COMMUNITY SUPPORT SERVICES

The Key to Sustainable Health Care in Ontario



The Ontario Community Support Association

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The Ontario Community Support Association (OCSA) represents 360 not-for-profit agencies that provide Community Support Services in Ontario. OCSA and its member agencies are recognized for their leadership in developing standards of care for the community sector. The Association provides information and education to volunteers and professionals with the goal of ensuring quality community care. October 2001

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EXECUTIVE SUMMARY

The Ontario Community Support Association (OCSA) is concerned about the recent funding constraints in the home and community care system and the impact this is having on the citizens of the province. The result has been that vulnerable seniors and persons with debilitating diseases or disabilities are no longer receiving necessary services.

A Provincial Task Force of 32 OCSA member agencies has come together to make recommendations to the Government of Ontario that will ensure that home and community care is there when people need it now and in the future. (Task Force Members are listed in Appendix D.) Community Support Services agencies are an integral part of the home and community care system, along with their partner, the Community Care Access Centres (CCACs) and direct service providers with CCAC contracts.

[Home and community care] "is central to the success of health reform and to making the overall health care system function more efficiently and effectively...[it] can often delay, and substitute for, admission to acute care hospitals and long term care facilities, at a lower cost of care." ¹

OCSA's 360 members are not-for-profit community support agencies, with 12,000 professional staff and 60,000 trained volunteers that provide a broad and flexible range of complementary services that complement each other. Located in most communities across Ontario, these agencies

• Are often the first place vulnerable seniors and persons with debilitating diseases or disabilities turn to in order to maintain their independence

- For many people, make the difference between staying at home or going into an institution
- Promote health and well-being, keeping people out of doctors' offices and hospitals
- Prevent personal and family breakdown due to caregiver stress by supporting them in their important roles. (Family caregivers provide up to 90% of care.)

■ Provide on average \$1.48 in services for every dollar of government funding through fundraising, in-kind assistance, donations and client co-payments

- Are directly accountable to the local communities that manage them
- Are cost effective and responsive to the changing needs of people and communities, and
- Support other areas of the health care system.

With the assistance of community support agencies and for as little cost as \$4.50/day, people can be maintained in their homes where they prefer to be. The average cost in a hospital is \$650/day and in a long-term care facility is \$125/day.

¹ Hollander, M.J. & Tessara, A., (March 2001). Evaluation of the Maintenance and Preventive Function of Home Care, Policy & Communication Branch, Health Canada, Executive Summary, vii.

The basket of services available in most communities

- adult/Alzheimer day programs
- ∎ attendant care
- caregiver support and education
- client intervention and assistance
- foot care
- home maintenance and repair
- Meals-On-Wheels and congregate dining
- personal support/
- homemaking/home help
- respite services
- security checks, telephone reassurance and friendly visiting
- social, recreational and
- intergenerational programs
- supportive housing
- transportation
- volunteer hospice/ palliative care

The Key to Sustainable Health Care in Ontario

In order to ensure crucial community support services continue to be available to the citizens of the province in the most cost-effective and efficient way as possible, the Ontario Community Support Association offers the following recommendations to the Government of Ontario:



RECOMMENDATION 1

Strong Government Leadership and Policy Development

The government must reiterate its commitment to home and community care, including the important function that community support services perform— maintaining people in their homes and preventing or delaying the need for institutionalization or hospitalization.

Action: The government must develop long-term policies that support a healthy community support system. There is a need for consistent provincial policies. Better practices and innovation should also be highlighted and encouraged. OCSA will work with MOHLTC to develop the most effective and efficient policies and processes. The Association will also continue to develop benchmarks and minimum standards for service across the province.



RECOMMENDATION 2

Restructure Ontario's Health Care System to Promote Service Integration and Coordination

The Health Services Restructuring Commission established by the government in April 1996 stressed the importance of "ensuring a full continuum of care is available in a variety of settings to support the needs of a growing and aging population that can be evaluated (wherever possible) according to health outcomes."² The Commission also stated that there were two overriding principles that should guide successful restructuring:

- Access to quality care in community settings, and
- Equity in the capacity to provide care among regions in the province³

The current health care system tends to operate in silos and contains financial disincentives for the various parts of the system to embark on local planning and collaboration across sectors. There are substantial cost-savings and efficiencies that can be achieved in health care but a major restructuring of the system is required.

 ² "Rebuilding Ontario's Health System", a Discussion Paper, Health Services restructuring Commission, July 1997, p. 5.
 ³ Ibid., p 18

RECOMMENDATION 3

Ensure Appropriately Funded and Accessible Community Support Services

• The current funding for community support services tends to be historical in nature rather than based on the actual needs of the clients in a given geographic area. This funding formula needs to be reviewed by MOHLTC in order that demands for service can be met equitably.

Action: Funding should be based on population health. A global funding formula (which hospitals have) based on the level of care required by each client with clear outcomes would also be preferable to the current cost per unit of service funding mechanism. OCSA will work with MOHLTC to develop this new funding approach.

■ A stable and dedicated workforce must be in place to ensure community services are available to people when they need them. Currently, for example, home and personal support workers earn an average of \$2–\$4 dollars less per hour than their counterparts in hospitals and long-term care facilities.

Action: A review of human resource compensation must be undertaken for Community Support Service sector workers.

■ In 1998, MOHLTC announced \$551.8 million in funding for CCACs and community support services over an eight-year period. To date \$269.3 million has been announced. There is still \$282.5 million yet to be allocated.

Action: There should be an immediate infusion of funding to community support services in the amount of \$45 million. There has been a sharp increase in demand for these services from frail seniors and persons with debilitating diseases and disabilities.

• With proactive government action now to preserve and improve community support services, Ontario's health care system can be sustainable and individuals who are unable to get access and are feeling powerless, will have their confidence restored.

II. INTRODUCTION

Recent funding constraints in Ontario's home and community care system have heightened the urgency of ensuring that Ontario's citizens get the care they need in their communities. Hundreds of Community Support agencies provide services across the province that help keep people healthy in their homes. They are integral to an efficient and effective home and community care system—and ultimately essential to the entire health care system.

The Ontario Community Support Association (OCSA) recently formed a Provincial Task Force of 32 representative member agencies (listed in Appendix D) to work on solutions and make recommendations to the Government of Ontario to ensure home and community care is there when people need it, now and in the future. Community Support Services work alongside their partners—the Community Care Access Centres (CCACs) and direct service providers with CCAC contracts.

Background

The home and community care system in Ontario is comprised of the following:

■ Across the province, OCSA's 360 not-for-profit community support service agencies provide a basket of services such as Meals on Wheels, adult/Alzheimer day programs, supportive housing and transportation. These agencies have a workforce of 12,000 and 60,000 volunteers.

■ 43 Community Care Access Centres (CCACs) that determine eligibility for in-home services such as nursing, home/personal support and physiotherapy. CCACs purchase these services for people through a managed competition process and contract with for-profit and not-for-profit agencies to deliver services to eligible clients.⁴ In 1999/00, over 410,000 individuals were served in their homes.

Community Support Services hold the key to a sustainable health care system. Over 750,000 Ontarians receive these services annually. There needs to be support for these services by government decision makers, other health providers and the public if we are to reshape our health care system into a well-functioning and cost-effective one. Pat is a 75-year-old woman who left the workplace 30 years ago to care for her frail parents. The many years of caregiving have taken their toll, both physically and financially. She developed osteoporosis and emphysema, and now requires constant oxygen.

Pat has no private pension. She could not afford the upkeep on her home. The Community Support Service agency, which had been providing in-home services, helped her move into the housing complex they manage. There, the risk of Pat falling is reduced and her breathing can be more closely monitored. She enjoys the increased social contacts and her health has improved noticeably. Pat puts the turn of events best in her own words: "You can say the proverbial heavy load has been lifted from my shoulders. For the first time in many years, I feel safe and comfortable."

⁴ Note: Some Community Support Service agencies also have contracts with CCACs to provide services such as nursing and home/personal support.

The Basket of Community Support Services

In-home Services

Essential services to maintain people at home in a safe and comfortable environment

- attendant care for persons with disabilities
- assistance with activities of daily living, i.e. bathing, toileting
- ∎ foot care

assistance with household activities such as laundry, meal preparation and shopping

- emotional support and reduction of social isolation
- respite care/caregiver relief
- security checks, telephone reassurance and friendly visiting

Adult/Alzheimer Day Programs/Respite Care

Important in preventing facility admission, caregiver breakdown; keeps people connected to their community

- respite for family caregivers
- stimulating activities for recipients to reduce isolation
- treatment for degenerative illness
- helps to prevent deterioration in mobility
- caregiver support and education

Supportive Housing

Important in delaying or reducing need for facility care and emergency services (e.g. falls—one of the most frequent reasons for emergency room visits by the elderly)

- cost-effective service for people with high needs
- 24-hour availability of home and personal support

Meal Programs

Proper nutrition is the cornerstone of good health

• both Meals-on-Wheels and congregate dining offer nutritious meals essential to health

- social interaction
- companionship (group dining)
- safety checks and monitoring

Client Intervention and Assistance (CIA)

Addresses issues arising from isolation, poverty, nutrition and housing. Flexible service that helps those people most difficult to reach and those who are at risk.

