



## **Home and Community Care:**

### *The Essential Piece to the Success of Ontario Health Teams*

Home and community care services are essential in providing a full continuum of care to clients and their caregivers through Ontario Health Teams (OHTs). This document is your gateway into understanding these services, their service providers, the recipients of these services and their health system impact. Often the sector is referred to in three related but distinct service groups: home care, community support services and independent living.

These services encompass health promotion, preventative services and re-enablement services. They not only meet a client's current needs, but, more importantly, they defend against decline and more serious needs in the future.

The home and community care sector has always supported the acute care needs of clients. However, over the past decade the proportion of high acuity clients being cared for in the community has markedly increased. Clients who would have been placed in long-term care a few years ago are now cared for at home or in assisted living services. Ventilator dependant clients can thrive living in their own homes or in the community with appropriate services.

Home and community care services are compassionate and cost-effective. They delay institutionalization. They supply alternative access points to health care practitioners and prevent emergency room visits that result in hallway medicine and inappropriate hospitalizations. The sector is an affordable alternative to hospital and long-term care that can free up much-needed hospital and long-term care capacity quickly, with lasting future impacts.

A Mississauga Halton LHIN study found that "almost half of the expenses for hospitalized seniors are for those whose stays could have been reduced with community supports." The same study found that low acuity clients currently living in long-term care could be kept at home with enhanced support for daily living at a cost of \$93 per day and/or enhanced adult day program services for \$126 per day.<sup>1</sup>

By properly leveraging the home and community care sector, the health system could realize future savings of up to \$150 million dollars a year by giving Ontarians the best care in the most appropriate setting.

A number of allied professional services (i.e. nursing, physiotherapy and occupational therapy services) are fully funded by the LHINs and delivered by service provider organizations through

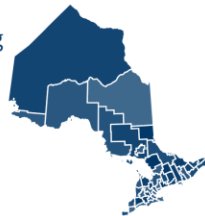
service purchase contracts. Community support services and independent living, depending on the service they offer, are either fully or partial funded by LHINs through Multi-Service Accountability Agreements.

On average community support service agencies receive approximately 70% of their budget from the LHIN. The remaining funds are made up of charitable donations and client fees. In 2018-2019, this represented \$508 million. In addition, there were over 3.1 million hours of volunteer services donated in the delivery of service for an approximate value of \$79.5 million.

# Home and Community Care Clients in Ontario

Over one million people are kept living healthy at home or in their communities with help from home care, community support services and independent living services.

These services benefit a full range of clients, including seniors, people of all ages with disabilities or chronic illness and their family caregivers.



## 1 in 4 clients

need **extensive help or are totally dependent** in managing their activities of daily living

**33%** of home care and community support service clients have **moderate to very high medical complexity**

Source: Ontario Home and Community Care Client Population Profile, 2018 InterRai Canada Prepared for OCSA

Between 2003 and 2018 the proportion of home and community support service clients who are

# 2x

**high risk or very high risk**

of an adverse event has almost doubled.



