTION OF TOTAL LHIN FUNDING	2.5%
<p><b><u>Notable Exceptions:</u></b></p> <ul style="list-style-type: none"> <li>Funding data was not available for Rural Ottawa South Support Services.</li> <li>The total number of Health Service Providers would increase to 21 if Carefor were divided into its three regions.</li> <li>Jewish Family Services' Homemaking activity is accounted for under this Functional Centre.</li> <li></li> </ul>			



## Program Description

### Overview

Service Arrangement/ Coordination is a referral model for clients who are cognitively, physically, and/or financially unable to arrange, supervise and/or pay for services such as home maintenance, home repair, Respite, Personal Support, and Homemaking.

Clients in need of services are assessed in order to determine eligibility and appropriate level of services. The client's ability to manage and afford the services required are also taken into consideration by the agency arranging service when a referral is made.

Service Arrangement/ Coordination is a process whereby clients are referred to services for

specific tasks that they, or their caregivers, are no longer able to complete. Payment for services are determined by the individuals or by the agencies contracted to provide them. Therefore, there is no particular service catchment or supply and demand data and no maps were made.

### Background

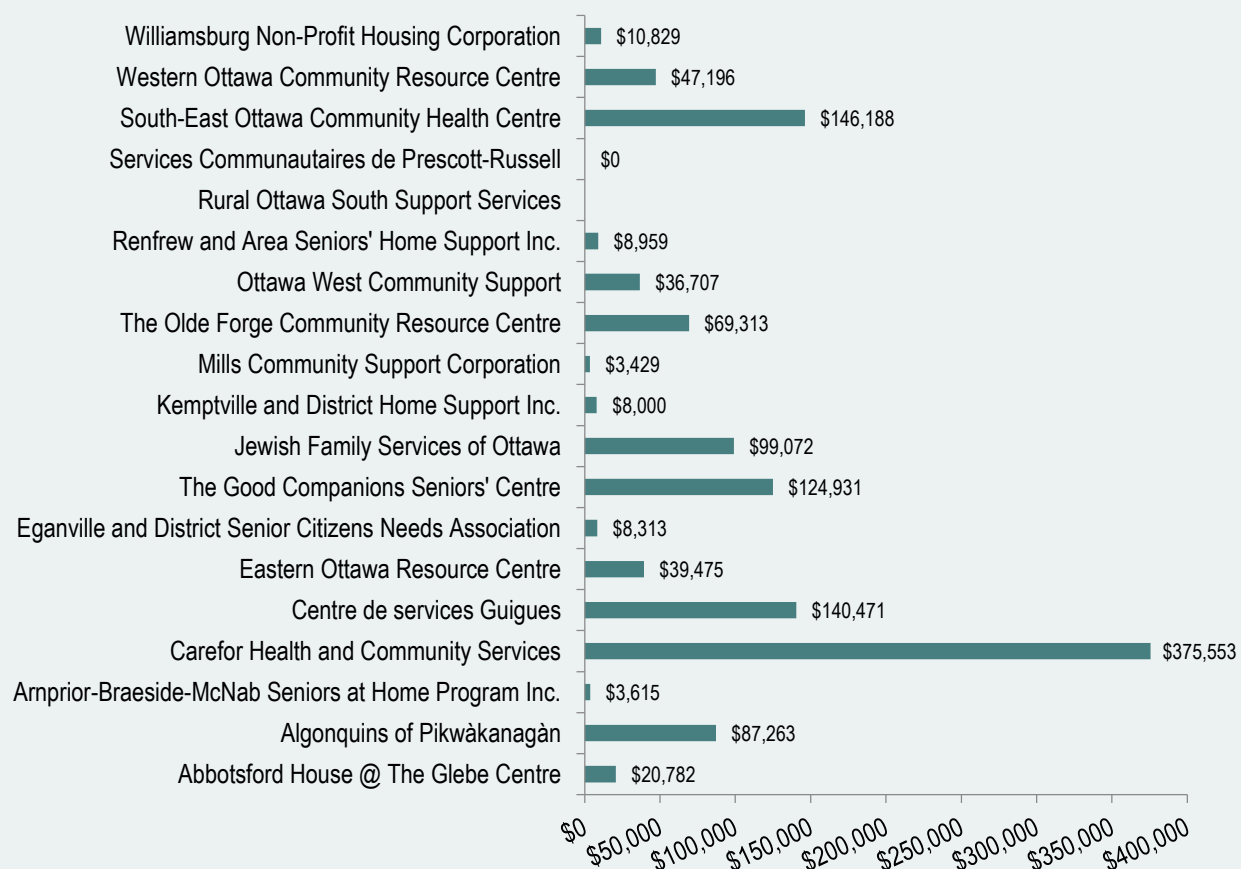
Historically, Champlain has had a significant number of Community Support Providers in Service Arrangement/ Coordination through a non-employee model of service delivery.

### Current State

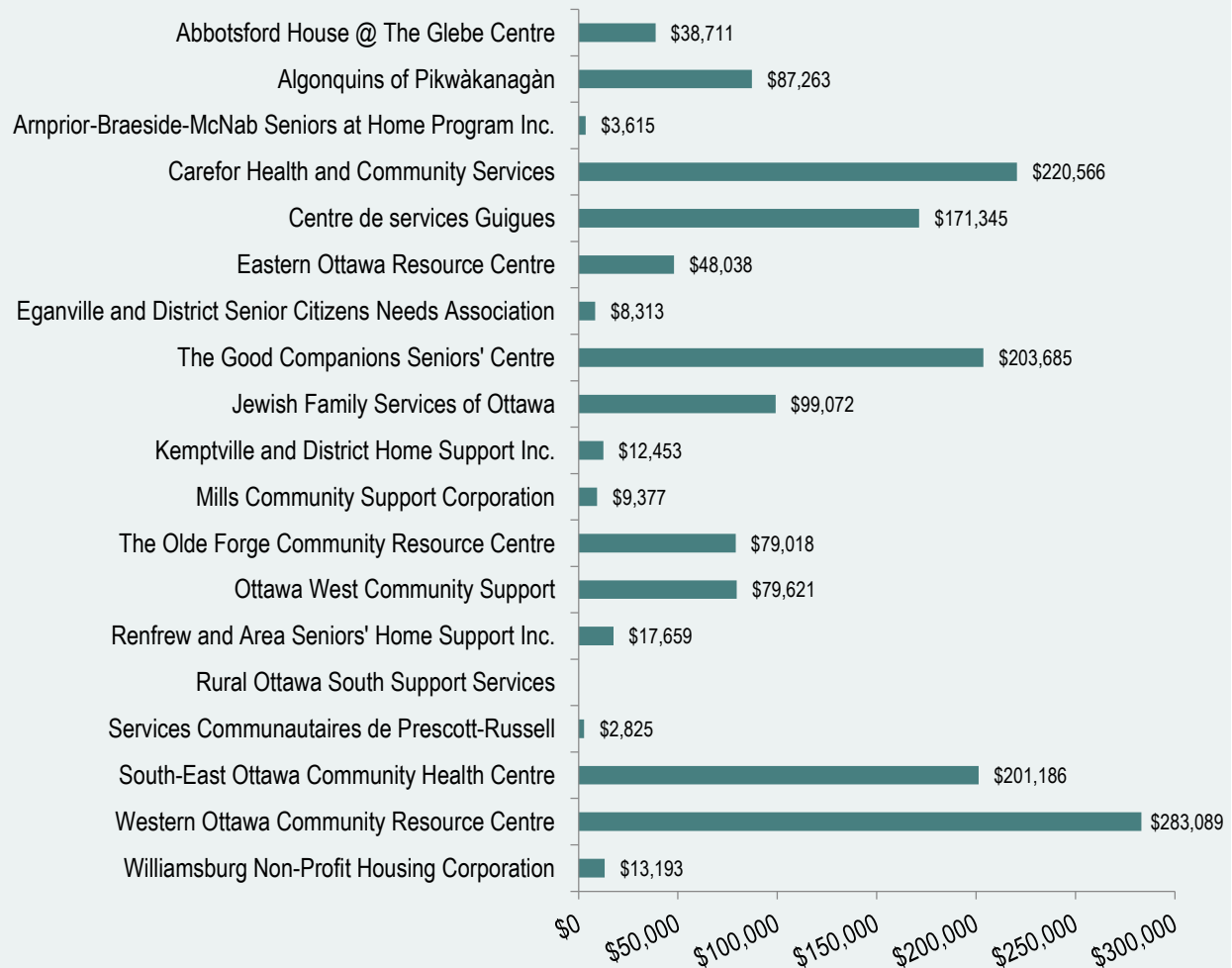
All LHIN-funded Service Coordination in Champlain is summarized below.

Health Service Provider	Service Arrangement	Employee Model
Abbotsford House @ The Glebe Centre	Yes	No
Algonquins of Pikwàkanagàn	Yes	No
Arnprior, Braeside, McNab Seniors at Home Program Inc.	Yes	No
Barry's Bay and Area Senior Citizens Home Support Services	Yes	No
Calabogie and Area Home Support	Yes	No
Carefor Health & Community Services - EC	Yes	Yes for Respite and Homemaking
Carefor Health & Community Services - Ottawa	Yes	Yes for Homemaking
Centre de services Guigues	Yes	No
Community Care Access Centre	No	Yes for Personal Care
Eastern Ottawa Resource Centre	Yes	No
Eganville and District Senior Citizens Needs Association	Yes	No
Jewish Family Services of Ottawa	Yes	No
Kemptville and District Home Support Inc.	Yes	No
Marianhill Inc.	No	Yes for Respite and Homemaking
Mills Community Support Corporation	Yes	Yes for Respite
Ottawa West Community Support	Yes	Yes for Respite and Homemaking
Renfrew and Area Seniors' Home Support	Yes	No
Rural Ottawa South Support Services	Yes	Yes for Respite
Services communautaires de Prescott-Russell	Yes	No
South East Ottawa Community Health Centre	Yes	No
The Good Companions Seniors' Centre	Yes	No
The Olde Forge Community Resource Centre	Yes	No
VHA Health and Home Support	No	Yes for Respite
Western Ottawa Community Resource Centre	Yes	No
Williamsburg Non-Profit Housing Corporation	Yes	Yes for Respite

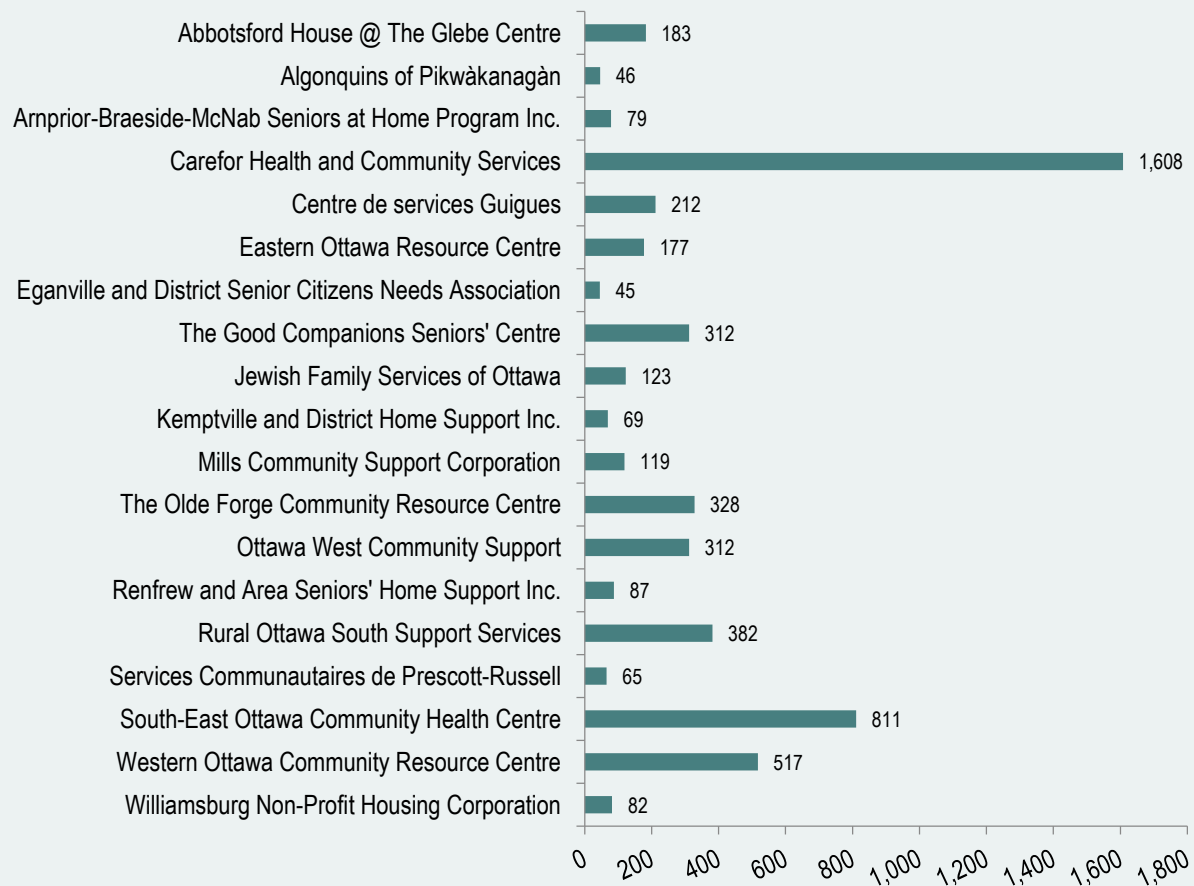
## Service Arrangement/ Coordination LHIN Funding



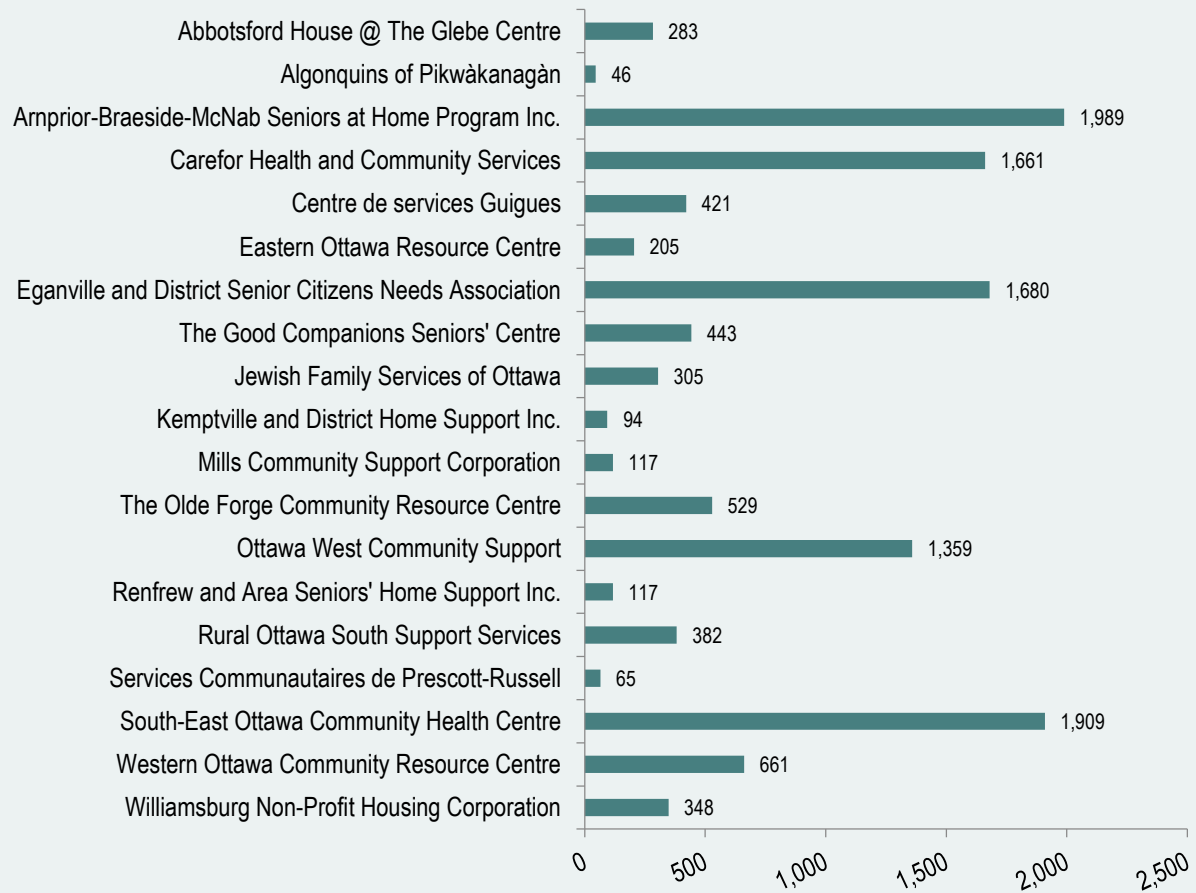
## Service Arrangement/ Coordination Program Expenses



## Service Arrangement/ Coordination Clients Served



## Service Arrangement/ Coordination Visits



## Homemaking

### Functional Centre – 72 5 82 31 – Homemaking

OHRS DEFINITION	<p>Pertaining to the activities that assist service recipients living in home with shopping, light housekeeping, meal preparation, paying bills, caring for children and laundry and training the person to perform these activities. The funding is for both the administration/ coordination costs of providing the service to eligible service recipients as well as the labour and transportation costs of providing the service. The service recipient is responsible for the direct cost of service, i.e. shopping items, food, etc.</p> <p>Includes</p> <ul style="list-style-type: none"> <li>Coordination costs for clients other than those receiving services under the <i>Homemakers and Nurses Services Act</i></li> <li>Direct staff compensation</li> <li>Costs of labour and transportation (where applicable) to carry out homemaking services</li> </ul> <p>Excludes</p> <ul style="list-style-type: none"> <li>Costs related to food and shopping items, etc.</li> <li>Individuals receiving the 24-hour assisted living services</li> <li>Volunteer compensation</li> <li>.</li> </ul>		
NUMBER OF HSPs	1	LEAD HSP(s)	OWCS for Aging In Place
CLIENTS SERVED	604	UNITS OF SERVICES	13,968 hours of care
LHIN FUNDING	\$336,808	PROPORTION OF TOTAL LHIN FUNDING	0.56%
<p><b><u>Notable Exceptions:</u></b></p> <ul style="list-style-type: none"> <li>Homemaking Services in 2013-14 were provided primarily through a brokered model of service delivery with one notable exception. Ottawa West Community Support provided Homemaking via an employee model as part of the Aging in Place Program.</li> <li>Jewish Family Services accounted for the Homemaking services it arranged for clients under this Functional Centre when in fact the Service Arrangement/ Coordination Functional Centre was more appropriate. This has since changed. This agency's data now appear under Service Arrangement/ Coordination.</li> <li>Groupe Action accounted for part of its Attendant Care Outreach Services under this Functional Centre; however, it now reports all of this activity under the Personal Support/ Independence Training Functional Centre.</li> <li>In 2014-15, the Champlain LHIN funded four Health Service Providers to provide Homemaking as per this Functional Centre. They are Ottawa West Community Support (which continues to be the Lead for the Aging In Place Program), Carefor – Ottawa, Carefor – Eastern Counties, and Marianhill Inc.</li> <li>.</li> </ul>			

## Program Description

### Overview

Homemaking services are provided to clients in need of assistance in the upkeep of their homes. These are people who continue to be able to live safely in the community, but have lost the ability to complete certain household activities such as dusting, vacuuming, changing linens, washing floors, meal preparations, and cleaning.

### Background

In 2014, the Champlain Homemaking Advisory Committee was established to make recommendations to the LHIN regarding Homemaking services, including, assessment tools, client volumes, determination of high risk clients, lead agencies, scope of homemaking duties, and gaps, risks and barriers to service. A report was submitted to the Champlain LHIN in March 2014 outlining such recommendations. The LHIN subsequently proceeded with a Request for Service to select lead agencies to provide Homemaking in the region. In the fall of 2014, the following lead agencies were selected: Carefor – Eastern Counties in the Eastern Counties, Marianhill Inc. in Renfrew County and area, and Carefor – Ottawa and Ottawa West Community Support in Ottawa.

Clients may receive 2 hours of homemaking services every 2 weeks at subsidized rate of \$9 per hour. Clients may also purchase additional hours of service.