- deals with complex multiple needs of 'high risk' people (i.e. victims of elder abuse)
- provides crises intervention in critical situations
- provides in-depth, personalized service

A home and personal support worker who helps an individual with Multiple Sclerosis feel safe and cared for can alleviate loneliness and isolation, often cited as major causes of depression and deterioration. The same agency can also provide escorted, safe and affordable transportation to doctors' appointments or events where the individual can remain connected to others, increasing their sense of well being while providing valuable respite for family caregivers.

Transportation

Critical in preventing isolation—allows access to health services

- escort to medical appointments or social gatherings
- keeps people connected to their community

Social, Recreational and Intergenerational Programs

- support groups, exercise programs, talks
- reduces social isolation and prevents deterioration in mobility

Home Maintenance and Repair

Helps those who cannot afford 'market-rate' services

- odd jobs/repairs essential to remaining at home
- prevents often-easy exploitation of vulnerable people

Volunteer Hospice/Palliative Care

Supports the choice to die at home

- highly skilled staff and volunteers help those in last days of life
- provides support for families

(Appendix C, page 28, outlines the objectives, activities and outcomes of these services)

Who delivers the services and how are they funded?

Community Support Services are not-for-profit agencies and have grown out of the volunteer efforts of neighbours helping neighbours. These agencies are often called 'needs driven' as opposed to 'market driven,' focussing exclusively on individual and community needs. Their not-for-profit status means the 'bottom line' is care. Accountability and transparency are ensured in all their activities. These agencies are managed by volunteer boards of directors, staffed by highly trained professionals working with committed volunteers and enjoy the support of their communities.

Partial funding is received directly from the Ministry of Health and Long-Term Care's seven Regional Offices through service agreements. Agencies also fundraise a portion of their budgets from a variety of community sources such as a network of local donors, foundations and the United Way. They have flexible user co-payments based on income assessment and utilize a large number of dedicated volunteers in the provision of their services.

Impact on the Health Care System

Community Support Services have a substantial impact on the entire system. Insufficient funding means frail older persons and those with debilitating diseases or disabilities must turn to more costly forms of care. The Last year, 118 volunteers for a Meals on Wheels program in north Toronto worked seven days a week to deliver 35,650 meals. The meal includes soup, bread and butter, and an entrée with vegetables and dessert. The service, providing essential nutrition, is available to seniors, new mothers, caregivers, disabled persons, the chronically ill and convalescent. Clients are expected to pay for the actual cost of the food.

consequences are:

- higher admittance to nursing homes and homes for the aged
- more visits to family doctors and hospital emergency rooms
- hospitals unable to discharge patients because of lack of supports at home
- deterioration of caregivers' health due to burn-out and depression

■ the economic impact of caregivers having to quit jobs to look after family members

• a decline in the quality of life for those affected.

With a rapidly growing elderly population, demands for Community Support Services are expected to increase dramatically. The Canadian Health and Activity Limitations Survey showed that 40% of people over 65 have some degree of disability. Prevention and early intervention are cited by researchers as necessary in controlling both present and future costs. With greater recognition of, and support for their work, Community Support Services can continue to:

- help individuals and families care for themselves
- prevent or delay the deterioration of health, and
- promote physical and mental well-being.

III. SIX KEYS TO THE VALUE OF COMMUNITY SUPPORT

Community support roles can be described in relation to two things: first, to their overall position in the system, and second, to the functions of specific services.

1. Prevention first

The maintenance and preventive functions of Community Support Services, with their clear focus on wellness and independence, are critical to a well-run and cost-effective health care system.

Significant increases in the elderly population, accompanied by the accelerating cost of health care, will necessitate increased emphasis on prevention.

Community Support Services have a positive effect on health status, preventing or delaying deterioration. The basket of services offered can have a direct impact on the key determinants of health, for instance, by reducing social isolation and depression, and providing adequate nutrition and housing. This can, in turn, have a significant effect on the entire system—one outcome being the reduction in nursing home admissions.

Ethno-cultural diversity, a major factor in today's society, demands varied responses. Because of their individualized, flexible services, Community Support Services have the intimate knowledge of their neighbourhood and the community culture and are able to respond with sensitivity to local issues and needs. Supportive Housing provides 24-hour personal care support in not-for-profit and publicly-owned apartment buildings. This service reduces the pressure on hospital and emergency services and costs less.

Service	Typical number of people supported for \$5,000 per day	Average Cost per day
Hospital	8	\$650
Complex Care	18	\$284
Nursing Home	40	\$125
Supportive Housing	100	\$50*

* Costs are not calculated on a per diem basis, but rather on a unit cost, based on the hours of service provided (Source: "Supportive Housing in Ontario: Keeping People in Community" Position Paper, June 2001, OCSA)

Community Support Services actively exemplify and support all of the goals outlined in the Ministry of Health and Long-Term Care's Vision Statement:

"A health system that promotes wellness and improves health outcomes through accessible, integrated and quality services at every stage of life and as close to home as possible."

2. Cost-Effective health and social services together

Community Support Services help people to remain connected to their community, a crucial factor in promoting well-being. Social factors are major predictors for health status. In fact, the World Health Organization has identified poverty as the greatest predictor for poor health. Loneliness and isolation are also known to correlate with poor health.

Community Support Services recognize the intimate connection between health and the social environment.

"Partnership approaches have shown they promote senior's confidence while the ability to participate in their own care improves senior's health and independence." ⁵

The advantages to the health care system of the practical support that community support services provide are clear. People are helped to accept responsibility for much of their own care, to feel less powerless, and to live independently and with dignity in their own community. Savings are realized while substantial human benefits are achieved. Shirley finds caring for her husband. Frank. who has Alzheimer Disease increasingly difficult. Predictably, her own health has been significantly affected by her arduous caregiving role. The community support agency in their neighbourhood helps with respite services, a specialized day program and transportation to its Alzheimer Disease support program. Recently, the agency's volunteer visitor has involved a local men's group that Frank was active in years ago. Frank is enjoying the contact and Shirley appreciates the much-needed added rest.

⁵ In 20 Short Years: A Discussion Paper on Demographics and Aging, February, 2001 p.8.

A primary value of community support services is the ability to provide a broad and flexible range of services that complement each other. This improves quality and results in efficiencies that lower overall costs.

3. Neighbourhood-based means needs-based

A volunteer's familiarity with the local community is key to a Community Support Service agency's ability to make helpful connections. The agency can offer linkages and referrals to other important services like doctors or Wheel Transit, and respond to the changing needs of clients, avoiding more costly interventions. Cultural and linguistic diversity can also be accommodated.

4. Volunteerism

Community support is built on the firm foundation of volunteer governance and service delivery. Volunteer management has built-in structures of accountability—to funders, to consumers and to the communities they serve. These structures provide both fiscal and service accountability.

The activities of Community Support Service agencies are transparent, due in large part to their volunteer governance and not-for-profit status.

Organizations governed by volunteers are known to develop services that are responsive to local needs. For example, they often advocate for hard-toserve individuals who tend to be difficult to reach.

The fact that the sole focus of Community Support Services is to help people is a powerful draw for volunteers. Although services are directed by paid staff, volunteer service delivery is fundamental, continuously promoted and its value recognized. Many Community Support Service agencies began as volunteer services.

The fiscal impact of volunteer services is compelling. In 2001, Statistics Canada and the Voluntary Action Directorate established the value of volunteers at \$15.60/hour. Over 60,000 volunteers provide services worth more than \$44 million annually in OCSA's 360 member agencies.

5. Range of services

Meal programs and visiting homemaking were among the first Community Support Services, followed by a wide and varied range of other services that support independence. Most agencies now offer a number of services based on the fundamental recognition that people want support that allows them to continue to care for themselves.

Older persons and those with disabilities consistently refer to Community Support Services as their greatest need because they promote their independence. One of the major successes of these services is their remarkable ability to create the perception of providing "a little bit of help", when, in fact, the services are substantial, in-depth and sophisticated. Don lives alone on a farm several miles from the nearest town. For many years he has been unable to drive due to failing eyesight. Predeceased by his wife, he became reclusive, did not eat properly and his health deteriorated. He is totally dependent on OAS and GIS, having sold all but a small portion of his farm many years ago, and having depleted his resources throughout his wife's prolonged illness.