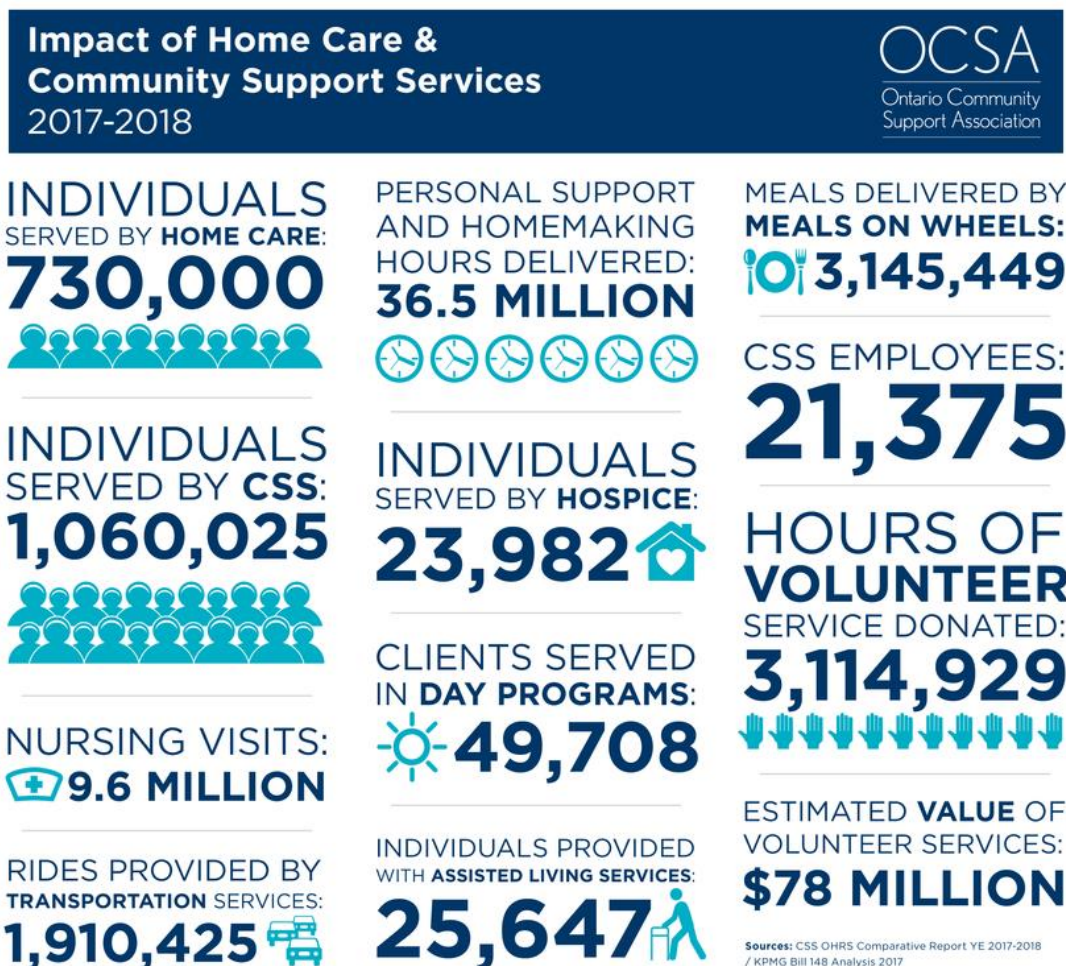
## An overview of home and community care services

Service Type	Funding Source	Delivered By	Access Pathway
<b>Home Care Services</b>			
Nursing Allied health services Personal support Homemaking services	Public funding with many clients supplementing their hours of care with private purchase of additional services volumes	Not-for-profit and for-profit service provider organizations (SPOs)	LHIN Home and Community Care Branch
<b>Independent Living Services</b>			
Attendant outreach Supportive housing Acquired brain injury services Vision impaired care services Deaf, deafened and hard of hearing care services	Public funding and charitable fundraising	Not-for-profit Health Service Providers (HSPs) with Multi-Service Accountability Agreements (M-SAAs)	Program dependent with combination of self-referral, primary care referral and central access
<b>Community Support Services</b>			
Meals and Housekeeping Meals on wheels Congregate dining Home help Home maintenance Rides and Transportation Assisted living services Day services Adult day services Friendly visiting / Security checks Seniors gentle exercise programs Alzheimer dementia services Alzheimer day programs Individual counselling Caregiver support Respite (in home/ overnight) Hospice palliative care	Public funding with client co-pay and charitable fundraising	Not-for-profit Health Service Providers (HSPs) with Multi-Service Accountability Agreements (M-SAAs)	Program dependent with combination of self-referral, primary care referral and LHIN Home and Community Care Branch

## Ontario Community Support Association

Ontario Community Support Association (OCSA) represents close to 240 not-for-profit organizations that provide home care and community support services that help seniors and people with disabilities live independently in their own homes and communities for as long as possible. These compassionate and cost-effective services improve quality of life and prevent unnecessary hospitalizations, emergency room visits and premature institutionalization. They are the key to a sustainable health care system for Ontario.

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<sup>i</sup> Mississauga Halton LHIN Community Capacity Plan, 2015