### Current State

Implementation of the Homemaking Advisory Committee recommendations began in November 2014. The additional investment and the expanded program is not reflected here. Eligibility criteria for clients to access Homemaking services is indicated in the table below.

### Current and Planned Initiatives

The employee model for Homemaking services across Champlain is in its first year of implementation. Future plans are to be developed as the service evolves.

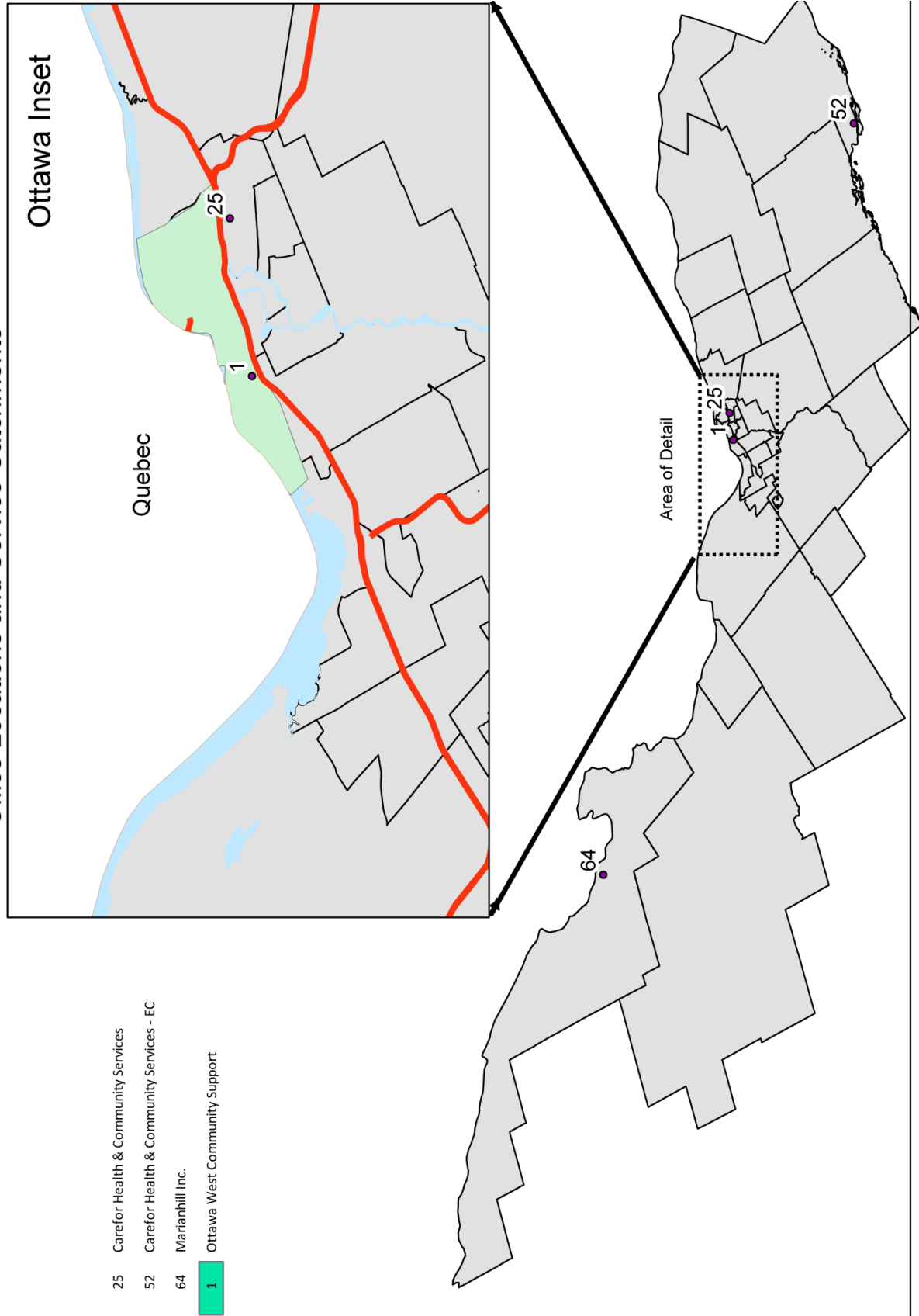
MAPLe Score		IADL Score	Group Served
1	and	15 and up	Clients who need help with meal preparation, housekeeping, and laundry
2	and	10 and up	Clients who have pain, mobility issues and need help with meal preparation, housekeeping, and laundry
3	and	1 and up	Clients who have dementia, pain, mobility issues, and need help with meal preparation, housekeeping, and laundry

## Program Cost

COST OF CLIENT CO-PAYMENT			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
COST PER SERVICE (LHIN DESIGNATED)			
MINIMUM	MEAN	MEDIAN	MAXIMUM
\$ 24.12	\$ 24.12	\$ 24.12	\$ 24.12
<b><u>Notable Exceptions:</u></b> <ul style="list-style-type: none"><li>○ The above-mentioned represents the data for the 2013-14 fiscal year at which time there was only 1 Health Service Provider. In 2014-15, the number increased to 4.</li><li>○ Though there is no fee for service in the Aging in Place Program, there is a fee for service for the Homemaking program implemented in 2014-15. A subsidized rate of \$9.00/hr is offered eligible clients.</li></ul>			

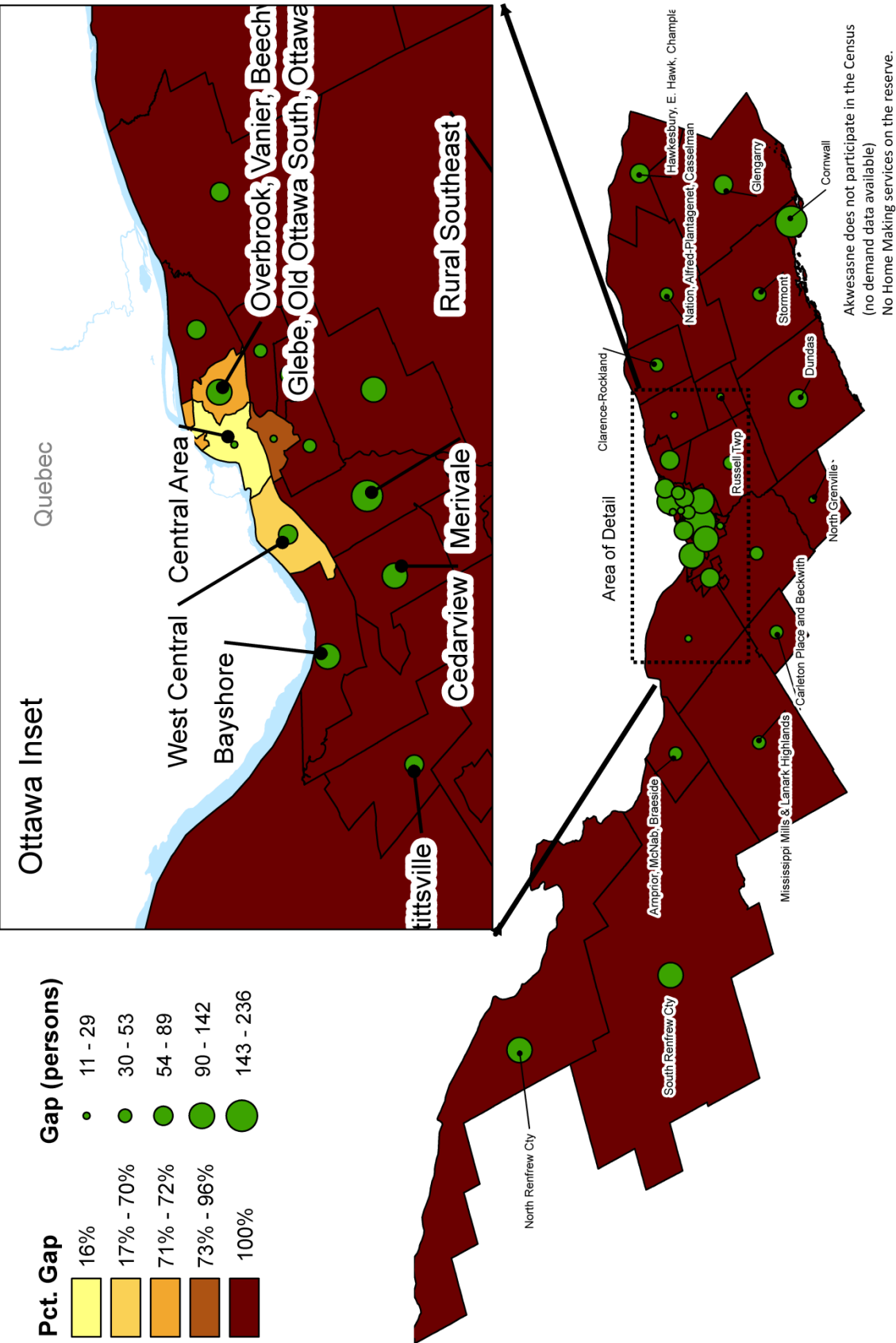


# Home Making Service Providers in Champlain. Office Locations and Service Catchments



Service catchment based on postal codes of clients who used the service. Only Ottawa West Community Support Services provided home making services in 2013/14. The other providers will begin providing services in 2014/15

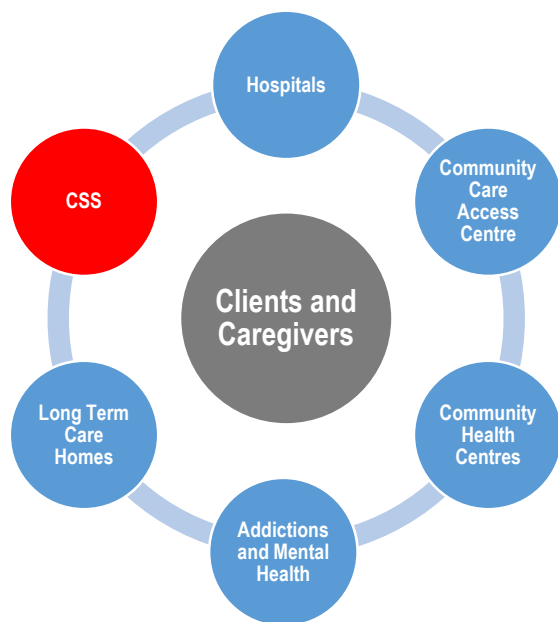
# Home Making Services: Supply/Demand Analysis



Supply of home making services allocated to 33 areas based on provider catchment areas. Home making was previously provided in areas of Champlain under a brokered model as part of "Service Arrangement". Demand based on research-established proportions of the population aged 75+ (2011 census), adjusted based on average socioeconomic status in the area ('material deprivation index' per Ontario Marginalization Index) and rurality. Gap = supply - adjusted demand. Pct gap = gap/adjusted demand.

# Understanding the Community Support Sector

Community Support Services (CSS) form a part of the broader healthcare system in Champlain that includes regional Hospitals, the Community Care Access Centre (CCAC), Community Health Centres, Addictions and Mental Health agencies, and Long-Term Care homes. Comprised of a number of unique agencies, CSS help individuals to live and age well in their own homes and communities. These services assist people to achieve optimum levels of health and active living. The CSS sector is also crucial in maintaining flow across the healthcare system in the region by averting preventable admissions to Hospitals and Long-Term Care homes, as well as facilitating reintegration of patients from hospital to home.<sup>13</sup>



In Champlain, 58 not-for-profit organizations are funded by the Local Health Integration Network (LHIN) to provide CSS. There is a core of services that are reported under 29 Functional

Centres (as per Ontario Healthcare Reporting Standards Chapter 10). The sector offers home support, personal care, and care coordination.

## Clients and Caregivers

Over 50,000 clients receive CSS services annually in the Champlain. These services are accessed primarily by seniors, adults with physical disabilities, or their families and caregivers in order to enable them to remain at home and in their communities as independently as possible. For the purposes of this document, the term caregiver is inclusive of family members.<sup>14</sup>

## Seniors

Seniors comprise 14.3% of the population of Champlain.<sup>15</sup> By 2016, seniors are expected to represent 16% of the population, and by 2036, the senior population is expected to grow to represent 25%.<sup>16</sup> Although many seniors are well and healthy, 39% of people between the ages of 65 and 74 report having two or more chronic conditions.<sup>17</sup> For individuals over the age of 75, this rate increases to 55%.<sup>18</sup>



<sup>13</sup> Champlain Community Support Network, *Champlain CSS Strategic Plan 2014-2017*.

<sup>14</sup> Ibid.

<sup>15</sup> Champlain LHIN, *Profile of Patients with High Needs in Champlain*, October 2014.

<sup>16</sup> Champlain LHIN, *Integrated Health Service Plan 2013-2016*.

<sup>17</sup> Ibid.

<sup>18</sup> Ibid.

The onset of dementia is a significant factor that impacts the ability of individuals to remain independently functional at home. The number of people with dementia is on the rise. As of 2013, approximately 18,400 people over the age of 65 were living with dementia in Champlain.<sup>19</sup> One in four hospitalized seniors waiting for care in a more appropriate setting had dementia.<sup>20</sup> Given the changing demographics of seniors and the growing complexity of care needs in Champlain, the CSS sector is challenged to support clients with increasing acuity and need.

### Adults with Physical Disabilities

The number of Champlain residents reporting limitations in their activities due to physical or mental conditions is higher than the provincial average. Approximately 28.4% of Champlain's



residents noted being limited in their activities due to one or more disabilities<sup>21</sup>. These residents may require help with meal preparation, everyday housework, appointments, personal finances, childcare, personal care, specialized nursing and/or moving around within the home. In September 2013, 77% of people waiting for Personal Support/ Independence Training were

under the age of 65 and 58% of people waiting for placement in a Supportive Housing unit were under the age of 65. These clients usually have one of the following ailments: multiple sclerosis, spinal cord injury, cerebral palsy, muscular dystrophy, or amyotrophic lateral sclerosis.

### Caregivers

A caregiver is someone who provides care and support directly or indirectly to an individual who is either ailing or disabled. Families and friends provide the most significant amount of help to loved ones in need of personal care or assistance. In fact, there are approximately three million caregivers in Canada who provide more than 80% of the support needed by people with chronic conditions. Canadian caregivers contribute an estimated \$5 billion in unpaid labour per year.<sup>22</sup> CSS seeks to support caregivers in a variety of ways that include, but are not limited to education and counselling.<sup>23</sup>



### Other Considerations

Champlain's population is diverse. One in five inhabitants resides in a rural area. An estimated 20% of Champlain's populations is Francophone.<sup>24</sup> Approximately 3% of all

<sup>19</sup> Champlain LHIN, *Integrated Health Service Plan 2013-2016*.

<sup>20</sup> Ibid.

<sup>21</sup> Health System Intelligence Project, *Population Health Profile: Champlain Local Health Integration Network*, p. 2.

<sup>22</sup> Ontario Caregiver Coalition, *Advancing the Interests of Caregivers in Ontario*, July, 2009, p. 3.

<sup>23</sup> MOHLTC, *Ontario Healthcare Reporting Standards CSS*, Chapter 10, March 2014, p. 71.

<sup>24</sup> Champlain LHIN, *Integrated Health Service Plan 2013-2016*.

Champlain residents are Aboriginal.<sup>25</sup> In addition, 18% of Champlain residents are immigrants.<sup>26</sup> Visible minorities make up close to 15% of the Champlain population. One in six residents reports using a language other than English or French<sup>27</sup>. These are key considerations in ensuring culturally sensitive and appropriate care are provided to the right individual at the right time.

## Client Journey

The client journey in the CSS sector may involve engaging with a variety of CSS as per individual needs. The level of supports and services accessed by clients fluctuates depending on their changing health status. There are typically three different living arrangements with correlating levels of support: A diagram intended to demonstrate this changing need is located on the following page.

- **Independent living:** The client lives at home and uses CSS on occasion. For example, they may use infrequent scheduled care such as Transportation.
- **Home with support:** The client lives at home and requires specific CSS on a regular basis to assist with Instrumental Activities of

Daily Living (IADLs); therefore frequent scheduled support is needed.

- **Supported living:** The client requires assistance with Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs) to reside in their own home or in a supportive home setting; hence, frequent scheduled and unscheduled support must be available 24 hours per day.

**Activities of Daily Living (ADLs)** are basic self-care tasks that involves caring for and moving the body. They include eating, toileting, maintaining continence, selecting appropriate attire, bathing, getting dressed and walking.<sup>28</sup>

**Instrumental Activities of Daily Living (IADLs)** are activities that support an independent lifestyle. These include managing finances, driving or navigating public transit, shopping, preparing meals, using the telephone or other communication devices, managing medication, housework and basic home maintenance. Together, Activities of Daily Living and Instrumental Activities of Daily Living represent the skills people need to live as independent adults.<sup>29</sup>

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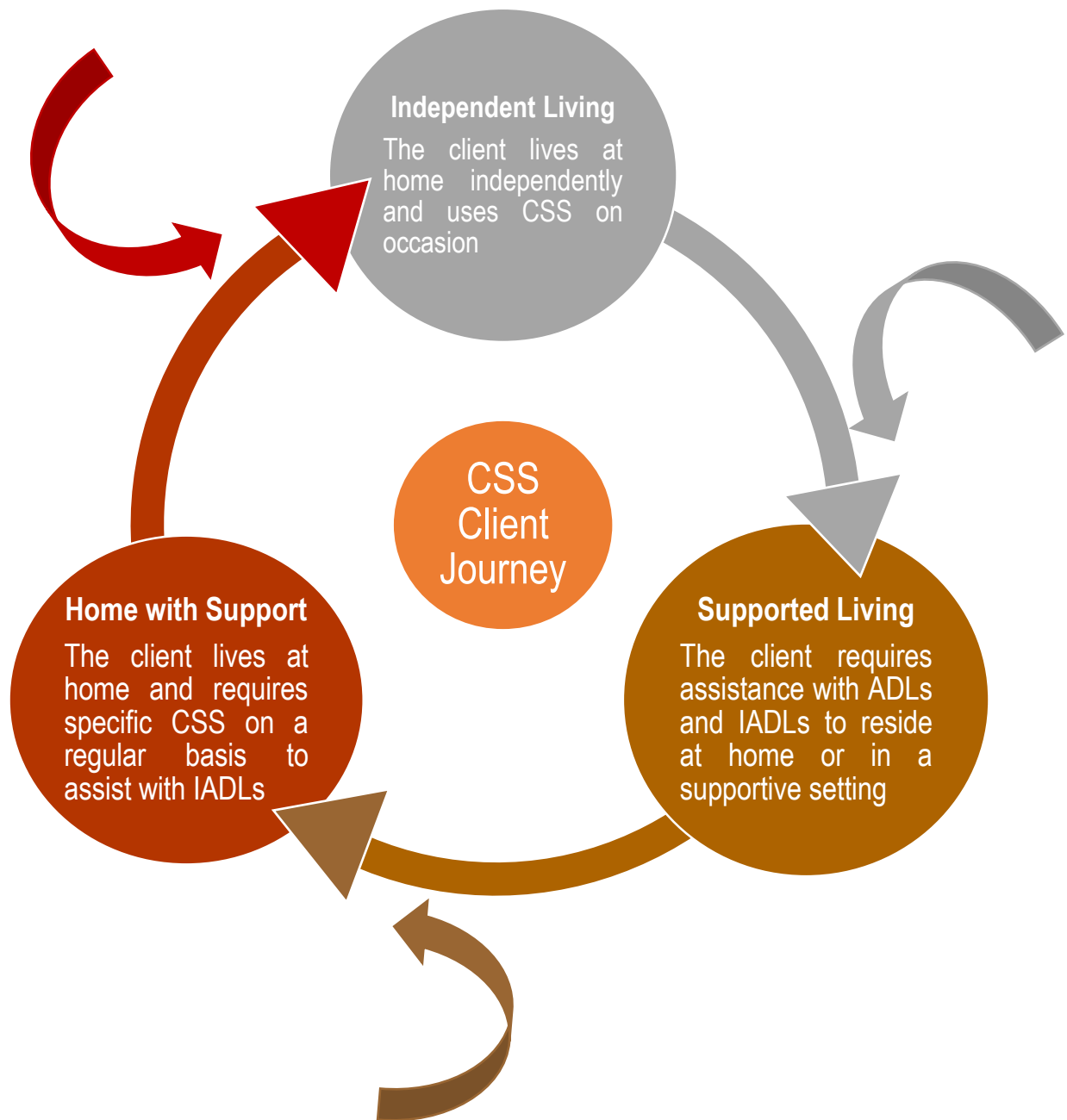
<sup>25</sup> Champlain LHIN, *Integrated Health Service Plan 2013-2016*..