The transportation program of the local Community Support Service agency connected him to their 'diners club', where Don has begun to respond to the improved nutrition and socialization it provides. The agency has a 'connecting seniors' group program called 'A Time for Me', which has proven invaluable in reducing his loneliness and depression.

Don is now considering inviting another participant of the group to share his home and living expenses, providing him, as well, with needed companionship and help in maintaining his home. An older couple, one with Parkinson's and the other with a serious heart problem, receive in-home services and use an agency's transportation and day programs. Because these programs also involve monitoring their condition, a timely adjustment to their services may result in overall improvement in their health, a slowing of deterioration, or a referral to the CCAC for an assessment.

6. Accountability

Community Support Service agencies are accountable to their community through volunteers, donors, and their boards. Accountability is direct—people only donate money to, and volunteer for, an agency when they have confidence in the work being done. In addition agencies are accountable to government and other funders through legal agreements.

The Ontario Community Support Association leads the field in developing standards, quality services and training programs for the community care sector. In 1999, the Association's publication, "Standards & Indicators for Community Support Services: the Guide to Quality Care," was made widely available across the province.

THE CASE FOR SUPPORT

Why we need adequate funding for Community Support Services

These agencies

■ are often the first place vulnerable seniors and persons with debilitating diseases or disabilities turn to in order to maintain their independence

- for many people, make the difference between staying at home or going into an institution
- promote health and well-being, keeping people out of doctors' offices and hospitals
- prevent personal and family breakdown due to caregiver stress by supporting them in their important roles. (Family caregivers provide up to 90% of care. Almost 40% of facility placements occur because of caregiver burnout.)
- provide on average \$1.48 in services for every dollar of government funding through fundraising, in-kind assistance, donations and client co-payments
- ∎ are directly accountable to the local communities that manage them
- are cost effective and responsive to the changing needs of people and communities, and
- support other areas of the health care system.

V. THE KEY TO SUSTAINABLE HEALTH CARE IN ONTARIO

In order to ensure crucial community support services continue to be available to the citizens of the province in the most cost-effective and efficient way as possible, the Ontario Community Support Association offers the following recommendations to the Government of Ontario:



RECOMMENDATION 1

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The government must reiterate its commitment to home and community care, including the important function that community support services perform – maintaining people in their homes and preventing or delaying the need for institutionalization or hospitalization.

Action: The government must develop long-term policies that support a healthy community support system. There is a need for consistent provincial policies. Better practices and innovation should also be highlighted and encouraged.

OCSA will work with MOHLTC to develop the most effective and efficient policies and processes. The Association will also continue to develop benchmarks and minimum standards for service across the province.

RECOMMENDATION 2

Restructure Ontario's Health Care System to Promote Service Integration and Coordination

The Health Services Restructuring Commission established by the government in April 1996 stressed the importance of "ensuring a full continuum of care is available in a variety of settings to support the needs of a growing and aging population that can be evaluated (wherever possible) according to health outcomes."⁶ The Commission also stated that there were two overriding principles that should guide successful restructuring:

- Access to quality care in community settings, and
- Equity in the capacity to provide care among regions in the province⁷

The current health care system tends to operate in silos and contains financial disincentives for the various parts of the system to embark on local planning and collaboration across sectors. There are substantial cost-savings and efficiencies that can be achieved in health care but a major restructuring of the system is required.

 $^{^6}$ "Rebuilding Ontario's Health System", a Discussion Paper, Health Services restructuring Commission, July 1997, p. 5.

⁷ Ibid., p 18.

► RECOMMENDATION 3

Ensure Appropriately Funded and Accessible Community Support Services

• The current funding for community support services tends to be historical in nature rather than based on the actual needs of the clients in a given geographic area. This funding formula needs to be reviewed by MOHLTC in order that demands for service can be met equitably.

Action: Funding should be based on population health. A global funding formula (which hospitals have) based on the level of care required by each client with clear outcomes would also be preferable to the current cost per unit of service funding mechanism. OCSA will work with MOHLTC to develop this new funding approach.

• A stable and dedicated workforce must be in place to ensure community services are available to people when they need them. Currently, for example, home and personal support workers earn an average of \$2–\$4 dollars less per hour than their counterparts in hospitals and long-term care facilities.

Action: A review of human resource compensation must be undertaken for Community Support Service sector workers.

■ In 1998, MOHLTC announced \$551.8 million in funding for CCACs and community support services over an eight-year period. To date \$269.3 million has been announced. There is still \$282.5 million yet to be allocated.

Action: There should be an immediate infusion of funding to community support services in the amount of \$45 million. There has been a sharp increase in demand for these services from frail seniors and persons with debilitating diseases and disabilities.

• With proactive government action now to preserve and improve community support services, Ontario's health care system can be sustainable and individuals who are unable to get access and are feeling powerless, will have their confidence restored.



Seventy-eight percent of people polled recently are concerned about being able to afford home care for themselves or their parents beyond what the government will provide.

Ipsos-Reid poll commissioned by VHA Home HealthCare, Toronto, February 2001

Conclusion

Community Support Service agencies will continue to be critical in protecting and preserving our health care system. The simple fact is that preventive, health maintenance services work to keep costs down. An investment in prevention will reduce more costly health care services.

A recent study by Dr. Marcus Hollander, titled "Evaluation of the Maintenance and Preventive Function of Home Care," March 2001, provides evidence-based research supporting the value of home and community care. The study found that the costs to the health care system were \$4,000 more per year for "low level home care clients" who had their homemaking/personal support services cut.

[Home and community care] is central to the health care system because it can often prevent or delay, and substitute for, admission to acute care hospitals and long term care facilities, at a lower cost of care. Thus it appears to be central to the achievement of future efficiencies which arise from providing lower cost home care services instead of higher cost institutional services." ⁸

OCSA and its member agencies want to work with our partners in the community and the Government to ensure that Ontario has a healthy home and community care system that we can be proud of, and that will be there for our families in the future. We believe the recommendations we have put forward move us in that direction. Kay is an 84-year-old woman with severe arthritis, osteoporosis and a heart condition. When her husband, who was her primary caregiver, died three years ago, Kay found herself living alone for the first time in her life. She became depressed and sometimes appeared confused.

Kay's arthritis limits her mobility significantly, necessitating the use of a walker. This made the stairs in her two-story home prohibitive. She was considered at great risk of falls, which would very likely result in a fracture, due to her osteoporosis.

The Community Support Service agency that provides her day-to-day in-home assistance helped her relocate to their supportive housing complex, where the services she needs are available 24 hours a day. She particularly enjoys the agency's day program, which is located in the building.

Kay's depression has cleared and her general health has improved since her move to supportive housing. She has befriended another resident who suffers from Alzheimer Disease, a role that she finds very rewarding, commenting, "It's so nice to feel needed and useful."

⁸ Hollander, M.J., & Tessara, A., (March 2001). Evaluation of the Maintenance and Preventive Function of Home Care, Policy & Communication Branch, Health Canada, Executive Summary, viii.

APPENDIX A: MYTHS AND MISCONCEPTIONS

Community Support Services are burdened with several popular misconceptions that should be corrected.

Myth #1: Community Support Services and Community Care Access Centres are really the same.

Reality: The two agencies are different in origin and in their responsibilities. Community Support Services spring from the work of neighbours helping neighbours, while Community Care Access Centres (CCACs) were put in place by the Ontario government in 1996 to coordinate the home and community care system and to purchase services from both for-profit and not-for-profit providers. Each agency is a critical component and partner in the home and community care system.

Community Support Services

Community Support Services are not-for-profit community-based agencies. They provide both case management and front-line services. While some may have contracts with CCACs to provide services such as home/personal support, nursing and occupational therapy, the majority receive their funding directly from the Ministry of Health and Long-Term Care through service agreements to provide community services that help keep people healthy and in their own homes.

Community Support Service agencies are required to raise funds from the community. MOHLTC provides partial funding. The remainder comes from client fees, fundraising, individual donors, and other sources such as foundations and the United Way. They also have flexible user co-payments for many services based on income assessment and utilize a large number of volunteers in the provision of services.

Community Care Access Centres (CCACs)

In 1996 the Government of Ontario established CCACs to coordinate longterm care service delivery by purchasing front-line services from for-profit and not-for-profit organizations through a bidding process on behalf of clients who are eligible for these services. CCACs provide case management for the mandated services they contract for with non- and for-profit service agencies (primarily medical-oriented) and control access to long-term care facilities. There are 43 CCACs in Ontario with about 4,500 employees.

CCACs are fully funded by the Ministry of Health and Long-Term Care, are not expected to fundraise and do not rely on the use of volunteers for service delivery. CCACs have no client co-payments for eligible services.

THE CONTRAST BETWEEN COMMUNITY SUPPORT SERVICES AND CCACS				
	Community Support Services	CCACs		
Case management	for services provided by the agency and for all the other services available in a community.	for the services that they purchase from direct-service providers through a competitive process.		
Provision of service	in a flexible and responsive way, often implementing new services in response to community need.	do not provide service, they act as one point of access and brokers for services provided by other not-for- profit and for-profit agencies. They also control access to long-term care facilities. Services are clearly defined and inflexible.		
Eligibility criteria	can be applied in a flexible manner when needs are complex. If necessary, donations cover services that are required but are not funded.	apply strict eligibility criteria.		
Origin	spring from the work of neighbours helping neighbours.	implemented by government to organize home and community care in the province.		
Volunteer effort	involve volunteers on boards as well as in direct service provision.	volunteers are represented on their boards of directors.		
Accountability	accountable to their community through volunteers, donors, and their boards. Accountability is direct— people only donate money to and volunteer for an agency when they have confidence in the work being done. There can be no more direct community accountability than that.	accountable to their community through an elected board of directors.		
Integration	provide a range of services and also work closely with other service providers in their community and neighbourhood.	responsible for referrals to all services and restricted to providing only eligible services.		

Myth #2: Community Support Services provide just a little bit of help.

Reality: Community Support Services agencies are crucial. They provide a continuum of services, ranging from occasional help with necessary activities of daily living, to crisis management and intervention in critical situations. Many agencies offer services 24 hours/day, 7 days a week. They have set standards that ensure high quality and professional care. Programs for people with Alzheimer Disease, palliative care and supportive housing are just a few examples of the in-depth, substantial care they provide and the sophistication they have achieved.

Myth #3: Community Support Services are pleaders, not leaders.

Reality: The staff, board members and volunteers of Community Support Service agencies make no apology for their vigorous advocacy on behalf of vulnerable elderly people and those with disabilities. They consistently and passionately bring the inadequacies of the service system to the attention of government and the public.

• Community Support Service agencies lead the way in the critical task of developing community care standards and guidelines. They continue to find more efficient ways to provide services to people in need and point out when additional funding is required in order to achieve health care's desired outcomes and longer-term savings.

Myth #4: Community Support Services are really not 'professional.'

Reality: Many providers in community support have degrees in gerontology, psychology, social work and related fields. Others are nurses, graduates of college programs in gerontology or have taken specialized courses in the areas of aging and disabilities. A number of agency administrators have Business or Public Administration degrees. The Ontario Community Support Association continues to provide, promote and support training for staff and volunteers. It has been front and centre in the development of service standards and the training of personal support workers and others in the community care system.

Myth #5: Volunteer programs in Community Support Services are free and just 'do-gooding'.

Reality: Volunteer programs are invaluable, not free. Volunteers are recruited, screened, trained, supervised, supported and recognized. This takes professional staff, a well-developed organizational structure and committed amounts of funding.

■ There are many benefits to having volunteers involved in community support. Volunteers strengthen the overall sense of community and studies show that people who volunteer to help others are healthier and live longer.

APPENDIX B Ontario Community Support Association member agencies

Access Better Living Inc./Vie Independante et Enrichie Timmins (705) 268-2240 Activity Haven Seniors Centre Peterborough (705) 876-1670 Peterborough Adult Recreation Therapy Centre Brantford (519) 753-1882 Aide Aux Seniors de Sudbury Est/ Sudbury East Seniors Support Inc. (705) 898-2174 Noelville Allendale Adult Day Programs (905) 878-4141 Milton Alzheimer Society of Cornwall and District (613) 932-4914 Cornwall Alzheimer Society of Haldimand-Norfolk Simcoe (519) 428-7771 Alzheimer Society of Elgin-St. Thomas (519) 633-4396 St. Thomas Alzheimer Adult Enrichment Centre c/o Lambton Meadowview Villa (519) 882-1470 Petrolia Alzheimer Society Niagara Region (905) 687-3914 St. Catharines Alzheimer Society Halton-Wentworth Branch Hamilton (905) 529-7030 Alzheimer Society Windsor and Essex County Windsor (519) 974-2220 Alzheimer Society of Kitchener-Waterloo (519) 742-1422 Kitchener Alzheimer Day Away Program, Sunnyside Home, Regional Municipality of Waterloo (519) 893-8482 Kitchener Alzheimer Society of Peel Mississauga (905) 278-3667 Alzheimer Outreach Services of McCormick House London (519) 439-9336 Arnprior-Braeside-McNab Seniors At Home Program Arnprior (613) 623-7981 Attawapiskat Health Services Attawapiskat (705) 997-2166 Attendant Care Outreach Program C/o Providence Manor Kinaston (613) 548-7222 Au Chateau–Community Support Program (705) 753-5995 x228 Sturgeon Falls Balance Etobicoke (416) 236-1796 Barry's Bay & Area Home Support (613) 756-2772 Barry's Bay

Baycrest Community Day Centre for Seniors Toronto (416) 785-2500 Belvedere Heights Home for the Aged (705) 746-5602 Parry Sound Bernard Betel Centre For Creative Living Toronto (416) 225-2112 Blind River District Health Centre Blind River (705) 356-2265 Brampton Meals on Wheels Inc. Brampton (905) 453-4140 Calabogie & Area Home Support Program Inc. Calabogie (613) 752-2828 Caledon Community Services (905) 951-2300 Bolton Caledon Meals on Wheels Bolton (905) 857-7651 Call-A-Service Inc. Harmony Hall Centre for Seniors (416) 752-0101 Toronto Cambridge Home Support Cambridge (519) 740-3235 Campbellford Memorial Multicare Lodge Campbellford (705) 653-5980 Canadian Red Cross Society Brockville Branch Brockville (613) 342-3524 Canadian Red Cross Society Oakville Branch Oakville (905) 845-5241 Canadian Red Cross Society Niagara **Regional Homemaker Service** St. Catharines (905) 680-1818 Canadian Red Cross Society Brantford Branch Brantford (519) 753-4188 Canadian Red Cross Society Sault Ste. Marie & District Branch Sault Ste. Marie (705) 759-4547 Canadian Red Cross Society, Metro **Toronto Region** (416) 480-2500 Toronto Canadian Red Cross Society Toronto Homemaker Service Etobicoke (416) 236-1791 Canadian Red Cross Society Sudbury Branch Sudbury (705) 674-0737 Canadian Red Cross Society Timmins and District Branch Timmins (705) 264-7776 Canadian Red Cross Society Muskoka District Branch Bracebridge (705) 645-6233 Canadian Red Cross Society Cornwall Branch Cornwall (613) 932-3412

Canadian Red Cross Society Peterborough Br. Homemaker Services (705) 743-6233 Peterborough Canadian Red Cross Society North Bay Homemaking Service (705) 495-6200 North Bay Canadian Red Cross Society Chatham Branch Chatham (519) 352-4264 Canadian Red Cross Society Lindsay and District Branch (705) 743-6233 Peterborough Canadian Red Cross Society Milton Branch Milton (905) 875-1459 Canadian Red Cross Society Stratford Branch Stratford (519) 271-0330 Canadian Red Cross Society Northumberland Branch Peterborough (705) 743-6233 Canadian Red Cross Society Halton Region/Homemaker Services Burlington (905) 632-9420 Canadian Red Cross Society Guelph-Wellington Branch (519) 836-3523 Guelph Canadian Red Cross Society S.S. Marie & Dist. Branch-Homemaker Service Sault Ste. Marie (705) 759-4543 Canadian Red Cross Society Owen Sound/ Grey-Bruce Division Owen Sound (519) 376-5372 Canadian Red Cross Society Woodstock-Oxford Branch Woodstock (519) 539-0441 Canadian Red Cross Society Quinte Branch Belleville (613) 962-9121 Canadian Hearing Society Peterborough Branch Peterborough (705) 743-1573 CANES Home Support Services (Central & Northern Etobicoke Home Support Services) Etobicoke (416) 743-3892 Care-Ring Northwest-C/o Northminster United Church (416) 961-0447 Toronto Carefirst Seniors and Community Services Association Scarborough (416) 502-2323 Carleton Place/Beckwith Community Support Inc. Carleton Place (613) 253-0733 Catholic Family Services of Hamilton-Wentworth Hamilton (905) 527-3823 Central Neighbourhood House (416) 966-8595 Toronto