<sup>26</sup> Ibid.

<sup>27</sup> Ibid.

<sup>28</sup> <https://www.caring.com/articles/activities-of-daily-living-what-are-adls-and-iadls>

<sup>29</sup> Ibid.

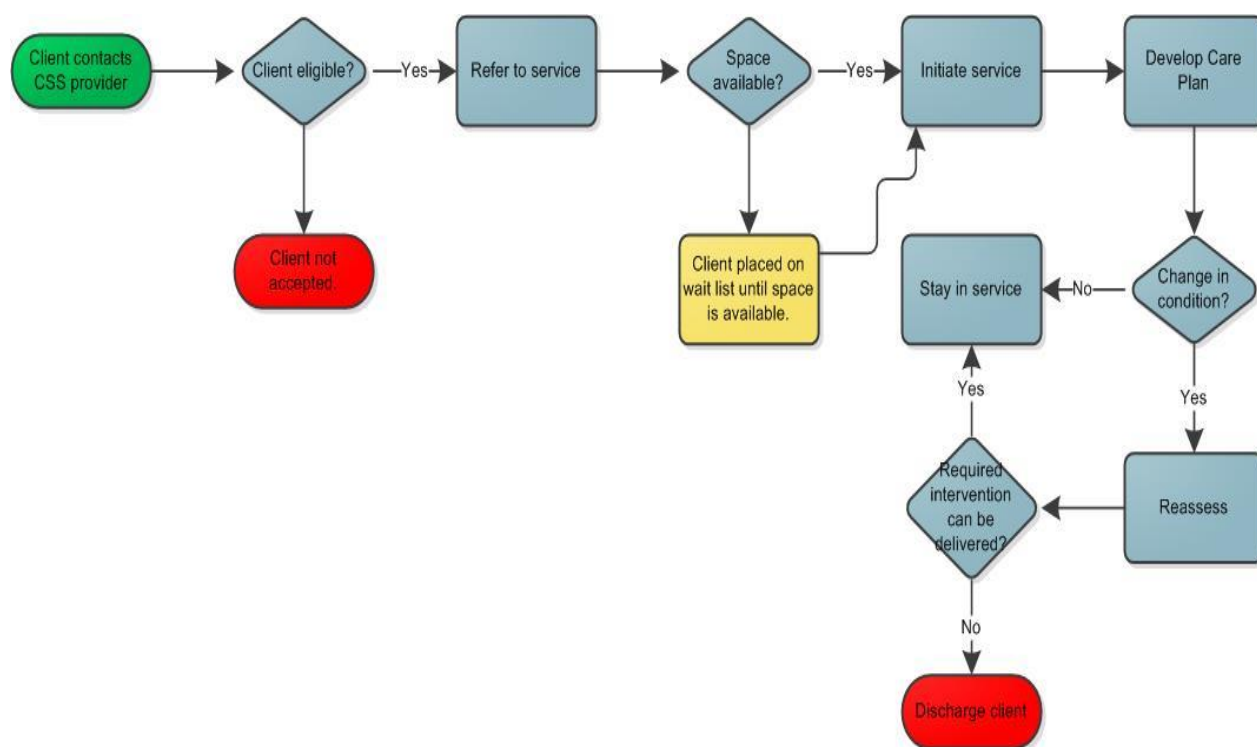




## Client Access

Health Service Providers of Community Support Service (CSS) believe that people should be able to navigate to appropriate services through any provider: That any door is the right door. The Service Recipient Flow Diagram below depicts the general admission and discharge process for any CSS in Champlain.<sup>30</sup> For many services the referral and admission process is streamlined or managed by a single Health Service Provider. If a client is not accepted to a service, placed on a

waitlist or discharged from a service, the Health Service Provider will link the client to more appropriate services. This may include coordination roles such as referring the client to another agency, contacting the potential provider on behalf of the client, or following up on the client's status. The sector is continuously improving and facilitating equitable access to and navigation within the CSS sector in Champlain.<sup>31</sup>



<sup>30</sup> MOHLTC, *Ontario Healthcare Reporting Standards CSS*, Chapter 10, March 2014, p. 37.

<sup>31</sup> Champlain Community Support Network, *CSS Strategic Action Plan 2014-2017*, p. 3.

## Human Resources

Human Resources are the CSS sector's most important asset. In Champlain, CSS are delivered regularly to over 50,000 clients per year by professional staff and trained volunteers.<sup>32</sup>



### Employees

CSS are provided by a large range of employees that include Registered Nurses, Registered Practical Nurses, Personal Support Workers, Health Aides, Attendants, Program Coordinators, Client Care Workers, Clerks, Homemakers, and Housekeepers. Personal Support Workers comprise of a significant portion of the care staff in the CSS sector. They assist with activities such as personal care, medication management, meal preparation, housekeeping, transportation, and social and recreational activities.<sup>33</sup>

### Volunteers

Volunteers are the hallmark of the CSS sector. Many of Champlain's Health Service Providers agree that it would be impossible to provide some of their services without this group of individuals. In fact, in Champlain, 8,578 volunteers provide more than 542,258 hours of service annually.<sup>34</sup> Were this unpaid workforce actually remunerated for its contribution (at \$15/hour), the total value can be assessed at being more than \$8 million.

Volunteers fulfill a variety of functions within CSS. Many serve at the governance level on Boards of Directors while others are involved in fundraising activities. Numerous volunteers provide support to clients and caregivers directly. Volunteer activity in Assisted Living Services for High Risk Seniors, Respite, Homemaking, and Personal Support/ Independence Training is limited to board governance. Champlain reported the highest percentage of volunteers involved in Service Arrangement/ Coordination.

Champlain's CSS depend on volunteers over the age of 80 for Day Services and Transportation much more than their provincial colleagues. Known by many who study volunteerism as Super Volunteers, septuagenarians and octogenarians have surpassed the engagement and performance standards. These Super Volunteers are crucial to supporting Health Service Providers of CSS to deliver services to the right person in the right place at the right time.

<sup>32</sup> Champlain CSS, *Strategic Plan 2014-2017*, p. 2.

<sup>33</sup> CRNCC, in focus background, *Ontario Personal Support Workers in Home and Community Care: CRNCC/PSNO Survey Results*, 2010.

<sup>34</sup> Champlain CSS, *Strategic Plan 2014-2017*, p. 2.



## Sector Organization and Leadership

Champlain's CSS sector is organized by way of three local coalitions and a regional network.

The Ottawa Community Support Coalition, the Community Support Coalition for Eastern Counties, and the Community Support Coalition for Renfrew County and Area represent the local interests of Health Service Providers in the CSS sector across Champlain. Each of the Coalitions is supported by a Capacity Developer, a position that is funded by the LHIN and is unique to Champlain. Under the direction of their respective Coalitions, and in coordination with the Champlain LHIN, the Capacity Developers support the ongoing work of each Coalition in a variety of ways that include needs analysis, service development, resource deployment, project planning and management, and facilitating inter-agency relationships.<sup>35</sup>

Currently, 49 of 58 Health Services Providers are members of a Coalition. Efforts to engage the 9 non-member agencies are in progress. All of the 58 Health Services Providers are represented by the Champlain Community Support Network.<sup>36</sup>

The Champlain Community Support Network brings together representatives from CSS organizations to create and act on opportunities in pursuit of a common vision: A strong, connected, resourced CSS. The Executive Committee also comprises ex officio members including the Capacity Developers, the CSS Decision Support Specialists, and representatives from Le Réseau des Services de santé en français, the Champlain Aboriginal Health Circle Forum, the LHIN, the CCAC, the Ontario Community Support Association, and the agency responsible for financial resources associated with the Network.

The Network facilitates collaboration and the Executive Committee provides a mechanism to identify and act on opportunities for health system improvement. The voice of the Executive Committee, along with broad member and stakeholder consultation, enables planning processes that are open, transparent and meaningful to the community.<sup>37</sup>

Specifically, the objectives of the Executive Committee are as follows:

- To share expertise, experience and perspectives regarding service-related issues and strategies that would benefit from a regional perspective
- To be proactive and forward-thinking in identifying trends and opportunities that may inform decision-making
- To create an open and transparent mechanism to facilitate information sharing
- To create an atmosphere of trust where sensitive discussions can be held in confidence
- To discuss and provide input and feedback regarding CSS – related policies and/or strategic directions of the Champlain Local Health Integration Network<sup>38</sup>

The Executive Committee is designed to provide Health Services Providers of CSS the opportunity to have their interests represented in a focused and multi-interest group structure.<sup>39</sup>

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<sup>35</sup> Capacity Developer Job Description, December 2009.

<sup>36</sup> Champlain Community Support Network Terms of Reference, December 2014.

<sup>37</sup> Champlain Community Support Network Terms of Reference, December 2014.

<sup>38</sup> Champlain Community Support Network Terms of Reference, December 2014.

<sup>39</sup> Champlain Community Support Network Terms of Reference, December 2014.

## Sector Strategy

This Service Reference Document is one of three strategic documents recently created for Champlain's CSS. Along with the Champlain CSS Strategic Plan 2014-2017 and the Champlain CSS Action Plan 2014-2017, it will enable the sector to enhance community care in Champlain.

The Champlain CSS Strategic Plan 2014-2017 articulates the sector's strategic directions for the next three years and identifies the following three priority areas: Access and navigation, planning and coordination, and system capacity.

The Champlain CSS Action Plan 2014-2017 brings together the lived experiences of clients and caregivers, as well as the knowledge and

expertise of program partners. The Plan serves as a framework to guide the regional work of the CSS sector from 2014 to 2017.

Access and Navigation	Planning and Coordination	System Capacity
Facilitate equitable access to navigation within the CSS sector across Champlain.	Facilitate seamless transitions and improved care coordination for clients within the CSS sector as well as between CSS and community partners.	Build and maintain a strong and sustainable system of seamless services that meet the needs of clients across Champlain.



## Special Programs

### Going Home Program

The Going Home Program is a hospital diversion strategy that aims to decrease the number of days patients remain in hospitals when they can be bettered cared for in other settings.<sup>40</sup> The program provides a basket of subsidized CSS to seniors aged 65 and older for ten days immediately post-discharge from hospital.

The Going Home Program provides the following to eligible seniors:

- A safe transition from Hospital to home
- Intensive services to clients for a short period of time
- Decreased Hospital occupancy pressures by preventing lengthy stays in hospital and unnecessary hospitalizations
- Caregiver relief and support during transition from hospital to home

By providing safe, accessible care in the community, the Going Home Program reduces unnecessary hospital days and reduces occupancy pressures. The services that are provided may include Personal Care, Respite, Transportation, Meals on Wheels, and Homemaking.<sup>41</sup>

The program is structured with a 'lead agency' model and a centralized intake function. Through the intake function, the most appropriate service provider is selected to deliver the services required. Program level reporting is undertaken by Carefor Health and Community Services, the LHIN lead agency, for the catchment.

### Aging in Place Program

The Aging in Place program was created in 2007 to reduce Emergency Room visits by linking at-risk seniors with CSS and/or assisting them with system navigation.<sup>42</sup> The program represents a strong partnership between the Champlain CCAC, [Ottawa Community Housing](#), the [Regional Geriatric Program of Eastern Ontario](#), and Ottawa West Community Support on behalf of the Ottawa Community Support Coalition.<sup>43</sup> It has recently expanded to include 11 Community Housing buildings in Ottawa.<sup>44</sup> The services provided include outreach and intervention, health promotion and education, Nurse Practitioner Primary Care Outreach, targeted enhanced services, targeted rapid response, and needs assessment.<sup>45</sup>

An Aging in Place Community Support Outreach Coordinator and a Community CCAC Coordinator provide on-site support such as meals delivery, transportation and foot care and education. Education for clients may include topics on falls prevention, coping with stress, and mental wellness. In addition, social activities are planned to alleviate issues related to social isolation.

As the lead agency for the Aging in Place program in Ottawa, Ottawa West Community Support accounts for all the units of service provided to clients.

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<sup>40</sup> Champlain LHIN, *LHIN Backgrounder Aging at Home Strategy*, 2010, p.1.

<sup>41</sup> Carefor Health & Community Services, *Going Home Program* brochure.

<sup>42</sup> <http://afc.uwaterloo.ca/PDF/Ottawa%20CCCA.pdf>

<sup>43</sup> Champlain LHIN, *Health Care Options in the Champlain Region*

<sup>44</sup> <http://www.carefor.ca/english/news/aging-in-place-program-ensures-health-wellbeing-for-at-risk-elderly.htm>

<sup>45</sup> <http://afc.uwaterloo.ca/PDF/Ottawa%20CCCA.pdf>

## Business Process and Information Technology

### Common Assessment and Referral for Enhanced Support Services (CARESS) Project

Funded by the Champlain LHIN, the CARESS project was initiated in January 2010 to gather information and to resolve common issues regarding assessment, referrals, protocols and processes that are faced by the Champlain CCAC, Community Health Centres, Community Resource Centres and CSS.<sup>46</sup>

It was recognized that as seniors and their caregivers attempt to navigate the system, they are often faced with multiple screening processes, varying degrees of provider knowledge about available service offerings, duplicate screening processes, as well as poor information and referral exchanges between providers.<sup>47</sup> The objective for CARESS is to improve the client experience for health care and CSS.

The primary focus for CARESS is on common assessments and referrals.

### Shared Services Organization

The Champlain Shared Services Organization (SSO) is a centre of expertise related to automation tools for community health sector agencies, hosts tools - including a common Client Information System (CIS) - and at least one form of support for the majority of community health agencies in Champlain.

The SSO was proposed by the CARESS (cross-sector) Steering Committee in 2011 as a solution to a number of converging issues: the provincial mandate to implement standardized, automated client health assessment tools for CSS clients; the desire for a common CIS within the community health sector (including CRCs); increasing information technology and related administration workload without funding,

especially for smaller agencies; and, the potential for achieving economies of scale by creating a small group which could focus on these tasks which are not the core business of community health sector agencies. The plan was to bring on approximately 10 agencies per year for CIS hosting.

Using funding from [Community Care Information Management \(CCIM\)](#) and the Champlain LHIN and utilizing CCAC infrastructure and expertise, the SSO went live with its first hosted CIS client in February 2013.

### Current State

The following is the current status for related initiatives and activities:

- **Preferred Vendor for Client Information System:** Following a formal competitive bidding process, Canesto CIMS was selected as the preferred vendor in Champlain and 37 of 58 Health Service Providers of CSS are on a version of the Canesto CIMS with five more due to transition to CIMS before the end of fiscal year 2014-15.
- **Common Assessment Tools:** Forty-one of 58 Health Service Providers were required to implement the interRAI CHA. The implementation of this assessment tool is complete with 100% compliance by the Health Service Providers. Thirty-seven of 58 Health Service Providers were required to implement the interRAI Preliminary Screener. Twenty-nine of 37 provide one or more of the 8 services under review in this document. Of the 29, 79% of the Health Service Providers have fully implemented the tool.

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<sup>46</sup> CARESS Terms of Reference, 2013, p. 2.

<sup>47</sup> Original Business Case for Local Health Integration Network funding for CARESS.

- **Shared Services Operation:** Nearly two years since its inception, SSO is now hosting more than 30 agencies and managing over 34 CIMS-HR databases. SSO expects to be supporting 40 databases by the end of fiscal year 2014-15. It is also responsible for the SharePoint applications development and support functions, first-level support for CIMS-HR and support to the Integrated Assessment Record, a Desktop Support pilot project.
- **Equipment Upgrades:** Two upgrade exercises occurred since 2011 with the technology survey confirming the gaps and

informing the decisions related to deployment of new equipment.

- **Common Referral:** A common referral form with addendum was developed and is in use by some Health Service Providers of CSS. The form may be completed electronically and sent by fax.

The following table lists the current client information system for each of the Health Service Providers funded by the LHIN to provide CSS and the affiliation with the SSO. It is the current state as of December 31, 2014.

#	Health Service Provider	Client Information System	Shared Services Operation	
			Yes	No
1	Abbotsford House @ The Glebe Centre	CIMS 5		X
2	Aboriginal Friendship Centre			X
3	Algonquins of Pikwàkanagàn	CIMS 7.2 for assessments	X	
4	Alzheimer Society of Cornwall and District	CIMS 7.2	X	
5	Alzheimer Society of Ottawa and Renfrew County	CIMS 7.2	X	
6	Arnprior Regional Health	CIMS 7.2 for assessments	X	
7	Arnprior-Braeside-McNab Seniors at Home Program Inc.	Converting to CIMS 7.2	X	
8	Barry's Bay and Area Senior Citizens Home Support Services	CIMS 7.2	X	
9	Beth Donovan Hospice	Hospice Info Anywhere		X
10	Bruyère Continuing Care	CIMS 7.2 for assessments	X	
11	Calabogie and Area Home Support	CIMS 7.2	X	
12	Canadian Hearing Society			X
13	Canadian National Institute for the Blind			X
14	Canadian Red Cross	CIMS 5		X
15	Carefor Health & Community Services – Ottawa	Gold Care but piloting CIMS 7.2 for Homemaking services	X	X
	Carefor Health & Community Services – EC	Gold Care		X
	Carefor Health & Community Services – RC	Gold Care		X
16	Carleton University Attendant Services Program	CIMS 7.2 for assessments	X	
17	Centre de services Guigues	CIMS 7.2	X	
18	Champlain Community Care Access Centre	CHRIS		X
19	City of Cornwall (for Adult Day Programs)	CIMS 7.2	X	
20	City of Ottawa (for Adult Day Programs)	CIMS 7.2 for assessments	X	
21	County of Renfrew (for Adult Day Programs)	CIMS 7.2 for assessments	X	
22	Dundas County Hospice	Getting CIMS 7.2	X	
23	Eastern Ottawa Resource Centre	CIMS 7.2	X	
24	Eganville and District Senior Citizens Needs Association	CIMS 7.2	X	
25	Glengarry Inter-Agency Group Inc.	CIMS 7.2	X	
26	Groupe Action pour l'enfant, la famille et la communauté de Prescott-Russell	CIMS 7.2	X	

27	Hôpital Général de Hawkesbury & District General Hospital Inc.	CIMS 7.2 for assessments	X	
28	Home Support Services – Morrisburg and District	Nil. PS completed by WNPCHC		X
29	Hospice Care Ottawa	Hospice Info Anywhere		X
30	Jewish Family Services of Ottawa	CIMS 7.2	X	
31	Kemptville and District Home Support Inc.	CIMS 7.2	X	
32	Marianhill Inc.	CIMS 7.2	X	
33	Maxville Manor	CIMS 7.2	X	
34	Meals on Wheels/La Popote roulante	CIMS 5		X
35	Métis Nation of Ontario			
36	Mills Community Support Corporation	Getting CIMS 7.2	X	
37	Mohawk Council of Akwesasne	Nightingale		X
38	Montfort Renaissance			X
39	North Renfrew Long Term Care Services Inc.	CIMS		X
40	Ottawa West Community Support	CIMS		X
41	Parkway House	CIMS 7.2 for assessments	X	
42	Personal Choice Independent Living	CIMS 7.2 for assessments	X	
43	Pinecrest-Queensway Community Health Centre	Nightingale		X
44	Renfrew and Area Seniors' Home Support Inc.	CIMS 7.2	X	
45	Renfrew Victoria Hospital	CIMS for assessments	X	
46	Royal Ottawa Health Care Group			X
47	Rural Ottawa South Support Services	CIMS 7.2	X	
48	Services Communautaires de Prescott-Russell	Getting CIMS 7.2	X	
49	South East Ottawa Community Health Centre	Nightingale		X
50	The Good Companions Seniors' Centre	CIMS 5		X
51	The Olde Forge Community Resource Centre	CIMS		X
52	The Ottawa Hospital			X
53	The Perley and Rideau Veterans' Health Centre	CIMS 7.2 for assessments	X	
			Yes	No
54	VHA Health and Home Support	CIMS		X
55	Vista Centre	CIMS 7.2 for assessments	X	
56	Wabano Centre for Aboriginal Health			X
57	Western Ottawa Community Resource Centre	CIMS		X
58	Williamsburg Non-Profit Housing Corporation	CIMS		X

### Current and Planned Initiatives

The CARESS Project Steering Committee is now planning and prioritizing initiatives for the coming year(s):

- A multi-year action aligned with the CARESS project strategic direction
- An requirement/vision document
- Governance for the SSO
- A satisfaction survey of existing clients of the SSO
- Desktop Support pilot project – analysis and financing if required
- Revisions to the common inter-agency referrals form based on community feedback
- Implementation of recommendations from the Value Stream Mapping exercise
- Opportunities to improve connections with other sectors<sup>48</sup>

<sup>48</sup> CARESS Compass, 13<sup>th</sup> Edition, December 2014.