Central Frontenac Community Services Corporation Sydenham (613) 376-6477 Centre de Jour Guigues Ottawa (613) 241-4070 Centre for Information and Community Services of Ontario Scarborough (416) 292-7510 Chapleau Cree First NationChapleau (705) 864-0784 Chapleau Home Support C/o Services de Sante de Chapleau Health Services (705) 864-1623 Chapleau CHATS-Community Home Assistance To Seniors Aurora (905) 713-3373 Cheshire Homes (Hastings - Prince Edward) Inc. (613) 966-2941 Belleville Cheshire Homes of London, Inc. London (519) 439-4246 Chippewas of Kettle and Stoney Point Health Services Forest (519) 786-5647 Circle of Care (416) 635-2860 Toronto City of Waterloo-Home Support Services Waterloo (519) 579-6930 City of Timmins Community Home Support Services Timmins (705) 360-8456 City of Thunder Bay Community Services Dept. Thunder Bay (807) 625-2785 City of Kitchener Seniors Division (519) 741-2916 Kitchener Community Care Concept of Woolwich, Wellesley & Wilmot (519) 669-3023 Elmira **Community Support Services** (807) 468-4562 Kenora Community Support Services-A Division of Cassellholme (705) 474-4250 North Bay Community Care Belleville Inc. Belleville (613) 969-0130 Community Care Victoria County (705) 324-7323 Lindsay Community Outreach Services Milverton (519) 595-8755 Community Care for Central Hastings (613) 478-2273 Tweed Community Resource Centre of Goulbourn/Kanata/West Carleton Kanata (613) 591-3686 Community Care East York (416) 422-2026 Toronto Community and Neighbourhood Services, Adult Homes for the Aged Division Toronto (416) 392-8910 Community Care Peterborough (705) 742-7067 Peterborough

Copernicus Lodge Toronto (416) 536-7122 Cornwall Home Assistance To Seniors Inc. Cornwall (613) 937-3922 Craigwiel Adult Day Programs Ailsa Craig (519) 293-3215 x226 Cumberland Home Support (613) 834-9195 Orleans Dearness Services for Seniors (519) 681-0400 London Dilico Ojibway Child and Family Services Thunder Bay (807) 622-9060 Dixie Bloor Neighbourhood Drop-in Centre Mississauga (905) 629-1873 Dixon Hall Toronto (416) 863-0499 Don Mills Foundation for Senior Citizens (E.P. Taylor Place) North York (416) 510-1100 Downsview Services To Seniors Inc. North York (416) 398-5510 Dr. Harold S. Trefry Memorial Centre Richards Landing (705) 246-0036 Dufferin County Community Support Services Shelburne (519) 925-5452 **Dundas Community Services** (905) 627-5461 Dundas Durham Region Community Care (905) 404-2224 Oshawa East York Meals on Wheels Inc. (416) 424-3322 Toronto East Parry Sound Community Support Services Program c/o Eastholme Powassan (705) 724-2005 East Wellington Advisory Group For Family Services Frin (519) 833-9696 Eganville and District Senior Citizen's Needs Association Eganville (613) 628-2354 Elgin County Homes (519) 631-0620 St. Thomas Elisabeth Bruvere HELPLINE Ottawa (613) 562-6368 Espanola Home Support Program Espanola (705) 869-3388 **Etobicoke Services For Seniors** Etobicoke (416) 243-0127 Fairview Lodge Adult Day Program Whitby (905) 668-5851 Family Service -Kent Chatham (519) 354-6221 Family Services of Hamilton-Wentworth Hamilton (905) 523-5640 Family Service Association of Metro Toronto Toronto (416) 595-9230 First Place Hamilton Hamilton (905) 523-0360

Fort Erie Meals on Wheels, Inc. Fort Erie (905) 871-9366 Fort Frances Tribal Area Health Authority Fort Frances (807) 274-2042 Forum Italia Non-profit Housing Corporation Mississauga (905) 507-2711 Four Counties Health Services-Four Counties Adult Day Centre Newbury (519) 693-4441 Four Counties Brain Injury Association (705) 741-1172 Peterborough Fred Victor Centre Toronto (416) 364-8228 Friuli Centre Woodbridge (905) 856-4922 Gateway Community Health Centre Tweed (613) 478-1211 Glanbrook Home Support Programme Inc. Binbrook (905) 692-3464 Glen Stor Dun Lodge Cornwall (613) 933-3384 x234 Glengarry Inter Agency Group Inc. Alexandria (613) 525-4802 **Glengarry Outreach Seniors Services** Alexandria (613) 525-4443 Gloucester Centre for Community **Resources–Home Support Program** Gloucester (613) 741-6025 Good Shepherd Centres Hamilton (905) 525-5188 Greater Angus Meals on Wheels Angus (705) 424-5959 Grocer-Ease (905) 545-1175 Hamilton Haldimand-Norfolk Community Senior Support Services Inc Hagersville (905) 768-4135 Haliburton County Home Support Services (705) 457-2941 Haliburton Halton Helping Hands (905) 844-0252 Oakville Halton Hills Community Support and Information Georgetown (905) 873-6502 Halton Region Social Services-Supportive Hsg. Oakville (905) 825-6123 Harmer House (613) 726-8882 Nepean Heidehof Supportive Housing St. Catharines (905) 935-3344 Helen Zurbrigg Non-Profit Homes Inc. Hamilton (905) 387-3771 Hellenic Home for the Aged Inc. Toronto (416) 654-7700x235 Helping Hands Orillia (705) 325-7861 Orillia Hildegarde Centre Kingston (613) 548-7222

Home Support Services, Morrisburg And District Meals on Wheels Morrisburg (613) 543-4568 Home and Community Support Services Of Grey-Bruce Owen Sound (519) 372-2091 Home Support for the Elderly Sioux Lookout Sioux Lookout (807) 737-3142 Hornepayne Community Hospital Home Support Programs (807) 868-2442x123 Hornepayne Hospice of Waterloo Region Kitchener (519) 743-4114 Humber Community Seniors' Services (416) 249-7946 Weston Huron Adult Day Centre Clinton (519) 482-7943 Huron Lodge Community Service Board Elliot Lake (705) 848-2019 x33 India Rainbow Community Services of Peel Mississauga (905) 507-6099 Indersoll Services for Seniors Ingersoll (519) 485-2269 Interlink Community Cancer Nurses (416) 599-5465 Toronto Islington Centre - Etobicoke Senior Citizens Etobicoke (416) 231-3431 Jewish Family Services Ottawa-Carleton Ottawa (613) 722-2225 John Noble Home-Alzheimer Day Centre Brantford (519) 754-4065 Joyce Scott Non-Profit Homes Inc. Milton (905) 878-6722 K-W Seniors Day Program Inc. (519) 893-1609 Kitchener Kashechewan Health Services Kashechewan (705) 275-1023 Keewaytinook Okimakanak Northern Chiefs Council Balmertown (807) 735-1381 Kemptville and District Home Support Kemptville (613) 258-2546 Kenora Chiefs Advisory Inc. (807) 548-1141 Kenora Kingfisher Lake Home & Community Care Nursing Station Kingfisher Lake (807) 532-2067 Kitchener Senior Volunteer's Services Kitchener (519) 745-1096 Kitchener-Waterloo Friendship Group for Seniors Kitchener (519) 742-6502 Kiwanis Adult Day Program (905) 549-4023 Hamilton Lambton Elderly Outreach Inc. (519) 882-1068 Petrolia Land O' Lakes Community Services Northbrook (613) 336-8934

Lennox & Addington Seniors Outreach Services Inc. Napanee (613) 354-6668 Les Centres D'Accueil Heritage (416) 365-3350 Toronto Life Long Care Program Sioux Lookout (807) 737-1903 LOFT Community Services - John Gibson House Toronto (416) 537-3477 Long Term Care-Lac Seul First Nation Hudson (807) 582-3317 Lutheran Social Services (Owen Sound) Owen Sound (519) 371-4224 Maple City Centre For Older Adults Chatham (519) 352-5633 Marianhill Pembroke (613) 735-6838 Meals on Wheels Manitouwadge (807) 826-3586 Manitouwadge Meals on Wheels South River/ Sundridge South River (705) 386-0797 Meals on Wheels Elmvale Elmvale Meals on Wheels Huntsville (705) 789-7175 Huntsville Meals on Wheels/Community Support Services Fonthill (905) 892-7779 Meals on Wheels Beaverton Beaverton (705) 426-9278 Meals on Wheels Niagara Falls Inc. Niagara Falls (905) 356-7548 Meals on Wheels and More North York (416) 225-6041 Meals on Wheels Alliston Alliston (705) 435-0370 Meals on Wheels Peterborough Peterborough (705) 745-5522 Meals on Wheels Kitchener-Waterloo Incorporated (519) 743-1471 Kitchener Meals on Wheels London London (519) 660-1430 Meals on Wheels Cornwall Cornwall (613) 933-3384 Meals on Wheels Milton Milton (905) 878-6699 Meals on Wheels Lucknow Lucknow (519) 528-2190 Meals on Wheels Thorold-St. Catharines Thorold (905) 682-0333 Meals on Wheels Sudbury Inc. Sudbury (705) 525-4554 Meals on Wheels Innisfil Innisfil (705) 436-3318 Meals on Wheels Port Colborne Inc. Port Colborne (905) 835-1581 Meals on Wheels Gravenhurst