## Assessments

### Background

The CSS sector across Ontario had previously identified the need to implement a common assessment tool. The [interRAI Community Health Assessment \(CHA\)](#), along with the interRAI Preliminary Screener, were recommended as the standard instruments for assessments by a provincial working group. This was approved by the Provincial CSS Steering Committee and the Ministry of Health and Long Term Care for implementation across Ontario.<sup>49</sup> The CSS sector of Champlain began the implementation of the [Common Assessment Project](#) in 2011, supported by the [Community Care Information Management](#) on behalf of the MOHLTC. In Champlain, Community Care Information Management was assisted by the CARESS Project Steering Committee through a sub-project known as the Champlain interRAI CHA Roll-Out Project.

Several advantages were identified to implementing common assessment tools:

- Right service at the right time and indication of when a client requires a higher level of care
- A reduction in repeated story telling by clients and caregivers
- A common language and consistent access to equitable and appropriate services
- Clients receive an assessment appropriate to the level of care provided, regardless of service required

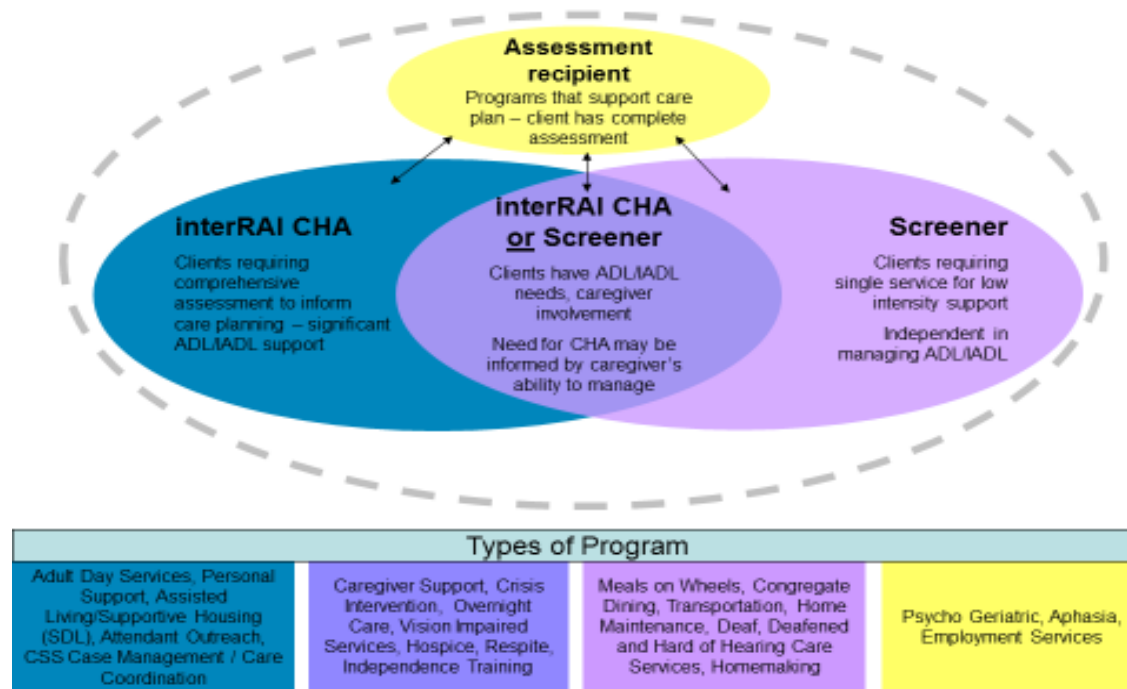
- Appropriate care planning and service navigation
- Facilitation of data sharing and the availability of quality data for reporting at the client, Health Service Providers, LHIN and provincial levels
- Effective data utilization to support evidence-based decision making and planning for Health Service Providers and the LHIN
- Identification of potential areas for process redesign and streamlining<sup>50</sup>

Prior to the roll-out of the assessment across Champlain, VHA Health and Home Support had already been using a paper version of the interRAI CHA for two years prior to the broad electronic implementation in 2011. In the Eastern Counties, a collaborative approach to the implementation of the comprehensive assessments was developed. VHA and Carefor-Eastern Counties received one-time funding from the Champlain LHIN on behalf of their Coalitions to support other Health Services Providers in the completion of assessments and the fulfillment of the provincial implementation requirements. VHA provided support to Health Service Providers in Ottawa and Renfrew County, while the Eastern Counties Assessment Collaborative supported Health Service Providers in the Eastern Counties catchment area.

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<sup>49</sup> CARESS Project Plan, ChiRP, December 2012.

<sup>50</sup> [https://www.ccim.on.ca/CSS/CA/Document/CSSProjectProfile\\_20120215\\_v0%204\\_CSSCAP-FINAL.pdf](https://www.ccim.on.ca/CSS/CA/Document/CSSProjectProfile_20120215_v0%204_CSSCAP-FINAL.pdf)



## Overview

Since the fall of 2013, Health Service Providers of CSS that were mandated to use the interRAI CHA as their comprehensive common assessment. Providers of CSS mandated to provide Screener designated services use the interRAI Preliminary Screener as their common assessment. The assessment type to be completed as determined by client need and by Community Support Service was pre-determined as part of the Common Assessment Project in consultation with CSS' stakeholders.<sup>51</sup> In regards to the eight CSS examined in this Service Reference Document, Assisted Living Services for High Risk Seniors, Day Services, and Personal Support/ Independence Training are CHA designated programs. These programs require the completion of the comprehensive health assessment as clients require varying but significant support for [Activities of Daily Living](#) and [Instrumental Activities of Daily Living](#). In Champlain, Respite was determined to be a CHA

designated program. Homemaking was also deemed a CHA designated program as the program aims to meet the needs of vulnerable seniors and the best evidence-based identifiers of high risk include the [Instrumental Activities of Daily Living Scale](#) and the [Method for Assigning Priority Levels \(MAPLe\)](#) score, which form part of the interRAI CHA. Finally, Meals Delivery, Service Arrangement/ Coordination and Transportation are all Screener designated services and require the completion of the interRAI Preliminary Screener. The same is true for Congregate Dining and Home Maintenance, which are not under review in this Service Reference Document.

## InterRAI Preliminary Screener

The interRAI Preliminary Screener is the standard intake assessment for the CSS sector. It supports the intake process by recording the essential information needed at the time of intake and identifying persons who would likely benefit

<sup>51</sup> CCIM, *interRAI Preliminary Screener for Primary Care and Community Care Settings (interRAI Preliminary Screener) Training* (PowerPoint Presentation), 2012.



from a more comprehensive interRAI CHA. The Preliminary Screener may be completed as part of an in-person interview or it can be done over the telephone. Though not intended to fully inform service planning, it does provide some clinical information required to designate community support service.<sup>52</sup> Prior to its full implementation, the Preliminary Screener was first piloted in Ottawa by VHA Health and Home Support and in the Eastern Counties by Maxville Manor.

#### *InterRAI CHA (Community Health Assessment)*

The interRAI CHA assesses the individual's health status at a moment in time and identifies persons that would benefit from further assessment in order to prevent or stabilize early functional or health decline. The CHA is made up of a core assessment and four supplements:

**The interRAI Functional Supplement (interRAI CHA-FS)** includes an expanded set of functional and clinical items that informs and guides comprehensive care and service planning for more challenged persons in community-based settings.<sup>53</sup>

**The interRAI Mental Health Supplement (interRAI CHA-MH)** includes an expanded item set on mental health-related diagnoses, symptoms, treatments and life experiences and describes the performance and capacity of the person in a variety of domains.<sup>54</sup>

**The interRAI Assisted Living Supplement (interRAI CHA-AL)** evaluates the needs, strengths and preferences of persons served by various types of residential care facilities and identifies functional, medical and social issues that are either presently limiting the quality of life or functional status of the person or that are

likely to become limiting for the person, if left unaddressed.<sup>55</sup>

#### **The interRAI CHA Deafblind Supplement (interRAI CHA-Db)**

- Evaluates the strengths, preferences and needs of persons with dual sensory loss. The items in this supplement extend to the dimensions of vision and hearing to address patterns of impairment and change in these senses for persons with both congenital and acquired deaf blindness. The CHA-Db also includes items on communication systems, orientation and mobility, and use of interpreters and interveners.”<sup>56</sup>

This modularized approach allows for the person's needs and preferences to be tracked in a range of settings, thereby following the client's journey through the continuum of care. The person is first assessed with the core assessment and if through the algorithm a specific problem is triggered, then one or more of the four supplemental assessments is completed. The interRAI CHA is a flexible and robust assessment system that meets the changing needs of the client.<sup>57</sup>

#### *Method for Assigning Priority Levels (MAPLe)*

The **Method for Assigning Priority Levels (MAPLe)** is a decision support tool that can be derived from the interRAI Community Health Assessment (CHA). It is also generated from the interRAI Health Care (HC) assessment, the interRAI Acute Care (AC) assessment or the interRAI Community Mental Health (CMH) assessment. The MAPLe algorithm is a validated methodology for prioritizing access to nursing homes and community services. It differentiates the care needs of the person being assessed into five priority levels (1 being the lowest and 5 the

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<sup>52</sup> [www.interrai.org/community-health.html](http://www.interrai.org/community-health.html)

<sup>53</sup> Ibid

<sup>54</sup> Ibid

<sup>55</sup> Ibid

<sup>56</sup> Ibid

<sup>57</sup> Ibid

highest). These levels are predictive of the risk for adverse outcomes. People in the lowest priority level have no major functional, cognitive, behavioural or environmental problems and are considered self-reliant. On the other hand, people with a score of 5 typically have one or more cognitive impairments, tend to wander, display challenging behaviours, and have difficulties completing [Activities of Daily Living](#).<sup>58</sup>

#### *interRAI-HC (Home Care)*

The Champlain CCAC currently uses the RAI Health Care assessment. The CCAC is expected to transition to the use of the interRAI Health Care (HC) assessment in the future. Initially developed in 1994, the interRAI HC was revised in 1999 and 2007 in order to be more compatible with other interRAI assessments. It was developed for use with the frail elderly or persons with disabilities seeking or receiving formal healthcare or supportive services. It is primarily used for persons with chronic care needs and people who are discharged from hospitals or are in hospital-at-home situations. The interRAI HC was designed to highlight issues related to functioning and quality of life for community-residing individuals. The Home Care system supports a variety of research-informed decision support tools that assist the assessor in planning and monitoring care, such as:

- Scales for [Activities of Daily Living](#), cognition, communication, pain, depression, and medical instability
- Clinical Assessment Protocols that contain strategies to address problem conditions as triggered by one or more Home Care item responses
- Screening systems to identify appropriate outreach and care pathways for prospective clients
- A quality monitoring system

- A case-mix system that creates distinct service-use intensity categories<sup>60</sup>

#### *Comparison: interRAI Community Health Assessment (CHA) and RAI Home Care (HC) assessment*

The interRAI CHA and the RAI HC are not the same assessment tool. They are compatible but not identical. In comparison to the interRAI HC, the interRAI CHA does not include the Instrumental Activities for Daily Living Difficulty Scale, the Activities for Daily Living Short Form and the Activities for Daily Living Long Form. However, if the Functional Supplement to the CHA is completed, then the two assessments are virtually the same.

Assessors in the CSS sector are not required to be regulated professionals, although many of them are. For the CCAC, legislation requires a regulated professional to complete assessments for any person being considered for placement into long-term care. The Champlain CCAC has extended that requirement to all of its assessors even though it is not legally mandated to do so.

<b>Assessment Tool Comparison</b>	
<b>CSS</b>	<b>CCAC</b>
<i>interRAI CHA</i>	<i>RAI HC</i>
Cognitive Performance Scale	Cognitive Performance Scale
Depression Rating Scale	Depression Rating Scale
IADL Involvement Scale	IADL Involvement Scale
None	IADL Difficulty Scale
ADL Self Performance Hierarchy Scale	ADL Self Performance Hierarchy Scale
None	ADL Short Form
None (anticipated soon <sup>59</sup> )	ADL Long Form
MAPLe	MAPLe
CHESS	CHESS
Pain Scale	Pain Scale
Self-Reliance Index	Self-Reliance index

<sup>58</sup> <http://www.interrai.org/algorithms.html>

<sup>59</sup> Ontario Community Support Association, Conference Notes, October 2012.

<sup>60</sup> interRAI, *interRAI-HC (Home Care)*, accessed December 16, 2013 ([www.interrai.org/home-care.html](http://www.interrai.org/home-care.html))

### *Integrated Assessment Record (IAR)*

The [Integrated Assessment Record](#) exists to ensure the secure transfer of personal health information. Likened to a virtual library, it is an electronic application that allows Health Service Providers to securely view client assessment information. The [Integrated Assessment Record Privacy and Security Framework](#) guarantees that the same privacy and security measures are used across all Health Service Providers when assessments are shared electronically.<sup>61</sup>

### *Health Partner Gateway (HPG)*

Described as an electronic fax machine, the Health Partner Gateway “provides a single electronic solution to securely exchange health information between a Community Care Access Centre and its partners.”<sup>62</sup> In Champlain, this capacity is limited to certain Health Service Providers who are funded to provide specific services such as Day Programs, Assisted Living Services, Respite, and Transportation.

### *Current State*

All agencies providing the Functional Centres under review have implemented the interRAI CHA as their standard comprehensive assessment for CHA designated services. Seventy-nine percent are compliant with the requirement to complete the Preliminary Screener. Around 66% of Health Service Providers are regularly accessing the Integrated Assessment Record and 59% have access to the Health Partner Gateway.

The table on the following page lists the Health Service Provider funded to deliver one or more of the eight services under review, the type of assessment each is required to complete, their compliance status, their utilization of the Integrated Assessment Record, and their use of the Health Partner Gateway, if applicable.

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<sup>61</sup> Community Care Information Management, *CSS CAP Update Presentation*, July 6, 2011.

<sup>62</sup> <http://healthcareathome.ca/serviceproviders/en/Health-Partner-Gateway>

Health Service Providers	HPG	IAR	Services							
			ADP	ALS	HM	MD	PS	RE	SA	TR
Abbotsford House @ The Glebe Centre			CHA						PS	PS
Algonquins of Pikwàkanagàn				CHA					PS	PS
Alzheimer Society of Cornwall and District			CHA							
Arnprior Regional Health			CHA	CHA						
Arnprior-Braeside-McNab Seniors at Home Program Inc.						PS			PS	PS
Barry's Bay and Area Senior Citizens Home Support Services				CHA		PS				PS
Beth Donovan Hospice		N/A	Other							
Bruyère Continuing Care			CHA	CHA						PS
Calabogie and Area Home Support						PS				PS
Canadian Red Cross				CHA			CHA			PS
Carefor Health & Community Services			CHA	CHA	CHA	PS	CHA	CHA	PS	PS
Carleton University Attendant Services Program				CHA						
Centre de services Guigues		CCAC	HC						PS	PS
Champlain Community Care Access Centre								HC		
City of Cornwall			CHA			PS				
City of Ottawa			CHA							
County of Renfrew			CHA							
Eastern Ottawa Resource Centre			CHA			PS			PS	PS
Eganville and District Senior Citizens Needs Association						PS			PS	PS
Glengarry Inter-Agency Group Inc.			CHA							
Groupe Action pour l'enfant, la famille et la communauté de P-R							CHA			
Hawkesbury General Hospital				CHA						
Home Support Services – Morrisburg and District		WNPHC				PS				
Hospice Care Ottawa		N/A	Other							
Jewish Family Services of Ottawa			CHA			PS			PS	PS
Kemptville and District Home Support						PS			PS	PS
Marianhill Inc.			CHA	CHA	CHA			CHA		
Maxville Manor			CHA			PS				PS
Meals on Wheels/La Popote roulante						PS				
Mills Community Support Corporation				CHA		PS		CHA	PS	PS
Mohawk Council of Akwesasne		CCAC				HC	HC	HC		
Montfort Renaissance				CHA						
North Renfrew Long-Term Care Services Inc.			CHA	CHA		PS				PS
Ottawa West Community Support			CHA	CHA	CHA	PS		CHA	PS	PS
Parkway House				CHA						
Personal Choice Independent Living				CHA						
Renfrew and Area Seniors' Home Support Inc.						PS			PS	PS
Renfrew Victoria Hospital				CHA						
Rural Ottawa South Support Services			CHA			PS		CHA	PS	PS
Services Communautaires de Prescott-Russell			CHA			PS			PS	PS
South East Ottawa Community Health Centre									PS	PS
The Good Companions Seniors' Centre			CHA						PS	PS
The Olde Forge Community Resource Centre			CHA						PS	PS
The Perley and Rideau Veterans Health Centre			CHA	CHA						
VHA Health and Home Support				CHA			CHA	CHA		
Wabano Centre for Aboriginal Health										PS
Western Ottawa Community Resource Centre			CHA			PS			PS	PS
Williamsburg Non-Profit Housing Corporation			CHA	CHA		PS		CHA	PS	PS
<div><div>ADP – Adult Day Programs</div><div>ALS – Assisted Living Services</div><div>HM – Homemaking</div><div>MW – Meals on Wheels</div><div>PS – Personal Support / Independence Training</div><div>RE – Respite</div><div>SA – Service Arrangement / Coordination</div><div>TR – Transportation</div></div> <div>Green-Compliance; Yellow-Working towards compliance; Red-implementation plans not yet initiated; White-Status unknown</div>										

In October 2014, the Ottawa Community Support Coalition held two interRAI CHA training sessions: The interRAI CHA Core and Functional Supplement Workshop, a comprehensive two-day workshop tailored to provide new assessors with the skills and confidence needed to perform quality interRAI CHA assessments; and the interRAI CHA Coding Refresher, a one-day workshop for current assessors in need of a solid refresher in the key components of core and functional coding. The training responded to an expressed need by Health Service Providers who were experiencing challenges with assessor capacity due to staff turnover.

#### Current and Planned Initiatives

A number of initiatives are either underway or in development to facilitate smooth transitions of care for clients:

- **Integrated Assessment Record:** The CSS Decision Support Analyst is addressing discrepancies with the Integrated Assessment Record reports. Once addressed, the Integrated Assessment Record reports will inform the volume and type of assessments being completed by Health Service Providers of CSS which, in turn, will identify the need

for support and development. In addition, currently the full content of completed assessments is not available from the Integrated Assessment Record, thereby creating problems in care coordination and service planning. This is an item to be resolved in the future.

- **Assessor Training Opportunities:** Significant considerations for future training opportunities are underway, especially due to the success of the training provided in October 2014. There is an identified need to sustain the competency levels of sector assessors and to plan for succession.
- **Sharing Assessments:** A mini-pilot project between CHA-designated agencies in the Eastern Counties and the Champlain CCAC is assessing the current state of the assessment sharing process to identify ways to minimize duplicate assessments for clients. The results of the project will be shared with key stakeholders in the CSS sector and the Champlain CCAC with the goal of implementing a standard process across Champlain.

## Referrals

### Background

Within the Community Support Sector, there were many different referral forms transmitted in a variety of ways to a number of Health Service Providers. The CARESS Project Steering Committee aimed to develop a common electronic referral tool. To this end, the Project Steering Committee endorsed the following initiatives to support client transitions between agencies and programs.

- **IRIS:** The Inter-agency e-Referral Information System, developed in 2011 and implemented in 2012 for the Adult Day Program wait list management pilot project, enables Health Service Providers of Day Services to make electronic referrals to the Champlain Community Care Access Centre.
- **HPG/CHRIS:** The Health Partner Gateway/Client Health and Related Information System enable the Champlain CCAC to make electronic referrals to Health Services Providers of Day Services, Assisted Living Services and Respite Services.