Meals on Wheels Vankleek Hill Popote Roulante Vankleek Hill (613) 678-2723 Meals Here And There Inc. Toronto (416) 466-0587 Metis Nation of Ontario-Long Term Care Program (416) 977-9881 Toronto Mid-Toronto Community Services Inc. (416) 962-9449 Toronto Midwestern Adult Day Services Clinton (519) 482-7800 Mills Community Support Corporation Almonte (613) 256-4700 Mississauga First Nation Blind River (705) 356-1621 x.2226 Mitchell & Area Community Outreach C/O Ritz Lutheran Villa (519) 348-9765 Mitchell Momiji Health Care Society (416) 261-6683 x240 Scarborough Mon Sheong Foundation Toronto (416) 977-3762 Moose Cree First Nation Moose Factory (705) 658-4619 Mushkegowug Council Moose Factory (705) 658-4222 Muskoka Seniors Home Assistance Huntsville (705) 789-6676 N.H.V.C.S. Seniors Home Support (613) 332-4700 Bancroft Native Canadian Centre of Toronto-Seniors' Program Toronto (416) 964-9087 Nepean Seniors' Home Support (613) 829-1133 Nepean New Post First Nation Cochrane (705) 272-3933 Niagara Ina Grafton Gage Village St. Catharines (905) 935-6822 x223 Nor-Dun Seniors' Support Centre (613) 774-6109 Winchester North Stor Seniors' Support Centre Finch (613) 984-2436 North Perth Seniors Centre, Meals on Wheels Listowel (519) 291-1221 North Frontenac Community Services Sharbot Lake (613) 279-3151 North Huron Special Transit Corporation Wingham (519) 357-4074 North Shore Tribal Council (705) 844-2021 Cutler North Renfrew Long Term Care Services, Inc. Deep River (613) 584-1900 North York Seniors Centre Mel Lastman Place North York (416) 733-4111 Northumberland County Community Care Inc. Campbellford (705) 653-0955

(705) 687-4511

Gravenhurst

Northwestern Independent Living Services Inc. Kenora (807) 468-3486 Oakville Kiwanis Meals on Wheels Oakville (905) 842-1411 Odawa Native Friendship Centre (613) 722-3811 Ottawa Olde Forge Community Resource Centre (613) 829-9777 Ottawa Oneida Administration Oneida Long Term Care Program (519) 652-3244 Southwold Oshawa Senior Citizens Centres Oshawa (905) 576-6712 Ottawa West Community Support Ottawa (613) 728-6016 Pakenham Community Home Support Pakenham (613) 624-5647 Park Lane Seniors' Support Centre (613) 535-2924 Williamsburg Partners In Caring-St. Vincent de Paul Hospital Brockville (613) 342-4461 Patricia Region Supportive Housing Community Support Services Dryden (807) 223-5278 Peel Senior Link Mississauga (905) 712-4413 Peetabeck Health Services Fort Albany Pembroke Handi-bus Pembroke (613) 735-6998 Personal Choice Independent Living (613) 238-2723 Ottawa Petawawa Meals on Wheels (613) 687-2230 Petawawa Physically Handicapped Adults' Rehabilitation Association North Bay (705) 476-0733 Pleasant Manor Retirement Village Virgil (905) 468-2234 Prescott Meals on Wheels Prescott (613) 925-2988 Programme Communautaire (Residence Saint-Louis) Orleans (613) 824-1720 **Providence Centre** (416) 759-9321 4024 Scarborough **R**ainycrest Home Fort Frances (807) 274-9858 Raise Home Support For the Elderly Kitchener (519) 744-7666 Regional Niagara-Seniors Community Program Welland (905) 735-5591 x233 Renfrew and Area Seniors' Home Support Inc. Renfrew (613) 432-7691 **Richview Residence Supportive** Housing Corporation Etobicoke (416) 247-5316 Rideau Lakes Home & Community Support Services Perth (613) 267-6400

S.A.I.N.T.S. (Student Assistance In North Toronto for Seniors) Toronto (416) 481-6284 S.E.N.A.C.A. Seniors Day Program -Halton Inc. (905) 337-8937 Oakville S.P.R.I.N.T. (Senior Peoples Resources in North Toronto) (416) 481-6411 Toronto Sagamok Anishnawbek First Nation Massey (705) 865-2171 Salvation Army Golden Agers (519) 376-5699 Owen Sound Salvation Army Golden Agers (905) 522-3681 Hamilton Sandy Lake First Nation Sandy Lake (807) 774-5121 Sarnia & District Senior Volunteer Community Services (Senior VIP) (519) 332-2814 Sarnia Scarborough Support Services For the Elderly Inc. Scarborough (416) 750-9885 Scott Mission Seniors Services (416) 923-8872 Toronto Second Mile Club Of Toronto Toronto (416) 597-0841 SEN Community Health Care Hamilton (905) 522-6887 Senior Citizens of Woodstock Inc. Southgate Centre (519) 539-3850 Woodstock Senior Outreach Services Manitoulin Centennial Manor (705) 368-3493 Little Current Senior Link (416) 691-7407 Toronto Senior Adult Services In the Annex (416) 923-8909 Toronto Senioren Haus Concordia Inc. Kitchener (519) 745-1200 Seniors Outreach Services - Maxville Manor Maxville (613) 527-2170 Seniors Life Enhancement Centres-Centre II Mississauga (905) 279-9061 Seniors Activation Maintenance Program Inc. (SAM) Hamilton (905) 525-5632 Seniors Outreach Services Glebe Centre (613) 230-5730 Ottawa Seniors Association Kingston Region Kingston (613) 548-7810 Serpent River First Nation Geka Wigwam-Seniors Lodge Cutler (705) 844-2818 Service D'Entraide Communautaire Vanier (613) 241-1266 Services To Assist Independent Living (S.A.I.L.) Gananoque (613) 382-1175

Services communautaires de Prescott et Russell Hawkesbury (613) 632-0939 Shalom Village Day Program for Adults Hamilton (905) 529-1613 Sheguiandah First Nation Home Support Shequiandah (705) 368-2781 Shepherd Village Inc. (416) 609-5700 Toronto Shibogama Health Authority (807) 737-2662 Sioux Lookout Shoal Lake Band No. 40 Shoal Lake (807) 733-3577 Simcoe County Association for the Physically Disabled Barrie (705) 737-3263 South Essex Community Centre (519) 326-8629 Leamington South Stormont Seniors' Support Centre Ingleside (613) 537-8644 South-East Ottawa Centre for a Healthy Community Ottawa (613) 737-5115 St. Demetrius Supportive Care Services (416) 246-7979 Etobicoke St. Elizabeth Health Care, Markham (905) 940-9655 St. Stephen's Community House Toronto (416) 929-3281 St. Paul's L'Amoreaux Centre Scarborough (416) 493-3333 St. Marys & Area Home Support Services St. Marys (519) 284-3272 St. Christopher House Toronto (416) 532-4828 St. Joseph's Villa (905) 627-9011 Dundas St. Matthew's House Hamilton (905) 523-5546 St. Andrew's Residence–Adult Day Centre Chatham (519) 354-8103 St. Matthew's Bracondale House (416) 656-2669 Toronto St. Clair West Services for Seniors (416) 787-2114 Toronto St. Joseph's Hospital and Home Adult Day Service Guelph (519) 824-6000 Storefront Humber Inc. (416) 259-4207 Etobicoke Stratford Meals on Wheels & **Neighbourly Services** Stratford (519) 271-2217 Sudbury Elder Abuse Committee Sudbury (705) 524-5738 Sudbury Finnish Resthome Society Inc. Sudbury (705) 524-3137 Tabor Manor (905) 934-9177 St. Catharines

Tele-Touch (Seniors) Hamilton (905) 522-9567 The Good Companions Seniors' Centre Ottawa (613) 236-0428 The Friends Parry Sound (705) 746-5102 The Next Step To Active Living Program Mississauga (905) 820-6888 The Prince Edward County Community Care for Seniors Association Picton (613) 476-7493 The Good Neighbours' Club Toronto (416) 366-5377 The Corporation of the Township of White River-Supportive Housing White River (807) 822-2255 The Corporation of the Municipality Of Machin (807) 227-2633 Vermilion Bay The King's Daughters Dinner Wagon Ottawa (613) 233-2424 Tillsonburg & District Multi-Service Centre Tillsonburg (519) 842-9008 Timiskaming Home Support/Soutien a Domicile (705) 647-2060 New Liskeard **Toronto Intergenerational Partnerships** Toronto (416) 531-8447 Town and Country Support Services (519) 357-3222 Wingham Township of Osgoode Home Support Program Metcalfe (613) 821-1101 Township of Rideau Senior Citizens' Service Centre Inc Manotick (613) 692-4697 True Davidson Meals on Wheels (East York) Inc. (416) 752-9667 Toronto Tyendinaga First Nation Deseronto (613) 967-3603 **U**CCM Mnaamodzawin Health Services Long Term Care Program Shequiandah (705) 368-2182 Ukrainian Senior Citizens' Club of Sudbury Inc. Sudbury (705) 673-7404 Unionville Home Society Unionville (905) 477-2822 United Mennonite Home, Supportive Housing Vineland (905) 562-1458 Valleyview Home for the Aged Senior Day Program St. Thomas (519) 633-1030 VHA Health & Home Support Ottawa (613) 238-8420 VHA Health & Home Support Services (905) 389-1970 Hamilton Villa Colombo Home for the Aged, Casa Del Zotto Toronto (416) 780-0407

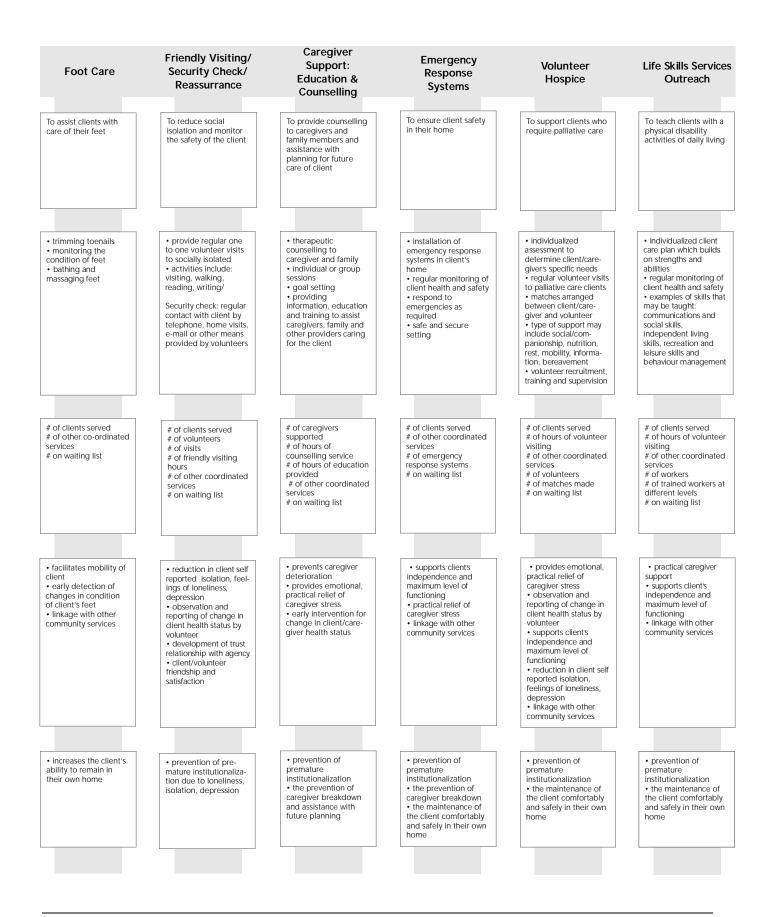
Visiting Homemakers Association, Toronto Toronto (416) 489-2500 Volunteer Centre of T.O. (416) 961-6888 Toronto VON-Peterborough, Victoria, Haliburton Branch Peterborough (705) 745-6072 VON-Windsor-Essex County Windsor (519) 254-4866 VON Algoma Branch Sault Ste. Marie (705) 942-8200 VON Perth-Huron Community Support Services Stratford (519) 271-0728 VON Alzheimer Outreach Program **Carleton Place** (613) 257-3296 VON Sarnia–Lambton Sarnia (519) 542-2310 x223 VON Hamilton-Wentworth Hamilton (905) 522-1022 VON Hastings, Northumberland, Prince Edward Branch Trenton (613) 392-4181 VON Meals on Wheels North Bay North Bay (705) 474-7048 **VON Renfrew County** (613) 732-9993 Pembroke VON Chatham-Kent Branch Chatham (519) 352-4462 VON Thunder Bay & District Branch Thunder Bay (807) 344-0012 VON Toronto-York Region Branch (905) 944-2171 Markham VON Eastern Lake Ontario Branch Kingston (613) 634-0130 VON Oxford County Branch (519) 539-1233 Woodstock **VON Peel Branch** Mississauga (905) 821-4474 VON Waterloo-Wellington-Dufferin Guelph (519) 822-5081 VON Grev-Bruce Branch Owen Sound (519) 376-5895 VON Brockville, Leeds & Grenville Home Support Program Brockville (613) 342-3693 VON Ottawa-Carleton (613) 749-7557 Ottawa **VON Middlesex** Strathroy (519) 245-3856 Walden Community Care Program Lively (705) 692-4651 Walden Home Support Program (705) 692-4651 Lively Walpole Island First Nation Health Centre Walpole Island First Nation (519) 627-0765 Wapekeka Home & Community Care Program c/o Wapekeka Nursing Station Wapekeka (807) 537-2320 Warden Woods Community Centre Scarborough (416) 694-1138

Waterloo Wellington Red Cross Homemaker Service Waterloo (519) 746-6600 Welcome Inn Community Centre (905) 525-5824 Hamilton Wellington Seniors Day Out Program (519) 846-5359 x252 Elora West Toronto Support Services For Senior Citizens and the Disabled Inc. Toronto (416) 653-3535 West Hill Community Services Scarborough (416) 284-5931 West Elgin Community Health Centre (519) 768-1715 West Lorne Wesway Thunder Bay (807) 625-6690 Wikwemikong Amik-ook Seniors' Centre Community Support Services Wikwemikong (705) 859-2260 William Osler Health Centre, Georgetown Hospital Campus Georgetown (905) 873-0111 Windigo First Nations Council Sioux Lookout (807) 737-1585 Wingham & Area Seniors Day Centre Wingham (519) 357-1440 Woodgreen Community Centre of Toronto Toronto (416) 469-5211 Woolwich Transit Inc. O/a Kiwanis Transit (519) 669-4533 Elmira Wunnumin Lake Home and Community Care Program Wunnumin Lake First Nation (807) 442-2573 Yee Hong Centre for Geriatric Care Scarborough (416) 321-6333 York Durham Aphasia Centre Stouffville (905) 642-2053 York West Senior Citizens Centre Weston (416) 245-4395 Yorkminster Park Meals on Wheels (416) 482-0549 Toronto

APPENDIX C : COMMUNITY SUPPORT SERVICES ACCOUNTABILITY FRAMEWORK

COMPONENTS	Adult/Alzheimer Day Program	Attendant Care	Client Intervention and Assistance	Respite Care/ Caregiver Support	Transportation
OVERALL GOAL	To assist clients to achieve and maintain their level of health and well-being To provide caregiver support and relief from their caregiving duties	To assist clients with permanent disabilities with routine personal activities of daily living	To provide support for vulnerable at-risk people by stabilizing a crisis situation and to prepare for the future	To provide support and temporary relief from the caregiving role to caregivers	To provide affordable, reliable and accessible transportation to essential appointments and activities
KEY OBJECTIVES & ACTIVITIES	supervised, individual- ized social, recreational, physical programming build on strengths and abilities of individuals provide personal care services, nutritious meal and may include transportation if required a safe environment caregiver support and education	 individualized client care plan which builds on strengths and abilities regular monitoring of client health and safety assistance with daily living, i.e. bathing, dressing, toileting, exercising, skin care, mouth and hair care assistance with routine household activities (light housekeeping, meal preparation) 	Using a case management model: • client engagement/ relationship building • assessment, identifi- cation of client needs • service planning and coordination • services implementa- tion i.e. advocacy, counselling, placement, moving and funeral arrangements • monitoring of service providers and client safety	Support, based on needs, may include: • supervision, activa- tion, social, recreational activities in safe, secure environment, assistance with daily living i.e. client personal care, light housekeeping, meal preparation • individualized care planning for client/caregiver • service delivery can be 24 hrs a day, 7 days a week	escorted transportation to medical appointments, shopping, social activities and programs by volunteers and/or staff
OUTPUTS	# of clients served # of volunteers # of caregivers relieved # on waiting list	# of clients served # of hours of services # of other coordinated services # of workers # of trained workers at different levels # on waiting list	# of clients served # of service hours # of other coordinated services # of identified service gaps # on waiting list	# of clients served # of caregivers supported # of respite hours provided # of other coordinated services # on waiting list	# of clients served # of trips made # of volunteers # of volunteer hours # of other coordinated services # of different types of transportation requests # on waiting list
SHORT-TERM OUTCOMES	prevention of pre- mature institutionalization and hospitalization elient socialization opportunities early intervention for change in health status of client/caregiver decrease caregiver stress/worry	monitors client's health status supports client's independence and maximum level of functioning prevents deterioration of living environment reduces caregiver stress ilinkage with other community services	resolution of immediate crisis · client perceived increase in quality of life · relationship established with client · initiation of support services · increase in client's ability to remain in their own home	 prevents caregiver deterioration, provides emotional, practical relief and reduces stress client stimulation, companionship, support early intervention for change in client/care- giver health status implementation of necessary other services ensure client safety 	reduces isolation and improves social interaction reduces caregiver stress provides access to medical treatment and community services early intervention for client health changes increases client's support network
LONG-TERM OUTCOMES	appropriate timing of necessary institutionalization of client informed caregiver placement planning and decisions	the prevention of premature institutionalization the maintenance of the client comfortably and safely in their own home	 provision of support and services necessary for the client to remain in their own home. establishment of client goals and plans for the future 	prevention of pre- mature institutionali- zation prevention of caregiver breakdown assistance with future planning	increases the client's ability to remain in their own home