In addition to the above-mentioned initiatives, the implementation of the common assessment tools paved the way for the sector to be adequately resourced in information technology thereby equipping Health Service Providers to adopt an electronic referral system on a broad scale. In February 2014, the Champlain Community Common Referral Form was developed and deployed. Feedback was received and a second version is in development. Its integration into existing client information systems is pending.<sup>63</sup>

The Champlain Community Common Referral Form is derived from a provincial standard being piloted in various areas of Ontario as part of the

Resource Matching and Referral initiative. The corresponding Addendum is the result of extensive work already completed to consolidate a variety of referral forms as part of the IRIS initiative.

This Champlain Community Referral Form (accompanied by relevant attachments as required) will replace various forms currently used for referral purposes. Once fully implemented, it is expected to improve communication between Health Service Providers when a referral is required and enhance the collection of useful data for health care planning. Furthermore, the integration of a common referral form into electronic systems would not only speed up the referral process but also make it more consistent and reliable for Health Service Providers and the clients they support.

### Overview

The common referral form proposed for use by Health Service Providers in Champlain consists of two parts: a one-page Champlain Community Common Referral Form and a two-page addendum. The forms are available for immediate use in a fillable PDF format suitable for transmission by fax, physical mail or secure electronic means. The form can be completed in English or French. Once filled in, the forms contain Personal Health Information and must be protected. The blank forms can be printed and completed by hand or a PDF editing tool of choice. These forms can be used for referrals to the Champlain CCAC or another Health Service Provider of CSS. Although the referral form was due to be adopted into general use by April 2014, challenges in its integration into Canesto CIMS

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<sup>63</sup> McMahon, Darryl. CARESS Steering Committee High Level Status Report, December 2014.



HR and other client information systems have subsequently delayed the adoption.

#### Current State

As requested by the CARESS project committee, Health Service Providers provided feedback on the Champlain Community Common Referral Form. Some Health Service Providers of CSS

have adopted the form. However, broader and standardized implementation amongst the Health Service Providers awaits the development of the electronic referral system.

#### Current and Planned Initiatives

The CARESS project Steering Committee identified the following tasks as related to the development and implementation of an electronic referral system:

- Confirm partner agency interest and priority for implementation of the e-referral system.
- Create and sign service agreements to enable the receipt and distribution of client health information via the e-referral tool.
- Expand the e-referral tool beyond the Health Service Providers associated with the CARESS Project.



# Detailed Data by Agency

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
72 5 82 05    COM IH & CS																					
Service Arrangement/Coordination																					
ABBOTSFORD HOUSE @ THE GLEBE CENTRE	524,137 (Abbotsford CSS ONLY – no Glebe Centre funding included)	38,711	20,782	0	0	Fee arranged between individual providing work, and client	None. 2 hours recommended	Yes	Old City of Ottawa boundary in West. Eastern side of Fisher Ave, up to Baseline, Baseline to Prince of Wales. Prince of Wales to Preston. Serves East Side of Preston St	183 (estimates that 40% are rollover clients. See note below)		257	26								
*** Rollover Clients: Many agencies will keep an active client file within their database system after a worker match has been finalized, as they assume that the client may return to service for an alternate match in the future. Some agencies also have an internal practice of scheduled follow up with clients who remain active within their databases, as Service Arrangement clients. Scheduled calls may result in a new match for the same need, as well as new matches for other client needs. Follow up calls may also confirm the existing match. Some of these reconfirmed matches have been counted by agency staff as a 'rematch', and in some cases as a completely new match. This results in higher than normal key indicator data for individuals served and visits, as agencies effectively roll the same clientele from one year to the next in their data submissions. In the event that the follow up call spans the fiscal year, both the match and the individual served, have been double counted with this practice.																					
ALGONQUINS OF PIKWAKANAGAN	251,425	87,263	87,263	0	0	0	None	No. Service provided by paid employees.	Pikwakanagan First Nation boundaries	46		Not available. Can assume 46, minimum	n/a								
ARNPRIOR, BRAESIDE, MCNAB SENIORS AT HOME PROGRAM	383,462	3,615	*3,615 (assumes no fundraised dollars and no client fees collected)	*0 (assumed)	0	Fee arranged between individual providing work, and client	No	Yes. Directory model	Arnprior-Braeside-McNab	79		1,989	n/a								
CAREFOR HEALTH AND COMMUNITY SERVICES – EASTERN COUNTIES	3,892,582	93,490 CSS 63,175 Going Home	135,704	20,961 CSS 0 Going Home	0	0	No minimum or maximum for CSS-only clients  10 Day maximum for Going Home clients	Yes	Stormont, Glengarry, City of Cornwall, North Dundas	245 CSS  741 Going Home		81 CSS  351 Going Home	164 CSS  443 Going Home								



	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
CAREFOR HEALTH AND COMMUNITY SERVICES – RENFREW COUNTY GOING HOME PROGRAM ONLY	2,135,192	63,901	63,901	0	0	0	No minimum 10 day maximum	Yes	All of Renfrew County	622 Going Home		n/a	622 Going Home									
CENTRE DES SERVICES GUIGUES	1,551.239 (Agency) 926,000 (CSS)	171,345	140,471	8,682	0	Fee arranged between individual providing work, and client. \$14/hr recommended	2 hour minimum	Yes. Francophone Services only. Moved to directory model in August 2013	North - River, South to Hunt Club (north side of street served), East Blair Rd (serves West side of Blair), West (East of Moodie Drive.)	212		421	n/a									
EASTERN OTTAWA RESOURCE CENTRE	3,328,870 (Agency) 1,083,305 (CSS Only)	48,038	39,475	525	0	Fee arranged between individual providing work, and client	2 hour suggested min. No max	Yes	Blackburn Hamlet, Beacon Hill, Carlsbad Springs, Gloucester South, Orleans, Cumberland, Navan, Vars and Sarsfield	177		n/a	205									
EGANVILLE AND DISTRICT SENIOR CITIZENS NEEDS ASSOCIATION	331,136	8313	8,313	0	0	Fee arranged between individual providing work, and client	None	Yes. Was reported in error as Home Maintenance in 13/14. These figures are used here	North Algona, Wilberforce, Bromley portion of Adamston-Bromley	45		1,680	n/a									
THE GOOD COMPANIONS SENIORS' CENTRE	1,435,133	203,685	124,931	0	17,616	\$21-25/hour, flat rates depending on service being offered	2 hour minimum	Yes. Contractor model	North of Queensway, between Preston and Blair Rd, River to the North. Also serves "Avenue" streets off Tremblay	312		n/a	443									
JEWISH FAMILY SERVICES OF OTTAWA	3,994,243	13,354 Service Arrangement 85,718 Homemaking	13,354 Service Arrangement 85,718 Homemaking	0	0	\$9/hr for Homemaking Hours. SA fee set by individual providing work	Homemaking - Min 3 hour. No max. Home Help - 3 hour minimum for home help	Partially. See *** OHRS Notes below	City of Ottawa. Will extend beyond city boundaries in exceptional cases, to meet needs of Jewish individuals	114 Service Arrangement 9 Homemaking		305 Service Arrange	n/a									79 Homemaking
*** OHRS Notes Service Arrangement Program: Agency reports 2 internally distinct programs to the service arrangement functional centre – one program matches OHRS definition. Program serving Jewish clientele provides arrangement of respite and home help services. Multicultural Seniors Program provides arrangement for hairdressing and language services, which do not fit OHRS definition.  Homemaking Program: Agency reported these activities under the Homemaking Functional Centre in 13/14. Agency Staff match eligible clients with Alternacare who then provide homemaking and respite direct service. Homemaking program is available to multicultural seniors. Agency staff complete internal intake, including means test, to determine client need and eligibility. No CHA assessment done.																						
KEMPTVILLE AND DISTRICT HOME SUPPORT INC	310,869	12,453	8,000	4453	0	Fee arranged between individual providing work, and client Suggested fee of \$15/hr for Home	Home Help – 2 hour minimum.	Yes	Municipality of North Grenville, River Rd South side is served by KDHS Boundary Rd to the East. See Map provided by Susan	69		n/a	94									

79  
Homemaking

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
						Help, \$20/hr for Home Maintenance															
MILLS COMMUNITY SUPPORT CORPORATION	1.22 million (CSS Only)	9,377	3,429	980	4968	\$15/hr	No	Yes. Switched to directory model partway through 13/14	Mississippi mills, Almonte, Pakenham, and Ramsay ward (Almonte); 5% of clients may have addresses within Ottawa region.	119		117	n/a								
THE OLDE FORGE COMMUNITY RESOURCE CENTRE	661,702	79,018	69,313	0	9,705	\$20 fee for paid employees providing service (generally 1 time job) Otherwise, fee arranged between individual providing work, and client	2 hours Home Help, 1 hour Home maintenance minimums	Yes. Home help uses directory model. Home maintenance program is a hybrid model – some paid employees with cost recovery outside of LHIN funding; some arrangement made using directory	Baseline to the south, Ottawa river to north, Clyde avenue to Baseline Rd north to Queensway, Woodroffe avenue to Ottawa river to the east, Morrison and Roseview to the west.	328		529	n/a								
OTTAWA WEST COMMUNITY SUPPORT	2,695,834	79,621	36,707	8000	34,914 – Figures reflect brokerage model. OWCS now uses directory model	Homemaking \$18/hr, Heavy Housecleaning and Home Maintenance \$20/hr	None	Yes. Brokerage model in 13/14. Directory model in 14/15	River, West side of Preston St., Baseline (North Side served), to Maitland, Queensway to Woodroffe	312		1359 (roll over clients included)	n/a								
RENFREW AND AREA SENIORS' HOME SUPPORT INC	302,226	17,659	8,959	8700	0	Fee arranged between individual providing work, and client. \$15-20/hr recommended	No	Yes. Directory model. Partial data may include some service enhancements like hairdressing and garbage removal, to meet a small number of individual client needs	Town of Renfrew, Horton Township, Greater Madawaska, Hwy 132 to Griffith, Parts of Adamston-Bromley, parts of McNab-Braeside, East of Cobden	87		117	n/a								
RURAL OTTAWA SOUTH SUPPORT SERVICES	1.8 million	Unavailable	Unavailable	Unavailable	0 (assumed)	Fee arranged between individual providing work, and client	None	Yes. Directory model	West Hwy 7, Town of Ashton, Hazeldean and Hwy 7, Ashton Station Rd, Montague Boundary Rd, Donnelly Drive to	382		382	n/a								

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
									the River, East Boundary is Gregoire, South boundary Belmede Rd. South side of Mitch Owens, Harts Desire being served by ROSSS, although WOCRC catchment, Bridge to Bankfield, Brophy, up Eagleson												
SERVICES COMMUNAUTAIRES DE PRESCOTT-RUSSELL	1,224,150	2,825	0 Agency reports no LHIN funding attributed to this program	2,825	0	Avg. \$15/hr home help; \$25 home maintenance. Varies by community served	None	Yes	County of Prescott-Russell; 4 office locations	65		n/a	65								
SOUTH-EAST OTTAWA COMMUNITY HEALTH CENTRE	579,902 (CSS only)	201,186	146,188	16,031	12,288	Fee arranged between individual providing work, and client	Under brokerage, 2 hour min. (13/14). Now workers set minimum, but 2 hours is common	Yes. Brokerage until March 31, 2014. Directory model now used.  Note: Rollover clients and matches have been included in key indicator data. See note below.	Riverside to Bank, up bank to Hunt Club, North side of Hunt Club, Riverside to Industrial, St. Laurent . West boundary was expanded 2 years ago - Hunt Club Riverside area.	811 (roll over clients included)		1,583 (roll over clients included)	326 (roll over clients included)								
*** Rollover Clients: Many agencies will keep an active client file within their database system after a worker match has been finalized, as they assume that the client may return to service for an alternate match in the future. Some agencies also have an internal practice of scheduled follow up with clients who remain active within their databases, as Service Arrangement clients. Scheduled calls may result in a new match for the same need, as well as new matches for other client needs. Follow up calls may also confirm the existing match. Some of these reconfirmed matches have been counted by agency staff as a 'rematch', and in some cases as a completely new match. This results in higher than normal key indicator data for individuals served and visits, as agencies effectively roll the same clientele from one year to the next in their data submissions. In the event that the follow up call spans the fiscal year, both the match and the individual served, have been double counted with this practice.																					
WESTERN OTTAWA COMMUNITY RESOURCE CENTRE	6,786,651 (agency) 2,470,587 (CSS incl. Harmer House)	283,089	47,196	1,198	184,564 – Figures reflect brokerage model. WOCRC now uses directory model	Under brokerage: fee varied by service. Approx. \$18-20/hr.  Beginning in 14/15: Fee arranged between individual providing work, and client	Under brokerage, 2 hour minimum. Now worker sets minimum	Yes. Brokerage model used in 13/14. Directory model began April 1, 2014	Former township of West Carleton, Former City of Nepean	517		661	n/a								

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
WILLIAMSBURG NON-PROFIT HOUSING CORPORATION	1,357,396	13,193	10,829	0	4757	\$9/hr	Home Help and Home Maintenance services. Home help has 2 hour minimum. No respite served under this FC	Yes	Municipality of South Dundas	82		222	126								
TOTALS			1,230,096+							4194 CSS		9749 CSS	1449 CSS								
										2349 Going Home		1335 Going Home	1558 Going Home								
72 5 82 10 COM IH & CS																					
Meals Delivery																					
ARNPRIOR-BRAESIDE-MCNAB SENIORS AT HOME PROGRAM	383,462	39,347	39,347 (assumed)	0 (assumed)	32,346	\$8 – hot meal \$5 – frozen meal	None	Yes. Home assessment done for hot meals	Frozen: McNab-Braeside, Town of Arnprior occasionally West Carleton (less than 5%), Hot meals – Town of Anrprior	73									2,613		
BARRY'S BAY AND AREA SENIOR CITIZENS HOME SUPPORT SERVICES	1,084,879	42,694	33,164	750	8,780	\$4 hot meal \$4.50 frozen meal	None	Main program yes. Smaller congregate meals program has been reported to this functional centre, but has been removed from 13/14 stats by estimate	Hot Meals: Mondays - Barry's Bay; Tuesdays and Thursdays - Barry's Bay, and within 5 km of Barry's Bay; Wednesday - Palmer Rapids and Combermere; Friday - Barry's Bay, Wilno, Killaloe.  No hot meals to Round lake and Whitney due to safe food handling regulations.  Frozen meals - ordered through Carefor 1x/month. Arrive bi-weekly. Meals housed at BBHS - some are	63									2,795		

	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
									delivered as needed, some are held on site and distributed during client visits.													
CAREFOR HEALTH AND COMMUNITY SERVICES – RENFREW COUNTY	2,135,192	134,002	57,900 CSS 37,836 Going Home	0	38,266 CSS 0 Going Home	\$4.50/meal 0 Going Home	None	Yes. Carefor RC also acts as hub for Appetito frozen meals.	Direct meal delivery to Pembroke and Petawawa.	119 CSS 479 Going Home												2,438 CSS 6,176 Going Home
CAREFOR HEALTH AND COMMUNITY SERVICES – EASTERN COUNTIES	2,135,192	304,442	123,558 CSS 37,836 Going Home	28,274 CSS 0 Going Home	99,825 CSS 0 Going Home	\$4.50/meal CSS 0 Going Home	None CSS No minimum 10 day max. Going Home	Yes	Stormont, Glengarry, North Dundas	341 CSS 318 Going Home												22,270 CSS 3,153 Going Home
CAREFOR HEALTH AND COMMUNITY SERVICES – OTTAWA GOING HOME ONLY	1,405,851	68,681	68,681 Going Home	0 Going Home	0 Going Home	0 Going Home	No minimum 10 day max Going Home	Yes	City of Ottawa	609 Going Home												5,619 Going Home
CITY OF CORNWALL	688,715	343,281	69,394	39,530 Note: Includes United Way and donated mileage reimbursements from volunteers	179,076	\$5.65/meal Q1-3 \$6/meal Q4	Yes. Clients must purchase 5 meals/week and asked to purchase a minimum of 2 weeks. Client space put on hold to max of 1 month during absence due to illness or vacation	Yes	City of Cornwall	326												29,399
EASTERN OTTAWA RESOURCE CENTRE	3,328,870 (Agency) 1,083,305 (CSS Only)	151,059	37,845	1,800	96,251	\$6 - Hot Meal,  Frozen meals–  Regular: \$2 Soup \$5.50 Entrée \$2 Dessert  Gourmet: \$5.25 Soup \$7.25 Entrée  \$35.75 Frozen Meal Package (includes 5 Entrees + 5 soups OR 5 Desserts)	None	Yes	Blackburn Hamlet, Beacon Hill, Carlsbad Springs, Gloucester South, Orleans, Cumberland, Navan, Vars and Sarsfield	208												16,357

	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
EGANVILLE AND DISTRICT SENIOR CITIZENS' NEEDS ASSOCIATION	331,136	23,599	12,263	2376	8960	\$5/meal	None	Yes. Hot meals delivered, Frozen meals picked up by SR	North Algona Wilberforce, Bonnechere Valley, Bromley portion of Adamston-Bromley	70												1,792
HOME SUPPORT SERVICES - MORRISBURG AND DISTRICT	94,091	94,091	53,790	2,025	35,948	\$4.50/meal	None	Yes. Agency has 1 employee and relies on volunteers for all other roles.	West- Broken 2 <sup>nd</sup> Rd (Iroquois), East – Upper Canada Rd, North – 401, South – River Note: Ault Island is an area of confusion for clients and service providers	42												6,542
JEWISH FAMILY SERVICES OF OTTAWA	3,994,243	46,629	18,559	0	28,070	\$10 - Fresh meal \$8.50 - Frozen meal	None	Yes. Hot meals on Fridays only. Frozen meals delivered on Mondays. Kosher Meals delivered as needed for Going Home clients	City of Ottawa. Will extend beyond city boundaries in exceptional cases, to meet needs of Jewish individuals	34												2,851
KEMPTVILLE AND DISTRICT HOME SUPPORT INC	310,689	34,835	15,850	3,418	15,567	Hot and Frozen meals: \$5.25 entrée. \$1.45 soup. \$1.45 dessert	None	Yes. Hot and Frozen Meals, Mon-Fri, except Stat	Hot meals delivered in Kemptville only. Frozen meals delivered in North Grenville	47												2,471
MAXVILLE MANOR	360,604	49,641	39,139	0	10,502	\$4.50/meal	None	Yes	East – Greenfield Rd, North – Dunvegan Rd to 417 to Moose Creek, South Tommy's Corner Rd to Hwy 43, East through Monkland, Apple Hill, Loch Garry, Back up to Greenfield Rd (approx., 20 km radius of Maxville)	63												2,448 Note: Number has historically included anonymous meal purchases at coffee shop. Estimate: 350 meals/year
MEALS ON WHEELS/LA POPOTE ROULANTE	1,095,000	1,095,000	335,593	15,093	535,759	\$5.20 - Hot meal \$5.85 - Individual Frozen Meals \$29.75 - Pkg of 7 Frozen meals	Hot Meals – No Min. Frozen meals delivered as a package of 5 or 7 meals. Exceptions made in special circumstances	Yes. Meals delivered Mon-Saturday	Share boundaries with EORC to south and East, with WOCRC to the West, and River.	1,575												107,103

	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
MILLS COMMUNITY SUPPORT CORPORATION	1.22 million (CSS Only)	54,652	15,090	10,602	28,960	\$7.50/meal	None	Yes. Hot meals only.	Mississippi Mills, except for Pakenham. South East LHIN has office in Pakenham for various services. SE-LHIN program provides frozen meals only	48												3,795
MOHAWK COUNCIL OF AKWESASNE	3,479,043	233,520	233,520	0	0	0	80 meals/day distributed within Akwesasne communities. Clients are assessed and waitlist maintained by staff	Yes. Hot meals only. Paid staff provide all coordination and delivery.	Serves 3 districts within Akwesasne community – Cornwall Island, St-Regis, and Snye	240												26,500
NORTH RENFREW LONG-TERM CARE SERVICES INC	1,440,640 (CSS Only)	85,976	54,404	0	22,175	Hot and Frozen - \$5.75/meal	None	Yes. Hot meals delivered at 4:30 each day. Frozen meals can be arranged as required.	Hot meals from Petawawa Forestry to Point Alexander. Frozen meals can be arranged from Petawawa Forestry to Deux Rivières	57												5,663
OTTAWA WEST COMMUNITY SUPPORT AGING IN PLACE ONLY	2,695,834	74,000	74,000	0	0	0	No	Yes	In 11 designated Aging in Place Buildings	1229 AIP												3,968 AIP
RENFREW AND AREA SENIORS' HOME SUPPORT INC	302,226	17,659	Approx. 8500	8700	Client fees are collected by Renfrew Victoria Hospital and paid to Carefor for meals prepared.  Renfrew Seniors Support collects small admin. Fee from each meal. This figure is unavailable for 13/14	\$5 – frozen meal	None	Yes. Frozen meals only.	Town of Renfrew, Horton Township, Greater Madawaska down Highway 132 to Griffith, parts of Adamston Bromley, parts of McNab Braeside, East of Cobden	46												2,613
RURAL OTTAWA SOUTH SUPPORT SERVICES	1.8 million	Unavailable	Unavailable	Unavailable	Unavailable	\$5.75 - hot and frozen meals	None	Yes	West Hwy 7, Town of Ashton,	183												7,014

	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
									Hazeldean and Hwy 7, Ashton Station Rd, Montague Boundary Rd, Donnelly Drive to the River, East Boundary is Gregoire, South boundary Belmede Rd. South side of Mitch Owens, Harts Desire being served by ROSSS, although WOCRC catchment, Bridge Bankfield, Brophy, up Eagleson													
SERVICES COMMUNAUTAIRES DE PRESCOTT-RUSSELL	1,224,150	102,934	41,829	785	60,320	Cost varies \$4.25-\$7.00, depending on location within Prescott-Russell	No; Meals are delivered in areas where there is a concentration of clients requesting the service	Yes	County of Prescott Russell; Agency has difficulty providing service in small villages like Limoges and Chutes a Blonde	281												
WESTERN OTTAWA COMMUNITY RESOURCE CENTRE	6,786,651 (agency) 2,470,587 (CSS incl. Harmer House)	246,392	93,204	389	127,485	\$5.75 - hot meal \$4.75 - frozen meal \$31.50 - package of meals	Frozen meals minimum of 5, if delivered	Yes	Former city of West Carleton, Former City of Nepean	346												
WILLIAMSBURG NON-PROFIT HOUSING CORPORATION	1,357,396	24,726	14,406	0	7,579	\$4.50/meal	None	Yes	South Dundas County	33												
TOTALS			1,515,708							4195 CSS												
										1406 Going Home												
										1229 AIP												



	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
72 5 82 14    COM IH & CS																						
Transportation – Client																						
ABBOTSFORD HOUSE @ THE GLEBE CENTRE	524,137 (Abbotsford House only. Not incl. LTC at Glebe Centre)	21,483	7,835	0	8,774	Medical Transportation Flat rate – \$12 one way OR round trip.  Transportation included in Day Service fees.  Dementia Day Program clients pay embedded transportation fee plus additional \$5 for round trip	No min. No max.	Yes. Day Program and Medical Trips prioritized	Old City of Ottawa boundary in West - the Eastern side of Fisher Ave; up to baseline. Baseline to prince of wales. Prince of Wales, down Preston street. Serves East Side of Preston street, not west. Follow Queensway to Rideau River, Rideau River to Bank Street. West side of Bank Street served. Bank street to Huntclub to Prince of Wales	130		5,899										
ALGONQUINS OF PIKWĀKANAGĀN	251,425	16,060	16,060	16,060	0	0	None	Yes. Agency van provides all drives with a paid staff driver	95% of drives within Pikwaknagan. HSP will serve unmet CCTC needs in Eganville, Killaloe, Renfrew, Pembroke	50		719										
ARNPRIOR-BRAESIDE-MCNAB SENIORS AT HOME PROGRAM	383,462	236,674	*71,077 (assumed)	*0 (assumed)	165,597	Flat rates in town \$5-6, depending on location.  Out of town \$0.56/km	No	Yes	Arnprior, McNab Braeside, very occasionally West Carleton (5% of less)	561		15,519										
BARRY'S BAY AND AREA SENIOR CITIZENS HOME SUPPORT SERVICES	1,084,879	159,717	67,188	750	74,247	Flat rate based on \$0.42/km. Driver reimbursed this amount completely.  \$8 in town flat rate  Insurance companies, ODSP etc.	None	Yes. Enhanced Service Recipient definition to include all members of community needing transportation for health needs. HSP reports high number of ODSP drives and	Whitney, Quadville, to Foymount (Eganville serves Foymount), Round Lake, Deacon Bridge, border with south Algonquin Park,	217		5,962										

	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
						charged 100% rate. Personal payers given 25% discount		Ontario Works drives. Mental Health/Addictions and Dialysis make up bulk of demand														
CALABOGIE AND AREA HOME SUPPORT PROGRAM	56,215	35,296	26,729	1,103	7,464	Flat Rate Fees Ottawa - \$40 Renfrew - \$15 Arnprior - \$20 Pembroke - \$20 Village of Calabogie - \$5	None	Yes. Enhanced Service Recipient definition to include all members of community needing transportation for health needs.	Greater Madawaska Township	39		634										
CANADIAN RED CROSS	3,513,200 (CSS only)	308,863	44,640	0	261,919	\$65 round trip to Ottawa. Alternate routes pro-rated based on distance.	Medical appts only; No distance minimum	Yes	Transportation provided ONLY for destinations outside Cornwall city limits. Clients may reside in Cornwall and trip may originate in Cornwall. Est. 90% of trips to Ottawa	960		7,245										
CAREFOR HEALTH AND COMMUNITY SERVICES – EASTERN COUNTIES	3,892,582	593,887	360,049	40,145 CSS 0 Going Home	193,693 CSS 0 Going Home	\$0.40/km, flat rate of \$8 within a 20 km radius of client home; Volunteers reimbursed \$0.42/km 0 Going Home	None CSS 10 day maximum Going Home	Yes	All of Eastern Counties, rarely in South Dundas	925 CSS 63 Going Home		19,323 CSS 165 Going Home										
CAREFOR HEALTH AND COMMUNITY SERVICES – RENFREW COUNTY	2,135,192	1,439,460 (includes funding envelope for regional coordinators)	874,412	0	363,102 CSS 0 Going Home	\$0.40/km, flat rate \$9 in Pembroke. 10% admin fee charged to third party (ODSP, Veteran's Affairs) 0 Going Home	None CSS 10 day maximum Going Home	Yes, but broader SR definition. Service Children and Families in partnership with other agencies	Renfrew County	1286 CSS 288 Going Home		23,547 CSS 441 Going Home										
CAREFOR HEALTH AND COMMUNITY SERVICES – OTTAWA GOING HOME ONLY	1,405,851	29,816	29,816	0	0	0	No. 10 day maximum	Yes	City of Ottawa	370 Going Home		687 Going Home										
CENTRE DES SERVICES GUIGUES	1,551,239 (Agency) 926,000 (CSS Only)	196,553	160,450	0	27,406	Day Services at Guigues - \$9/round trip; Day Services at Champlain -	None	Yes. Francophone clients only	North - River, South to Hunt Club (north side of street served), East Blair Rd (serves West	431		4,800										

	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
						\$12/round trip; Within 20 km radius of Guigues - \$9/round trip; Outside 20 km radius of Guigues Centre - \$12/round trip			side of Blair), West (East of Moodie Drive.)													
EASTERN OTTAWA RESOURCE CENTRE	3,328,870 (Agency) 1,083,305 (CSS Only)	70,000	28,356	938	40,706	Fee rings based on distance. 1-10km - \$11; 11-30km - \$16; 31-50km – 51-70km - \$31; 71-90km - \$41; 91+km - \$0.50/km	None	Yes	Blackburn Hamlet, Beacon Hill, Carlsbad Springs, Gloucester South, Orleans, Cumberland, Navan, Vars and Sarsfield	203		5,186										
EGANVILLE AND DISTRICT SENIOR CITIZENS' NEEDS ASSOCIATION	331,136	24,417	7,505	2,448	14,464	\$0.44/km	None	Yes. Enhanced Service Recipient definition to include all members of community needing transportation for health needs.  Program serves all community members with transportation needs	North Algona Wilberforce, Bonnechere Valley, Bromley portion of Adamston-Bromley	57		1,297										
THE GOOD COMPANIONS SENIORS' CENTRE	1,435,133	151,611	92,595	0	9,947	\$12/round trip; van trips \$30/hr	No Min Distance. Min fee, \$12	Yes. Predominantly urban, medical and grocery trips	North of Queensway, between Preston and Blair Rd, River to the North. Serves "avenue" streets off Tremblay, as well.	233		4,754										
JEWISH FAMILY SERVICES OF OTTAWA	3,994,243	95,377	53,625	36,960	4792	\$12 round trip anywhere in Ottawa.	None	Yes. Priority to medical transportation and day services. Agency provides support on OC Transpo busses for some clients.	City of Ottawa. Will extend beyond city boundaries in exceptional cases, to meet needs of Jewish individuals	134		1,725										
KEMPTVILLE AND DISTRICT HOME SUPPORT INC	310,689	56,136	32,000	2,355	21,781	\$6 in town, round trip. Flat fee for long distance trips - pre-calculated based on \$0.40/km.	No Min, No Max.	Yes. Priority to medical appts, including Dialysis.	Municipality of North Grenville. Serves south side of River Rd, Boundary Rd is eastern limit. Trips most often to Ottawa and Smiths Falls. Providing	95		2,185										

	Funding							Add. Stats		Service Recipient Interactions														
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals			
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day				
						Ride sharing for Dialysis, clients are given a small discount on fee			trips to CPC adult day program. Day program at CPC is funded by South East LHIN. Day Service Site is in Kemptville															
MAXVILLE MANOR	360,064	94,371	55,920	0	38,451	\$0.40/km; Under 20 km flat rate \$6	None	Yes.  13/14 figures do not include trips provided to Day Service clients (Day Service trip figure unavailable)	Alexandria, Vankleek Hill, Moose Creek, Monkland, Martintown, Lancaster(Day Program)	166		5,986 Note: Number is estimated. Figure was created by doubling existing Goldcare 1 way data from 13/14												
MILLS COMMUNITY SUPPORT CORPORATION	1.22 million (CSS Only)	123,280	61,732	15,327	33,040	\$0.45/km with volunteer driver  \$0.90/km in accessible bus  \$0.55/km agency bus  \$7 flat rate in Almonte	No	Yes	Mississippi Mills including Pakenham. Occasional trips to Carleton Place and Beckwith	327		10,234												
NORTH RENFREW LONG-TERM CARE SERVICES INC	1,440,640 (CSS Only)	47,698	30,968	0	17,000	\$0.40/km. \$160 flat rate to Ottawa. In town of Deep River, volunteers provide transportation at no fee to client	None	Yes	Forestry to North End of Renfrew County	152		4,757												
THE OLDE FORGE COMMUNITY RESOURCE CENTRE	661,702 (CSS Only)	89,546	60,914	0	28,632	\$6 round trip – Shopping  Medical - \$12, \$15, or \$20 depending on distance  Medical appointments longer than 3 hours - \$18, \$20, or \$25  Foot clinic ride - \$10	No minimum distance. No Maximum	Yes. Priority to medical appts, grocery trips, foot clinics, luncheons, shopping trips.  No rides provided to Day Program	Baseline to the south, Ottawa river to north, Clyde avenue to baseline rd. north to Queensway, Woodroffe avenue to Ottawa river to the east, Morrison and Roseview to the west.	284		8,564												

	Funding							Add. Stats		Service Recipient Interactions													
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals		
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day			
						Grocery bus - \$4 paid to store for grocery delivery. No fee for transportation to store.  No fee for luncheon programs – included in luncheon fee																	
OTTAWA WEST COMMUNITY SUPPORT	2,695,834	347,528	182,042 CSS 135,972 AIP	0	29,514 CSS 0 AIP	Grocery Bus \$5/round trip – Grocery Bus  \$5/round trip - Day Program  \$10 - inside OW catchment area  \$15 - Outside OW Catchment area  Volunteers reimbursed \$0.45/km	None	Yes. Prioritizing medical appts and Day program (CSS)  Predominantly providing shopping trips and social activity trips (AIP)	River, West side of Preston St., Baseline (North Side served), to Maitland, Queensway to Woodroffe (CSS)  11 Designated Aging in Place buildings (AIP)	505 CSS 596 AIP		8,884 CSS 4,481 AIP											
RENFREW AND AREA SENIORS' HOME SUPPORT INC	302,226	97,119	15,248	8700	73,171	Flat rates charged for local trips. \$10 minimum  \$70 to East end Ottawa.  Fees for alternate destinations based on \$0.40/km.	No distance min. \$10 min charge	Yes, medical only.	Pick-ups outside of Town of Renfrew only. Sunshine coach serves Town of Renfrew.	278		3,905											
RURAL OTTAWA SOUTH SUPPORT SERVICES	1.8 million	Unavailable	Unavailable	Unavailable	Unavailable	1-10km - \$10 11-30km - \$15 31-50km - \$20 51-70km - \$30 71-90km - \$40 91+km - 0.45/km  Diners Club - \$4/round trip  Day Program, Shopping/Grocery Bus, Rec/Social Programs - \$8/round trip	None	Yes. Priority to medical appts and day program trips.  Provides rides to day services for City of Ottawa Day Service program	West Hwy 7, Town of Ashton, Hazeldean and Hwy 7, Ashton Station Rd, Montague Boundary Rd, Donnelly Drive to the River, East Boundary is Gregoire, South boundary Belmede Rd. South side of Mitch Owens, Harts	371		12,000											

	Funding							Add. Stats		Service Recipient Interactions												
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals	
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day		
									Desire being served by ROSSS, although WOCRC catchment, Bridge Bankfield, Brophy, up Eagleson													
SERVICES COMMUNAUTAIRES DE PRESCOTT-RUSSELL	1,224,150	652,021	106,726	6,310	538,985	\$0.47/km  \$15 fee if volunteer stays with client longer than 5 hours	No	Yes. Note: Adults 55+ in Hawkesbury can receive accompaniment to appts.  Agency estimates 90% of rides are provided to Adults with Physical disabilities through ODSP referrals and 10% to Seniors.  Priority given to medical appts	County of Prescott-Russell	1,468		34,549										
SOUTH-EAST OTTAWA COMMUNITY HEALTH CENTRE	22,567,248 (Agency)  579,902 (CSS only)	84,124	61,127	6,703	5,138 (agency notes that client fees are apportioned through all CSS functional centres)	\$12 round trip, anywhere in the City of Ottawa  Subsidies provided as necessary for clients  Clients are not invoiced, and pay what they can, on the spot.	3 trip max per client, per month	Yes. Grocery bus included here	Riverside to Bank, up bank to Hunt Club, North side of Hunt Club, Riverside to Industrial, St. Laurent . West boundary was expanded 2 years ago - Hunt Club Riverside area.	231		4,642										
WESTERN OTTAWA COMMUNITY RESOURCE CENTRE	6,786,651 (Agency)  2,470,587 (CSS including Harmer House Day Services)	176,014	89,602	1,246	56,775	1-10km - \$10 11-30km - \$15 31-50km - \$20 51-70km - \$30 71-90km - \$40 91+ km - 0.50/km	None	Yes. No priority to medical appts.  Combination of paid driver and volunteers.  Rural Transpo program reported to City separately.	Former City of West Carleton and Former City of Nepean	354		5,991										

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
WILLIAMSBURG NON-PROFIT HOUSING CORPORATION	1,357,396	90,259	61,063	0	29,196	\$0.38/km  Flat rate \$55 to Ottawa	Min \$5/round trip  Medical appts take priority	Yes	South Dundas	127		3,193									
TOTAL			2,733,651 +							9,584 CSS		201,500 CSS									
										721 Going Home		1,293 Going Home									
										596 AIP		4,481 AIP									
72 5 82 20 COM IH &  Day Services																					
ABBOTSFORD HOUSE @ THE GLEBE CENTRE	524,137 (Abbotsford House Only – Not incl. LTC at Glebe Centre)	197,043	76,016	0	66,798	\$30/day Dementia Program. \$5 extra for transportation. \$7/day Frail Elderly Program. Transportation fee included. Frail Elderly clients are charged a membership fee for EPC. Clients charged for space, if they are absent	Dementia program 1x/weekly. No specific re-assessment period if client is absent continuously	Partially. Dementia program matches OHRS definition. Frail Elderly program does not match OHRS definition	Program open to anyone in Ottawa  Transportation provided within Old City of Ottawa boundary West, Eastern side of Fisher Ave, up to Baseline, Baseline to Prince of Wales. Prince of Wales to Preston. Serves East Side of Preston St.	92									2808		
ALZHEIMER SOCIETY OF CORNWALL AND DISTRICT	1,133,650	462,942	299,917	141,070	59,326	\$17/day  Transportation included in fee	1 day/week; 4 week vacation/illness before space client space re-evaluated	Yes	Sites in Casselman and Hawkesbury Serving County of Prescott- Russell English clients. Dementia specific programming	73									3157		
ARNPRIOR REGIONAL HEALTH	517,794	106,908	72,556	22,000	12,352	\$10/day.  No transportation provided by agency.  Baths with PSW support are available for additional \$10 fee	1 day/week. No waitlist at present. Clients are charged full fee for absence, and charged full fee to retain space during prolonged and planned	Yes. Mixed program	Clients generally live within 20km radius of The Grove in Arnprior, but may attend from anywhere.  Occasionally clients will attend from Town of Renfrew.	27									709		

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
							absence, unless they agree to be discharged		All clients provide own transportation												
BRUYERE CONTINUING CARE	Unavailable	280,352	243,143	0	37,193	\$15/day  Fee does not include transportation	1x/weekly. Many clients attend multiple days, depending on client need. Waitlist exists. File reassessed after 4 weeks if client is not attending	Yes. French Clients Only.  Program is 6 hours per day, with expanded capacity (open until 7pm) on Tuesdays and Thursday, with Aging at Home funding.  Mondays designated as multicultural day.	Program open to City of Ottawa residents	61									2107		
CAREFOR HEALTH AND COMMUNITY SERVICES – EASTERN COUNTIES	3,892,582	248,046	224,761	14,137	9,148	\$17/day. Fee includes transportation  No reduction if client provides own transportation	1 day/week; client space evaluated after 4 weeks consecutive absence due to illness/vacation	Yes. Mixed programs at 4 sites	4 sites, including Glen-Stor-Dun Lodge, Finch, Winchester, Ingleside	59									1603		
CAREFOR HEALTH AND COMMUNITY SERVICES – OTTAWA	1,405,851	810,114	643,253	22,656	144,205	\$20/day.  Transportation is additional \$10/round trip	1 day/week. 2 <sup>nd</sup> day available to clients based on need and availability.	Yes. Dementia Day Services program and Community Mental Health Day Services program provided at Carling Site, simultaneously.  Program site open 6 days/week	City of Ottawa	187									5877		
CENTRES DES SERVICES GUIGUES	1,551,239 (Agency)  926,000 (CSS Only)	192,414	118,810	2,237	10,592	\$5/day  Meal costs additional \$6 and is reported under congregate dining.  Transportation is additional \$9/round trip	1 day/week, with a maximum of 2x attendance weekly per client.  Clients charged full \$5 in event of cancellation.	Yes. Mixed Program	North - River, South to Hunt Club (north side of street served), East Blair Rd (serves West side of Blair), West (East of Moodie Drive.)	49									1803		
CITY OF CORNWALL	688,715 (CSS Only)	355,293	208,598	0	41,465	Q1-3, \$15/day	1 day/week; Client space	Yes	City of Cornwall; Day Services	81									2,362		