Meals on Wheels/ Congregate Dining	Personal Support Services	Home Maintenence and Repair	Social Recreational & Intergenerational Programs	Home Help/ Homemaking	Supportive Housing
To provide individualized nutritional meals To promote social interaction, health and well-being	To assist clients with routine personal activities of daily living	To ensure client home comfort and safety	To provide opportunities for social interaction while reducing isolation and fostering friendships	To maintain a safe and comfortable home environment	To provide a home-like setting which supports the health, safety and independence of clients who are frail, have a disability, acquired brain injury or HIV/AIDS
Meals on Wheels: • volunteer meal delivery • individualized dietary needs addressed • menus reviewed by a dietitian • regular monitoring of client health and safety Congregate Dining: • social dining, enter- tainment, seminars • volunteer transportation	 individualized client care plan which builds on strengths and abilities regular monitoring of client health and safety assistance with daily living ie. bathing, dressing, toileting, exercising, skin care, mouth and hair care 	heavy seasonal cleaning window washing, yard work snow shoveling, floor scrubbing, arrangement of repairs (i.e. electrical, roof repair and barrier free access)	new skill development opportunities for life long learning support groups painting/drawing classes computer classes woodworking swimming, exercise bridge, euchre educational lectures language classes	assistance with routine household activities including: light housekeeping, laundry, ironing, shopping, meal preparation, vacuuming and dusting, caring for children, supervision	accessible 24 hour security check, emergency response assistance with activities of daily living including: personal care, meal preparation, laundry, shopping coordination of other community services access to support services access to support services safe and secure setting home-like living environment
# of clients served # of meals delivered # of volunteers # of volunteers # of corporations/ agencies involved # of different types of meals provided # of other coordinated services # on waiting list	 # of clients served # of workers # of hours of service # of different types of service # of different referral sources # of workers trained at different levels # on waiting list 	<pre># of clients served # of jobs arranged # of workers # of different types of jobs requested # on waiting list</pre>	<pre># of clients served # of volunteers # of volunteer hours # of activities offered # of other coordinated services # on waiting list</pre>	# of clients served # of workers # of hours of service # of different types of tasks performed # of other coordinated services # on waiting list	 # of clients / residents # of workers # of days provided # of emergency response systems # of emergencies handled # of other coordinated services # on waiting list
maintains individuals health by providing nutritious meals opportunity for early intervention due to detection of change in client health status raises community consciousness of client needs through volunteer support reduces social isolation	 support and monitoring of client health status prevents deteriorization of living environment reduces caregiver stress client independence and maximum level of functioning supported 	maintains client safety in their own home coordination of regular home upkeep coordination of other community services (which were not able to provide service previously due to condition of home) •prevention of deterioration of living environment	mental and physical stimulation · peer support · development of new friendships · development of new skills · volunteer opportunities · linkage to community support services · early intervention for client health changes	 maintains health and safety of the home environment prevents deterioration of living environment linkages to other community services monitoring of the quality and reliability of the workers 	early detection of change in clients health status and safety provides social interaction opportunities ilinkages to other community services accommodation of clients changing needs maximizes the independence of clients
prevention of hospitalization due to malnutrition prevention of premature institutionalization reduction of isolation, and loneliness	 prevention of premature institutionalization. maintenence of the client comfortably and safely in their own home 	maintenance of the client comfortably and safely in their own home	reduction of isolation, loneliness and improved well- being	assists clients to remain in their own homes	clients with special needs receive regular health & safety services prevents premature institutionalization of those needing daily assistance but not at the level of care in an institution



COMMUNITY SUPPORT SERVICES ACCOUNTABILITY FRAMEWORK Programs, goals, objectives, activities, outputs and outcomes that contribute to the key Determinants of Health

Determinants of health:

- social support networks
- education
- employment and working conditions
- ∎ social environments
- physical environments
- personal health practices
- healthy child development
- biology and genetic endowment
- health services
- ∎ gender
- ∎ culture

[Source: World Health Organization's (WHO) International Classification]

These in turn lead to:

- the prevention of premature institutionalization or hospitalization
- the maintenance of client comfortably and in their own home
- the prevention of caregiver breakdown and assistance with future planning
- the reduction of isolation, loneliness and depression
- the improvement of well-being

APPENDIX D: OCSA Community Support Services Task Force Members

OCSA Project Manager: Cheryl Gorman 416-653-7117

District A

1. Tracy Wardle, Meals on Wheels, London Tel: (519)660-1430

2. Jean Young, Town & Country Support Services, Wingham Tel: (519)357-3222

District B

3. Lynne Edwards, Seniors Activation Maintenance Program (SAM), Hamilton Tel: (905)525-5632

4. **Gertrude Cetinski**, Alzheimer Society Halton-Wentworth Branch, Hamilton Tel: (905)529-7030

5. Juanita Gledhill, VHA, Hamilton Tel: (905)389-1970

6. **Ray Applebaum**, Peel Senior Link, Mississauga Tel: (905)712-4413

7. Linda Brown, SEN Community Health Care, Hamilton Tel: (905)522-6888 x 2224

8. Joan Barham, Halton Hills Community Support & Information, Georgetown Tel: (905)873-6502

9. **Debbie Bergey**, VON–Waterloo-Wellington-Dufferin Tel: (519)822-5081

District C

10. **David Kelly**, Senior Link, Toronto Tel: (416)691-7407

11. **Jane Moore**, Senior People's Resources in North Toronto (SPRINT), Toronto Tel: (416)481-6411

12. **Susan Pigott**, St. Christopher House, Toronto Tel: (416)504-3535 x 224

13. Lidia Monaco, St. Christopher House, Toronto Tel: (416)532-4828 14. **David Wright**, VHA, Toronto Tel: (416)489-2500, x 4620

15. **Ann Burlison**, West Toronto Support Services for Senior Citizens and the Disabled Tel: (416)653-3535

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18. **Sybille Hahn**, C.A.N.E.S., Toronto Tel: (416)743-3326, Ext. 229

19. **Kaarina Luoma**, Mid-Toronto Community Services Tel: (416)962-9449

20. **Marny Hamilton**, Canadian Red Cross Society Metro Toronto Region Tel: (416)480-0195 Ext.2226

21. **Christina Ciupka**, Don Mills Foundation for Senior Citizens, Toronto Tel: (416)510-1100

22. Lisa Manuel, Family Service Association of Toronto Tel: (416)977-0559, Ext. 333

23. **Odette Maharaj**, Scarborough Support Services for the Elderly Inc. Tel: (416)750-9885

District D

24. **Donna Pacey-Macdonald**, Haliburton County Home Support Services Tel: (705457-2941

25. **Valmay Barkey**, Community Care Victoria County, Lindsay Tel: (705)324-7323

District E

26. **Christine Cobus**, Renfrew & Area Seniors' Home Support, Renfrew Tel: (613)432-7691

27. **Pat Dandele**, Services to Assist Independent Living, Gananoque Tel: (613)382-1175 28. Alan Cavell, VON, Hastings, Trenton Tel: (613)392-4181

29. Shelley Vaillancourt, Alzheimer Society of Cornwall & District Tel: (613)932-4914

30. **Sylvia McCabe**, Carleton Place/Beckwith Community Support Tel: (613)253-0733

31. **Barbara Clarke**, Nepean Seniors' Home Support, Ottawa Tel: (613)829-1133

District F, G, H, I

32. **Tracy Browne**, Canadian Red Cross, Sudbury Branch Tel: (705)674-0737, ext. 25