	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
						Q4 - \$17/day no transportation, \$20/day with transportation	held for 3 weeks during absence due to illness/vacation		Transportation provided only within City of Cornwall for insurance purposes. Program spaces open to individuals who live outside City of Cornwall limits, who can provide own transportation												
CITY OF OTTAWA	736,789 (includes Carleton Lodge, Champlain, and ABI Day Service programs)	479,719	359,843	16,706	103,170	\$15/day  Transportation to Carleton Lodge (provided by ROSSS) -\$7	1 day/week. Some clients attend multiple days.	Yes. Mixed program	2 sites – 1 Carleton Lodge, 1 Centre d'Accueil Champlain. Programs open to anyone in City of Ottawa limits.	127									5798		
1. COUNTY OF RENFREW	578,457 (CSS Only)	565,257	461,466	0	90,591	\$20 full day  \$10 half day.  Transportation included in cost	1x month	Partially.  Programs various Service Recipient groups beyond typical CSS clientele, 4 days a week. Group combines adults with developmental disabilities, ABI clients, frail elderly seniors, and adults with dementia.  At Renfrew site, 1 program day/week is designated as Seniors Only Day  PSW supported baths are available on site as component of program. Baths had been included in previously stats but have been removed here.	2 sites in Renfrew and Cobden.  Renfrew Program: Serves Renfrew, Arnprior, Braeside, Calabogie, Douglas, Eganville  Cobden Program: Golden Lake, Eganville, Beachburg, Forrester's Falls, Westmeath  Program availability heavily dependent on coordinated transportation for clients via Carefor and Sunshine Coach	105								4732			
EASTERN OTTAWA RESOURCE CENTRE	3,328,870 (Agency)	195,150	130,232	2,400	49,213	\$18.50/day	1 day/week. After 6 consecutive	Yes	Blackburn Hamlet, Beacon Hill, Carlsbad Springs,	61									1,879		

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
	1,083,305 (CSS Only)					Transportation at additional cost with fee based on distance (see EORC transportation fees)	absences file is internally assessed and client may be discharged to free space for waiting clients		Gloucester South, Orleans, Cumberland, Navan, Vars and Sarsfield												
GLENGARRY INTER-AGENCY GROUP INC	2.6 million (Agency) 169,298 (CSS Only)	169,298	139,566	0	22,032	\$15/day, transportation included  Client charged a month in advance as incentive to attend Day Program  Seasonal Home Maintenance \$10/hr	1 day/week; client space re-evaluated if client absence of 4 weeks due to illness/vacation etc.	Partially. Day Service matched OHRS Definition.  Seasonal, Non-LHIN Funded Home Maintenance program stats are included here	County of Glengarry	49 Day Services; 35 Home Maintenance									1728 Day Services Attendance Days		
THE GOOD COMPANIONS SENIORS' CENTRE	1,435,133	478,697	335,685	0	16,814	\$15/day  Transportation not included	1x/week. Clients pay for their space when they are absent	Yes	Serves all of Ottawa, based on client need and ability to arrive to site of day service. Currently not providing transportation to day program, 29 spaces per day	116									3221		
HOSPICE CARE OTTAWA	4.3 million (Agency) 177,250 (CSS only)	177,250	90,050	87,200	0	\$0 Transportation provided if client does not qualify for other options (Para Transpo, OC Transpo)	1x/week. No current waitlist, and no standard for discharge after absence	Yes. Program staff is an RN, supported by volunteers.  Referrals received from any source and intake assessment done by Nurse on staff, not CCAC.	City of Ottawa limits. 3 days avail at Cameron St Site, 1 day avail. At Richmond church (St. John Anglican), 1 day avail at West end Hospice facility	154									5082		
JEWISH FAMILY SERVICES OF OTTAWA	3,994,243 (Agency)	25,434	24,434	0	Unavailable	\$25/day for dementia program  \$20 day for mixed program (lower needs clients)  Transportation provided as needed, for extra fee	1x/weekly. Follow up done with each absence. No waitlist at this time, so some clients come multiple times/week	Yes. Program is geared toward Jewish clientele, but open to all.	City of Ottawa. Will extend beyond city boundaries in exceptional cases, to meet needs of Jewish individuals	13									704		

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
MARIANHILL	15,842,508 (Agency) 2,276,178 (CSS Only)	442,605	389,679	0	59,926	\$8.50/day transportation \$4 each way of trip \$16/day - Almonte program	1 day/week; client space re-evaluated if client absence of 4 weeks due to illness/vacation	Yes	6 site locations. Typically serves area 30-40km from site.	107									4405		
MAXVILLE MANOR	360,604 (CSS)	172,241	147,300	0	24,941	\$17/day, including transportation	1 day/week; 4 weeks illness/absence client space will be evaluated	Yes	County of Glengarry	90									1424.		
MOHAWK COUNCIL OF AKWESASNE	3,479,043 (CSS Only)	19,686	19,686	0	0	0	Program site open during business hours Monday to Friday. Tri-District Elders Club members drop in as they wish. No expectation that clients attend regularly	No. Program functions as a drop-in and supports Tri-District Elders Club. Program is run by volunteers.	Tri-District region of Akwesasne – Cornwall Island, St-Regis, and Snye	25									1080		
NORTH RENFREW LONG-TERM CARE SERVICES INC	1,440,640 (CSS only)	208,614	197,074	\$300	\$11,540	\$9.25/day, including transportation	1 day/week; client space evaluated after 4 weeks consecutive absence due to illness/vacation	Yes	Clients transported anywhere 30 minutes from site. Volunteers will pick up to Rolphton. Clients may occasionally attend from Petawawa if they have transportation.	29									1296		
THE OLDE FORGE COMMUNITY RESOURCE CENTRE	661,702 (CSS Only)	68,793	50,633	0	18,160	\$15/day transportation not included or available	1 day/week; Client contacted day-of, if not in attendance. 8 weeks absence, file may be closed and client reapply through CCAC. Space held for 3 weeks if absence due to illness, and more on case by case basis	Yes	Program open to all. Clients provide own Transportation, and most come from West end Ottawa or Kanata	35									1071		
OTTAWA WEST COMMUNITY SUPPORT	2,695,834 (Agency)	315,810	206,199	0	39,305	\$15/day.	1x/weekly. 4 weeks missed attendance, file	Yes	Program open to City of Ottawa.	123									2615		

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
						Transportation - additional \$5, round trip	is internally assessed		Transportation open to city wide clients.												
THE PERLEY AND RIDEAU VETERANS' HEALTH CENTRE	2,866,079 (CSS Only)	390,240	272,435	61,566 (deficit covered by Carefor)	56,239	\$20/day Transportation - additional \$10/round trip	1 day/week. 2 <sup>nd</sup> day available to clients based on need and availability.	Yes	City of Ottawa	93									2795		
RURAL OTTAWA SENIOR SUPPORT SERVICES	1.8 million	Unavailable	Unavailable	Unavailable	Unavailable	\$20/day Transportation - additional \$8/round trip	1 day/week; no policy on long term absence/illness	Yes	Sites in Kenmore and North Gower	17									170		
SERVICES COMMUNAUTAIRES DE PRESCOTT RUSSELL	1,224,150	130,854	121,436	0	9,418	\$15/day Transportation included	1 day/week; no policy on long term absence/illness	Yes	Avg 30 km radius of program site. French program. 2 sites: Hawkesbury, Embrun	29									1142		
WESTERN OTTAWA COMMUNITY RESOURCE CENTRE	2,470,587 (CSS incl. Harmer House)	443,832	316,437	1,335	51,272	\$21/day Transportation at additional fee, and provided based on need and request	1x weekly. Clients are able to take both planned and unplanned absences, based on client individual need	Yes	West end of Ottawa, and determined by client need	78									1690		
WESTERN OTTAWA COMMUNITY RESOURCE CENTRE (HARMER HOUSE)	941,509 (Harmer House Only)	278,065	188,025	1000	89,040	\$19/day Transportation - additional \$8/round trip  \$9/day for cancellation.	1 day/week per client. Some clients attend multiple days. Staff discretion used when reassessing file of client with multiple absences	Yes. Program open Saturdays	Open to City of Ottawa residents. Most clients live in Nepean or Bells Corners	72									3558		
WILLIAMSBURG NON-PROFIT HOUSING CORPORATION	1,357,396	42,789	36,730	0	6,059	\$17/day including transportation.  No reduction in fee if client provides own transportation	1 day/week; client space evaluated after 4 weeks consecutive absence due to illness/vacation	Yes	South Dundas County	23									491		
DAY SERVICE TOTALS			5,373,964 +							1975									65,307		
72 5 82 31 COM IH & CS Homemaking																					
OTTAWA WEST COMMUNITY SUPPORT	2,695,834	336,808	336,808	0	0	0	25 hours/week, per building.	Yes. Aging in Place Clients	Aging in Place Buildings	604							13,968				

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
							Intended to be short term service, 4-6 weeks	Only. Work provided by OWCS staff													
HOMEMAKING TOTALS			336,808							604							13,968				
72 5 82 33    COM IH & CS																					
Personal Support/Independence Training																					
CANADIAN RED CROSS	3,513,200 (CSS Only)	659,086	659,086	0	0	0	None	Yes	Counties of Stormont, Dundas, and Glengarry	104						19,980					
CAREFOR HEALTH AND COMMUNITY SERVICES – EASTERN COUNTIES GOING HOME PROGRAM	3,892,582	144,378	144,378	0	0	0	2 hours minimum for 10 days	Yes	All of Eastern Counties	521 Going Home						4,934 Going Home					
CAREFOR HEALTH AND COMMUNITY SERVICES – RENFREW COUNTY GOING HOME PROGRAM	2,135,192	148,795	148,795	0	0	0	None	Yes	All of Renfrew County	612						2,760 Going Home					
CAREFOR HEALTH AND COMMUNITY SERVICES – OTTAWA GOING HOME PROGRAM	1,405,851	194,930	194,930	0	0	0	No minimum Max 10 days, Hours capped at 30/week	Yes	City of Ottawa	717 Going Home						5,348 Going Home					
GROUPE ACTION POUR L'ENFANT, LA FAMILLE ET LA COMMUNAUTÉ DE PRESCOTT-RUSSELL	674,495 (CSS Only)	645,530	645,530	0	0	0	Min ½ hour, Max 22.5 hours/week Max 90 hours/month	Yes. No service provided to individuals living in private retirement setting	Prescott-Russell; Serving clients in same building as Red Cross, but on floors NOT designated as ALS	102						9,624					
MOHAWK COUNCIL OF AKWESASNE	3,479,043 (CSS Only)	11,756	11,756	0	0	0	None	No. Recreational group providing social activities to individuals with physical and developmental disabilities	Tri-District area – Cornwall Island, St-Regis, and Snye	5						950					
VHA HEALTH AND HOME SUPPORT	8,459,537	4,619,377	4,619,377	0	0	0	21 hr/week, max. No minimum	Yes	Boundaries of City of Ottawa, with some exceptions (e.g. Kemptville area served occasionally)	133						96,817					
TOTAL			6,423,852							344 CSS						127,371 CSS					
										1850 Going Home	13,042 Going Home										

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
72 5 82 34    COM IH & CS																					
Respite																					
CAREFOR HEALTH AND COMMUNITY SERVICES – EASTERN COUNTIES	3,892,582	764,282	531,503	21,526	211,253	\$9/hr up to 15 hours a week. \$21/hr over 15 hours a week	2 hours min/visit; no max	Yes, but also includes "Crisis Beds" program as a component	All of Eastern Counties except South Dundas	315, includes 27 Crisis Beds clients						28,922, includes 8,730 Crisis Bed hours					
CHAMPLAIN COMMUNITY CARE ACCESS CENTRE	1,085,186 (CSS Only)	516,626	516,626	0	0	None	No minimum. No maximum. Clients need to be referred internally through CCAC, and require additional support beyond traditional services. Clients who are solely seeking financial support are generally not served.	No. Program provides care plan mapping and elder mediation techniques to serve reluctant clients, or those with unconventional needs	Eastern Counties primarily. Will serve clients in Ottawa and Renfrew County in exceptional circumstances	135						10,868 (reflects CCAC program staff hours, not PSW or relief worker hours)					
MARIANHILL INC	2,276,178 (CSS only)	361,571	277,832	0	83,739	\$9/hr	3 hour minimum	Yes.	All of Renfrew County	143						9527					
MILLS COMMUNITY SUPPORT CORPORATION	1.22 million (CSS)	54,538	48,130	0	6,408	\$9/hr	1-3 hours max, 1 day/week, per client	Yes	Mississippi Mills, Almonte, Pakenham, Ramsay Ward	20						735					
MOHAWK COUNCIL OF AKWESASNE	3,479,043	556,704	556,704	0	0	0	None	Yes.	Tri-District area – Cornwall Island, St-Regis, and Snye	300						15,292					
NORTH RENFREW LONG-TERM CARE SERVICES INC	1,440,640 (CSS only)	340,570	332,217	0	8353	\$36.45/day for short term stay. Long term stay no fee	As needed	No. Funding supports 1 short term stay bed, 11 long term stay beds.	Only within NRLTC supportive care apartment units	29						13,961					
OTTAWA WEST COMMUNITY SUPPORT	2,695,834	683,015	280,173	0	434,574	\$9/hr for first 2 hours. \$18/hr beyond	2 hours. No max number of hours of service, but 2 hours max subsidized	Yes. Employee Model	Preston to Dwyer Hill Rd. New subsidized program includes Parkdale	258						31,704					
RURAL OTTAWA SOUTH SUPPORT SERVICES	1.8 million	Unavailable	Unavailable	Unavailable	Unavailable	\$9/hr	2 hour min, 1x weekly at	Yes	West Hwy 7, Town of Ashton, Hazeldean and Hwy	57						1438					

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
							subsidized rate.		7, Ashton Station Rd, Montague Boundary Rd, Donnelly Drive to the River, East Boundary is Gregoire, South boundary Belmede Rd. South side of Mitch Owens, Harts Desire being served by ROSSS, although WOCRC catchment, Bridge to Bankfield, Brophy, up Eagleson, and parts of Kemptville and North Gower												
VHA HEALTH AND HOME SUPPORT	8,459,537	305,836	274,330	0	31,506	\$9/hr, no increase after 2 hours	Min 2 hours of care. Max 15 per week	Yes. Employee model. Service has to have a personal care component. Client needs must be fairly stable	East side of Parkdale Ave, East side of Fisher Ave, Down to Manotick,	120											4241
WILLIAMSBURG NON-PROFIT HOUSING CORPORATION	1,357,396	297,913	242,914	0	54,999	\$9/hr up to 15 hours/week. \$18/hr over 15 hours/week. Respite Apartment \$35/day	2 hours – in community; 2 nights in Respite Apartment	Yes. Offsite (In Community) Respite and Onsite (Respite Apartment) services offered	In-Community Respite: All of Dundas County (North and South) On-Site Apartment Respite: Dundas County, South Stormont, North Grenville (Occasionally South Grenville, Metcalfe, Cornwall)	92											10,172
TOTAL			3,060,429+ (figures unavailable for 1 agency)							1469											115,992 Client Hours 10,868 Staff Coordination and Mediation Hours - CCAC

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
72 5 82 45    COM IH & CS Assisted Living Services																					
ALGONQUINS OF PIKWAKANAGAN	251,425	87,655	87,655	0	0	0	None	Yes. Residence in both supportive housing units, and personal residences in community setting	Serves Pikwaknagan First Nations. 1 building housing 9 Supportive Housing clients. 13 clients in community.	25								Unavailable			
ARNPRIOR REGIONAL HEALTH	517,794	410,886	410,886	0	0	0	Min ½ hour. Typical max 2.5 hours/day. Adjusted to meet client needs, and exceptions made on case by case basis	Yes. Hub model.	20 minute drive radius from site at The Grove in Arnprior	26								7284			
BARRY'S BAY AND AREA SENIOR CITIZENS HOME SUPPORT SERVICES	1,084,879	673,729	673,729	0	0	0	None	Yes. Hub model only.	Hub Sites in Barry's Bay and Killaloe. Programs serve 15 minute or 15 km radius of hub site	54								16,364			
BRUYERE CONTINUING CARE	Unavailable	2.2 million	2.2 million	0	0	0	No min. No max. Service level is based on client need	Yes. Community spaces (20 in Vanier, 20 in Orleans), and 70 cluster housing units on site at Residence St-Louis	Community – Vanier Parkway to Aviation Parkway, Queensway to Innes (Blackburn Hamlet) to Frank Kenny	97								26,150			
CANADIAN RED CROSS	3,513,200 (CSS Only)	2,545,251	2,545,251	0	0	0	No. Service level determined by client need	Yes. Includes both Hub Model service and Supportive Housing units	Designated spaces in housing units. Hub clients served in City of Cornwall, West to Long Sault, East to Summersdown/Glen Walter. Alexandria served in Q4.	186								50,528			
CAREFOR HEALTH AND COMMUNITY SERVICES – RENFREW COUNTY	2,135,192	176,855	176,855	0	0	0	Client seen 1x day, min. No max	Yes. Hub model only.	City of Pembroke	17								2168			
CARLETON RESIDENCE ATTENDANT CARE SERVICES	392,062,000 (Total Agency)	650,104	575,104	0	75,000	\$100/day of service for out of province and international students	No Min. No Max. Emphasis on Independence Training	Yes. Supportive Housing model	Serves 1 residence building at Algonquin College. Serves various students in many	26 (10 at Algonquin, 16 at Carleton)								8136			



	Funding							Add. Stats		Service Recipient Interactions													
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals		
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day			
	650,104 (CSS Total)								Carleton University residence buildings. Students living off campus may receive minimal assistance as needed, while on campus. Off-Campus students currently not reported in counts		424,304 Number Includes paramedic partnership hours, housekeeper hours and home maintenance hours												
HAWKESBURY & DISTRICT GENERAL HOSPITAL	243,604 (CSS Only)	243,604	243,604	0	0	0	No min. Avg client is visited up to 3x per day. Additional visits made in exceptional circumstances	Yes. Hub model only.	Town of Hawkesbury only.	20												4222	
MARIANHILL INC	15,842,508 (Agency) 2,276,178 (CSS)	740,779	740,779	0	0	0	None	Yes. Supportive Housing	1 senior's building with designated spaces in Petawawa and Eganville. All clients reside in those buildings	53												15,921	
MILLS COMMUNITY SUPPORT CORPORATION	8,822 million (Agency) 1.22 million (CSS Only)	864,874	856,621	825	0	0	2 hour max in 24 hour period. Max 40 client spaces	Yes. Hub model only	2 hub office locations - Almonte (375 country street) and Carleton Place (Elizabeth Court). All clients need to live within 10 minutes of the office site.	51												11,770	
MONTFORT RENAISSANCE	7,005,025 (Agency) 1,641,926 (CSS Only)	1,641,926	1,009,935	0	0	0	3 visits per shift, 9 visits per day minimum. No maximum	Yes. Supportive Housing model only	All clients reside on-site at Montfort Renaissance	67												17,037	
NORTH RENFREW LONG-TERM CARE SERVICES INC	1,440,640 (CSS Only)	604,440	604,440	0	0	0	None	Effective April 1, 2014 this service is reported as ALS. For this reason it appears here with other ALS providers. It was reported as PS/IT in 13/14.	Town of Deep River	35												n/a	

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
OTTAWA WEST COMMUNITY SUPPORT	2,695,834	769,085	769,085	0	0	0	Clients are seen every day, although no specific policy.  Based on client need and demand	Yes. Hub model only	River, West side of Preston St., Baseline (North Side served), to Maitland, Queensway to Woodroffe	61										13,272	
PARKWAY HOUSE	829,233 (Agency – ALS only)	829,233	551,297	123,047	136,619 (institutional resident rate from ODSP - \$960/month)	0	No minimum. No maximum	Yes. Supportive Housing Model only	Parkway House Only.	12										4380	
THE PERLEY AND RIDEAU VETERANS' HEALTH CENTRE	2,866,079 (CSS Only)	1,815,740	1,815,740	0	0	0	Minimum 1 visit per client/day  Many client receive multiple visits per day	Yes. All services considered within the greater community, including buildings on PRVHC site	Hunt Club, Bank Street, Riverside Drive, and Hwy 417 – within 15 minutes of PRVHC location	107										24,527	
PERSONAL CHOICE INDEPENDENT LIVING	2,328,687 (Agency) 2,301,327 (CSS Only)	2,301,327	2,301,327	0	0	0	ALS – 2 hours a day, max.  Weekly max of 14 hours.  Max for onsite Attendant Services – 6 hours/day  Some exceptions made for short terms	Yes. 2 distinct programs reported to this FC: Assisted Living Services (supportive housing model) and Attendant Services (hub model services)	Attendant Services – 3 locations: Bronson, Carpenter Co-op, and 1604 Poland Ave. ALS program – 3 hubs:	99										28,593	
RENFREW VICTORIA HOSPITAL	418,238 (CSS Only)	418,238	418,238	1500	0	0	Minimum visit - 1x day  Clients may be seen multiple times/day	Yes. Hub model Additionally, Coordinator reports crisis intervention by supervisor is regular, but not specifically funded	Town of Renfrew. 15 minutes from Hub (RVH)	22										3702	
WILLIAMSBURG NON-PROFIT HOUSING CORPORATION	1,357,396	659,735	659,735	0	0	0	Service level determined by client need.  Daily contact with each active client, unless client cancels	Yes. Supportive Housing model and Hub model	Supportive Housing for seniors (3 buildings on Villa Dr. in Williamsburg); ALS for high risk seniors – 2 hubs	61										13,791	

	Funding							Add. Stats		Service Recipient Interactions											
	Annual Agency CSS Funding	Annual Program Expenses	Annual LHIN Funding (by Program)	Annual Fundraising (by Program)	Annual Funding from Client Fees (by Program)	Fees to Clients (by Program)	Minimum Service Volume?	Services match OHRS definition?	Geography covered?	Individuals Served	Not Uniquely Identified Individuals Served	Visits		Participants			Hours of Care	Sessions			Meals
												Face to Face	Non Face to Face	Registered Client	Non Registered Client	Registered and Non Registered Client		Group Session	Attendance Day	Resident Day	
VHA HEALTH AND HOME SUPPORT (Formerly The In Community)	8,459,537	3,534,324	3,369,446	0	2,444 (room and board for 1 building attached to Harmer House)	0	Minimum is based on client need, and diversity of client population	Yes. Supportive Housing Model with ongoing case management to maintain waitlist	6 buildings within City of Ottawa with 76 spaces available	80									27,530		
Total			20,009,727							1099									275,375 ** numbers unavailable for 2 agencies serving 60 clients. Could expect this figure to jump by 10,000-15,000 resident days		
IG 8 LHIN FUNDING TOTAL			40,196,132																		

# References

Affordable Supportive Housing Implementation Plan, October 2009.

Balance of Care Research Group, Champlain Balance of Care Project, University of Toronto, October, 2009.

Bowen, Paddy and McKennie, A.J. *Volunteer Connections: New Strategies for Involving Older Adults*, 2010.

Capacity Developer Job Description, December 2009.

Carefor Health & Community Services, *Going Home Program* brochure.

CARESS Compass, 13<sup>th</sup> Edition, December 2014.

CARESS Project Plan, ChiRP, December 2012.

CARESS, *Taking Stock*, December 2014.

CARESS Terms of Reference, 2013, p. 2.

CARESS, Original Business Case for Local Health Integration Network funding for CARESS.

CARESS Project, PowerPoint presentation on *Interim Recommendations*, November 29, 2010.

CCIM, *interRAI Preliminary Screener for Primary Care and Community Care Settings (interRAI Preliminary Screener) Training* (PowerPoint Presentation), 2012.

Champlain Community Support Network, *Champlain CSS Strategic Action Plan 2014-2017*.

Champlain Community Support Network, *Champlain CSS Strategic Plan 2014-2017*.

Champlain Community Support Network Terms of Reference, December 2014.

Champlain CSS, *Strategic Plan 2014-2017*.

Champlain LHIN, *LHIN Backgrounder Aging at Home Strategy*, 2010.

Champlain LHIN, *Health Care Options in the Champlain Region*.

Champlain LHIN Health System Intelligence Project, *Population Health Profile: Champlain Local Health Integration Network*.

Champlain LHIN, *Integrated Health Service Plan 2013-2016*.

Champlain LHIN, *Non-Urgent Transportation "NUT"- A proposal to enhance non-urgent transportation services delivered by CSS in Champlain*, September 2010.

Champlain LHIN, *PSS Regulatory Amendment* (slide presentation to the CCSN) March, 2015.

Champlain LHIN, *Profile of Patients with High Needs in Champlain*, October 2014.

Children's Mental Health Ontario, *Lead Agency Capacity: Guiding the Implementation of New Pathways to Care*, December 2013.

Clarke, P. and A. Colantonio, 2005. Wheelchair Use Among Community-Dwelling Older Adults: Prevalence and Risk Factors in a National Sample. *Can. J. Aging*, 24:191-198

Community Care Information Management, *CSS CAP Update Presentation*, July 6, 2011.

CRNCC, in focus backgrounder, *Ontario Personal Support Workers in Home and Community Care: CRNCC/PSNO Survey Results*, 2010.

George, Dayo. *Investigation of the Brokerage Model of Service Delivery*, George Law Offices, March 31, 2012.

Lam, Po-Po, *Characteristics of Adult Day Programs Across Champlain*, June 24, 2009.

Martell Consulting, *The Champlain Adult Day Program Project*, May 6, 2011.

Martell Consulting, *The Champlain Adult Day Program Coordinated Access Pilot Project Promising Practice Summary Report*, September 5, 2014

Martell Consulting, *The Referral & Utilisation Project Ottawa Seniors Day Programs Affiliated with the Regional GEM Program*, May 2010.

McMahon, Darryl. CARESS Steering Committee High Level Status Report, December 2014.

MOHLTC, *Ontario Healthcare Reporting Standards CSS*, Chapter 10, March 2014.

Ontario Community Support Association, *The Community Support Service Health Human Resource Report 2010 Salary Survey*, 2010.

Ontario Community Support Association, Conference Notes, October 2012.

Ontario Caregiver Coalition, *Advancing the Interests of Caregivers in Ontario*, July, 2009.

*Postal CodeOM Conversion File (PCCF), Reference Guide*, 2013. Statistics Canada Catalogue no. 92-154-G.

<https://www.caring.com/articles/activities-of-daily-living-what-are-adls-and-iadls>

<http://www.carefor.ca/english/news/aging-in-place-program-ensures-health-wellbeing-for-at-risk-elderly.html>

<http://afc.uwaterloo.ca/PDF/Ottawa%20CCCA.pdf>

[https://www.ccim.on.ca/CSS/CA/Document/CSProjectProfile\\_20120215\\_v0%204\\_CSSCAP-FINAL.pdf](https://www.ccim.on.ca/CSS/CA/Document/CSProjectProfile_20120215_v0%204_CSSCAP-FINAL.pdf)

[www.interrai.org/community-health.html](http://www.interrai.org/community-health.html)

<http://www.interrai.org/community-health.html>

<http://www.interrai.org/algorithms.html>

[www.interrai.org/home-care.html](http://www.interrai.org/home-care.html)

<http://healthcareathome.ca/serviceproviders/en/Health-Partner-Gateway>

<http://www.champlainLHIN.on.ca/Accountability/Integration/Health%20Links.aspx>

<http://www.seochc.on.ca/programs-services/primary-care-outreach-to-frail-seniors-pco/>

<http://mealsonwheels-ottawa.org/>

<http://mealsonwheels-ottawa.org/wp-content/uploads/2014/09/mow-brochure-english-web.pdf>

<http://www.torontohealthprofiles.ca/onmarg.php>

<http://www.statcan.gc.ca/pub/89-628-x/89-628-x2007001-eng.pdf>

# Appendices

## Appendix A – LHIN-funded Health Service Providers in CSS

	Official/Operational Name	Champlain LHIN Funding List
1	Abbotsford House @ The Glebe Centre	Glebe Centre Inc. (The)
2	Aboriginal Friendship Centre	Bonnechere Algonquin Health Care Centre
3	Algonquins of Pikwàkanagàn	Algonquins of Pikwàkanagàn
4	Alzheimer Society of Cornwall and District	Alzheimer Society of Cornwall & District
5	Alzheimer Society of Ottawa and Renfrew County	Alzheimer Society of Ottawa-Carleton
6	Arnprior Regional Health	Arnprior Regional Health
7	Arprior-Braeside-McNab Seniors at Home Program Inc.	Arprior, Braeside, McNab Seniors at Home Program
8	Barry's Bay and Area Senior Citizens Home Support Services	Barry's Bay and Area Senior Citizens Home Support Program Inc.
9	Beth Donovan Hospice	Beth Donovan Hospice
10	Bruyère Continuing Care	Résidence Saint-Louis (CSS)
		Services Secours Elizabeth Bruyère Helpline
		Bruyère Continuing Care – Palliative Care Program
		Bruyère Continuing Care
11	Calabogie and Area Home Support Program Inc.	Calabogie and Area Home Support Program Inc.
12	Canadian Hearing Society	
13	Canadian National Institute for the Blind	
14	Canadian Red Cross	Canadian Red Cross Society –Community Health Services-Cornwall
15	Carefor Health & Community Services	Carefor Health & Community Services – Eastern Counties
		Carefor Health & Community Services – Ottawa Branch
		Carefor Health & Community Services – Renfrew Branch
16	Carleton University Attendant Services Program	Carleton Residence Attendant Services Program
17	Centre de services Guigues	Centre de services Guigues
18	Champlain Community Care Access Centre	Champlain CCAC
19	City of Cornwall	
20	City of Ottawa	City of Ottawa – Adult Day Programs
21	County of Renfrew	
22	Dundas County Hospice	Dundas County Hospice
23	Eastern Ottawa Resource Centre	Eastern Ottawa Resource Centre
24	Eganville and District Senior Citizens Needs Association	Eganville and District Senior Citizens' Needs Association
25	Glengarry Inter-Agency Group Inc.	Glengarry Inter-Agency Group Inc.
26	Groupe Action pour l'enfant, la famille et la communauté de Prescott-Russell	Groupe Action pour l'enfant, la famille et la communauté de Prescott et Russell

27	Hôpital Général de Hawkesbury & District General Hospital Inc.	Hawkesbury and District General Hospital
28	Home Support Services – Morrisburg and District	Home Support Services – Morrisburg and District
29	Hospice Care Ottawa	Ottawa Hospice Services
30	Jewish Family Services of Ottawa	Jewish Family Services of Ottawa-Carleton
31	Kemptville and District Home Support Inc.	Kemptville and District Home Support Inc.
32	Marianhill Inc.	Marianhill Inc.
33	Maxville Manor	Maxville Manor – Seniors Outreach Services
34	Meals on Wheels/La Popote roulante	King's Daughters Dinner Wagon (The)
35	Métis Nation of Ontario	
36	Mills Community Support Corporation	Mills Community Support Corporation
37	Mohawk Council of Akwesasne	Mohawk Council of Akwesasne
38	Montfort Renaissance	Montfort Renaissance Inc.
39	North Renfrew Long Term Care Services Inc.	North Renfrew Long-Term Care Services Inc.
40	Ottawa West Community Support	Ottawa West Community Support
41	Parkway House	Parkway House
42	Personal Choice Independent Living	Personal Choice Independent Living/Choix Personnel Vie Autonome
43	Pinecrest-Queensway Community Health Centre	Pinecrest-Queensway Community Health Centre
44	Renfrew and Area Seniors' Home Support Inc.	Renfrew and Area Seniors' Home Support Inc
45	Renfrew Victoria Hospital	
46	Royal Ottawa Health Care Group	
47	Rural Ottawa South Support Services	Rural Ottawa South Support Services
48	Services Communautaires de Prescott-Russell	Services Communautaires de Prescott-Russell
49	South-East Ottawa Community Health Centre	South-East Ottawa Community Services
50	The Good Companions Seniors' Centre	Good Companions Seniors' Center
51	The Olde Forge Community Resource Centre	Olde Forge Community Resource Centre
52	The Ottawa Hospital	The Ottawa Hospital
53	The Perley and Rideau Veterans' Health Centre	Perley and Rideau Veterans' Health Centre (The)
54	VHA Health and Home Support	VHA Health and Home Support
55	Vista Centre	Vista Centre
56	Wabano Centre for Aboriginal Health	Wabano Centre for Aboriginal Health
57	Western Ottawa Community Resource Centre	Western Ottawa Community Resource Centre
58	Williamsburg Non-Profit Housing Corporation	Williamsburg Non-Profit Housing Corp./Park Lane Seniors' Support Centre

## Appendix B - Carefor

Carefor Health and Community Services is one of the only organizations that provides services across the entire Champlain region. Although Carefor is divided into three catchments for convenience, it reports all services as one corporation. Carefor does not provide the same types CSS in all catchments of Champlain. The following table indicates which of the 8 services under review in this Service Reference Document

are provided by Carefor per catchment area and also which services per catchment are provided as part of the Going Home Program. The Going Home program is of particular significance for Carefor as they oversee the financials for this program. The Homemaking program is a 2014-15 addition to Carefor's service offering.

Carefor Catchment	Services							
	ADP	ALS	HM	MD	PS	RE	SA	TR
Carefor - Ottawa								
Going Home Program – Carefor - Ottawa								
Carefor - Renfrew County								
Going Home Program – Carefor – Renfrew County								
Carefor - Eastern Counties								
Going Home Program – Carefor – Eastern Counties								
LEGEND								
ADP – Adult Day Programs				ALS – Assisted Living Services				
HM – Homemaking				MD – Meals Delivery				
PS – Personal Support / Independence Training				RE – Respite				
SA – Service Arrangement / Coordination				TR – Transportation				



## Appendix C– Adult Day Program Providers

Health Service Provider	Day Program Site	Personal Support Services	
		Yes	No
Abbotsford House @ The Glebe Centre	950 Bank Street, Ottawa ON K1S 5G6		x
Alzheimer Society of Cornwall and District	2074 Route 500 W, Forest Park, ON K6H 6N6		x
Alzheimer Society of Cornwall and District	429 Mary St, Hawkesbury, ON K6A 2C8		x
Arnprior Regional Health	275 Ida Street, North, Arnprior, ON K7S 3M7	x	
Beth Donovan Hospice (2014-15)	400 Prescott Street, Kemptville, ON K0G 1J0	x	
Bruyère Continuing Care	879 Hiawatha Park Road, Orleans, ON K1C 2Z6	x	
Carefor Health & Community Services - OT	2576 Carling Avenue, Ottawa, ON K2B 7H5		x
Carefor Health & Community Services - EC	6 Nelson Street, Finch, ON K0C 1K0		x
Carefor Health & Community Services - EC	517A Albert Street, Winchester, ON K0C 2K0		x
Carefor Health & Community Services - EC	12 Memorial Square, Ingleside, ON K0C 1M0		x
Centre de services Guigues	159 Murray Street, Ottawa, ON K1N 5M7	x	
City of Cornwall - Glen Stor Dun Lodge	1900 Montreal Road, Cornwall, ON K6H 7L1		x
City of Ottawa - Centre d'accueil Champlain	275 Perrier Avenue, Ottawa, ON K1L 5C6	x	
City of Ottawa - Carleton Lodge	55 Lodge Road, Nepean, ON K2C 3H1	x	
County of Renfrew - Bonnechere Manor	470 Albert Street, Renfrew, ON K7V 4L5	x	
County of Renfrew - Bonnechere Manor	29 Cowley Street, Cobden, ON K0J 1K0	x	
Eastern Ottawa Resource Centre	1515 10 <sup>th</sup> Line Road, Orleans, ON K1E 3E8	x	
Glengarry Inter-Agency Group Inc.	20 Victoria Street, Lancaster, ON K0C 1N0		x
Glengarry Inter-Agency Group Inc.	48 Elgin Street East, Alexandria, ON K0C 1A0		x
Hospice Care Ottawa	114 Cameron Avenue, Ottawa, ON	x	
Hospice Care Ottawa	1400 Carling Avenue, Ottawa, ON	x	
Hospice Care Ottawa	110 McCurdy Drive, Kanata, ON	x	
Hospice Care Ottawa	67 Fowler Street, Richmond, ON K0A 2Z0	x	
Jewish Family Services of Ottawa	2255 Carling Ave, Suite 300, Ottawa ON K2B 7Z5	x	
Marianhill Inc.	600 Cecelia Street, Pembroke, ON K8A 7Z3		x
Marianhill Inc.	154 Civic Centre Road, Pettawawa, ON		x
Marianhill Inc.	88 Mintha Street, Barry's Bay, ON		x
Marianhill Inc.	12 Lake Street, Killaloe, ON		x
Marianhill Inc.	Almonte		x
Maxville Manor	80 Mechanic Street West, Maxville, ON K0C 1T0	x	
Mohawk Council of Akwesasne			x
North Renfrew Long-Term Care Services Inc.	47 Ridge Road, Deep River, ON K0J 1P0		
Ottawa West Community Support	1137 Wellington Street W, Ottawa ON K1Y 2Y8	x	
Rural Ottawa South Support Services	Kenmore	x	
Rural Ottawa South Support Services	North Gower	x	
Services Communautaires de Prescott-Russell	250 Main Street East, Hawkesbury, ON K6A 1A5		x
Services Communautaires de Prescott-Russell	Embrun		x
The Good Companions Seniors Centre	670 Albert Street, Ottawa, ON K1R 6L2	x	
The Olde Forge Community Resource Centre	2730 Carling Avenue, Ottawa, ON K2B 7J1		x
The Perley and Rideau Veterans Health Centre	170 Russell Road, Ottawa, ON K1G 5Z6		x
Western Ottawa Community Resource Centre	2 MacNeil Court, Kanata, ON K2L 4H7	x	
Western Ottawa Community Resource Centre	848 Seyton Drive, Nepean, ON K2H 9G6	x	
Williamsburg Non-Profit Housing Corporation	4324 Villa Drive, Williamsburg, ON K0C 2H0	x	

## Appendix D– Adult Day Program Coordinated Access Project Recommendations

Recommendation	Status	Outcomes Achieved
1. That the Champlain Adult Day Programs and Community Care Access Centre agree to implement the revised Referral Flow Map identified and approved through the regional focus groups.	Completed	<ul style="list-style-type: none"> <li>○ Clarity of Adult Day Program referral process for service delivery and use.</li> <li>○ Increased capacity of the Champlain Adult Day Programs Coordinated Access work group and the Champlain Community Care Access Centre to take next steps in improving the Adult Day Program referral process.</li> </ul>
2. That a common Intake Assessment and Referral Form be adopted across the Champlain region.	Completed	<ul style="list-style-type: none"> <li>○ Improved Adult Day Program data integrity that will help inform future planning.</li> <li>○ Developed capacity for the Champlain Community Care Access Centre and Adult Day Programs to share relevant client assessments.</li> <li>○ Reduced number of assessments that clients need to complete when accessing needed services.</li> <li>○ “Every door” remains the “right door”</li> </ul>
3. That a Shared Statement of Principles and Roles be jointly endorsed by the Champlain Adult Day Programs and the Community Care Access Centre.	Completed	<ul style="list-style-type: none"> <li>○ Role clarity between Adult Day Programs service delivery partners across Champlain.</li> <li>○ Education and training resources posted online collaborative space called SharePoint for all new and existing staff.</li> <li>○ Community Care Access Centre “Train-the-trainer” agency capacity building workshops for e-referral technology and processes.</li> </ul>
4. The basic standards and protocols for communication regarding Adult Day Program referrals be jointly agreed to and implemented.	Completed	<ul style="list-style-type: none"> <li>○ Role clarity within the referral process.</li> <li>○ Switch to electronic referrals for Adult Day Programs with the Community Care Access Centre responsible for referrals and waitlist management.</li> <li>○ Reduced turnaround times within the referral process.</li> <li>○ Reduce length of time waiting for service.</li> </ul>
5. That the Champlain Community Care Access Centre assesses the technical feasibility of integrating the Champlain Adult Day Program Inventory with the Champlain Health Line.	Completed	<ul style="list-style-type: none"> <li>○ Champlain Adult Day Program Inventory is now accessible in both official languages on ChamplainHealthLine.ca, ‘Seniors’.</li> <li>○ Interactive map that displays Adult Day Program locations to support connecting clients to services in their area, in French and English.</li> <li>○ Increased capacity of health service providers and care coordinators to support continuity of care.</li> <li>○ Increased public access to program information.</li> </ul>
6. That Champlain Adult Day Programs explore alternative ways to inform clients and caregivers about the role and value of the Adult Day Program.	Partially Completed	<ul style="list-style-type: none"> <li>○ Increased quality and amount of information available to the public about Adult Day Programs and their value.</li> <li>○ Fostering strong partnerships between CSS agencies and the Community Care Access Centre.</li> </ul>
7. Upon fulfillment of the above recommendations, that the Champlain Local Health Integration Network commit to review transportation, funding equity and affordability with the Champlain Adult Day Programs.	Pending	<ul style="list-style-type: none"> <li>○ Establishing a conversation between the Local Health Integration Network around the need to address transportation and funding equity issues moving forward.</li> </ul>
8. That Champlain Adult Day Programs review basic program standards and criteria for persons with dementia, in conjunction with the Champlain Dementia Network	Pending	<ul style="list-style-type: none"> <li>○ Improved capacity to meet the needs of service users living with dementia</li> </ul>



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