



# OCSA Members’ Update: September 2016

---

Hello and welcome to the latest issue of our Members’ Update newsletter, provided exclusively to OCSA’s member organizations. This issue will provide updates on our activities and sector developments since our last issue in June. To skip to a particular section, click on any line of the Table of Contents.

It was a busy summer for OCSA, as we developed our position paper on the *Patients First Act*, planned our 2016 OCSA and PSNO conferences, and advocated for the sector around a number of policy issues around personal support services. We are also focused on growth, adding new full members, corporate members, and two new members of the OCSA team. Details on this and more, below.

As always, please feel free to get in touch with us via e-mail, phone, or the social media network of your choice. Or, connect in person at the conference in just a couple of weeks!

## Contents

Government Relations.....	2
<i>Patients First Act</i> : OCSA Update and Next Steps .....	2
Updates from the <i>Roadmap’s</i> Advisory Table and Working Groups.....	5
OCSA Meets Premier’s Office Regarding PSW Wage Enhancement, Sector Issues.....	8
LHIN “Renewal” .....	8
Update: PSW Training Fund.....	8
Update: Harmonized Personal Support Bill Rate .....	9
PSS Regulation Change Roll-Out.....	10
South East LHIN Community Investment Funding 1% Increase.....	10

Federal Government Remains Interested in Home Care Funding.....	11
OCSA News .....	11
2016 OCSA Conference Program Complete, Record-Setting Registration.....	11
Efficient, Affordable PSW Training - 2016 PSNO Training Conference - October 20....	12
Share Your #CommunitySupportStories this Community Support Month!.....	13
Capacity Builders Is Your One-Stop-Shop for Training Eligible for the 2016-17 PSW Training Funds .....	15
Upcoming Training from Capacity Builders: interRAI Community Health Assessment Workshop .....	16
Patients First Act Webinar .....	16
Welcome to OCSA! .....	16
Welcome Kim, OCSA's New Business Development and Marketing Manager! .....	17
Welcome Patrick, OCSA's New Manager of Policy and Stakeholder Relations!.....	18
Two OCSA Members part of Rural Health Hub Pilot Project.....	18
OCSA to Host Strategic Forum on Meals on Wheels on October 17 at Hilton Toronto/Markham Suites Conference Centre .....	19
OCSA Hosts Online Discussion of Friendly Visiting Trends on September 20 <sup>th</sup> .....	20
Wage and Benefit Survey .....	21
Transitions.....	21

## Government Relations

### ***Patients First Act: OCSA Update and Next Steps***

It was a busy summer for the Ministry having sent out the *Patients First* proposal for discussion in late 2015, shortly followed up with the introduction and first reading of Bill 210 on June 2nd. The Bill is an amending Act impacting nine major pieces of long-standing legislation:

- Local Health System Integration Act (LHSIA)
- Health Protection and Promotion Act (HPPA)

- Commitment to the Future of Medicare Act (CFMA)
- Health Insurance Act, (HIA)
- Personal Health Information Protection Act, 2004 (PHIPA)
- Excellent Care for All Act, 2010 (ECFAA)
- Public Hospitals Act, (PHA)
- Ombudsman Act, (OA)
- Private Hospitals Act

There are a number of changes proposed through this Bill that will have a significant impact including:

- The dissolution of the CCACs, and a corresponding expansion of the mandate of the LHINs. All CCAC assets will transfer to the LHINs.
- A formal requirement for all LHINs to establish sub-LHINs, which will be the focal point for local planning and performance management.
- Expansion of the LHIN Boards from 9 to 12 members – invitations will be extended to CCAC board members.
- The creation of a shared services entity, a department within the LHINs that will house back office functionality.
- Significantly heightened oversight for LHINs, including investigating, supervising and directing and giving orders to health service providers, but only giving orders and investigation oversight for hospitals. The Minister will retain oversight for appointing a supervisor for hospitals.
- The Minister of Health given heightened oversight to investigate, direct and supervise LHINs and hospitals.
- Planning and management of primary care resources. (However not physician funding – remains with the Ministry)
- Planning and oversight of Public Health resources (but not funding).
- The creation of Integrated Clinical Care Council, established within HQO and reporting to the Minister, to develop clinical standards.
- Ombudsman positions – a new Patient Ombudsman for oversight of home and community care. The Provincial Ombudsman remains in place with oversight for now for LHINs and hospitals.
- A mandated patient and family advisory committee in every LHIN.
- Priority given to an engagement strategy for First Nations and Indigenous health care needs.

On September 8th, the Premier announced that she was proroguing the Legislature to have the Lieutenant Governor deliver a Throne Speech on September 12th. Deborah was invited to attend the Throne Speech on behalf of OCSA, where the government repeated its previous commitments to the home and community sector, but didn't introduce any new information.

In this case, prorogation was a routine action, used to give the government a chance to stop and refocus. Although the prorogation didn't have the impact of delaying the Legislature, the act of proroguing has now required that all bills on the docket be reintroduced following prorogation.

There was a lot of activity over the summer that likely led the Premier to this action, including the failed OMA negotiations as well as a number of other public interest issues such as soaring electricity costs. A number of groups have been lobbying over the summer to enact changes to Bill 210, so there may now be an opportunity for government to amend some of the language included in the bill to satisfy some stakeholders.

OCSA has been working over the summer to ready our position on Bill 210. In collaboration with Community Health Ontario, we sought a legal analysis of the Bill through the DDO, a law firm specializing in health care. We have also sent out a survey to members to seek their feedback on the areas of greatest concern. In addition, we hosted a webinar with over 80 members in attendance, led by lawyer Kathy O'Brien. Although there are many very positive processes that are being noted in the bill - some of the areas of concern surfacing are:

- Challenges around the increase scope of authority for the LHINs. The authority to appoint a supervisor for long term care and hospitals – both funded and planned through LHINs – is established under separate legislation that Bill 210 did not change. The power to appoint a supervisor with significant powers to operate a hospital rests with the Lieutenant Governor in Council (Cabinet) and not the LHINs. It is felt that it is inappropriate to delegate new these new powers to the LHINs through Bill 210 in the absence of clear direction to LHINs about how these authorities will be deployed.
- Concern about the lack of a formalized appeal process around decisions that may be imposed by LHINs. While it is good to see that there will be stronger authority to ensure the health system continues to comply with needed changes,

the lack of due processes as well as checks and balances on decisions needs to be addressed.

- Concerns about the change in mandate to allow for home care service delivery by LHINs. There is real conflict seen in the clear role that LHINs play in planning, integrating, funding and evaluating local health systems – the delivery aspect further complicates this mandate.
- The possibility of including for-profit providers in the delivery of community support services.

OCSA will delivered our position paper to the Ministry this week, and will keep the membership informed about any response we receive. We are also planning to mobilize around the re-introduction of the bill, and any standing committee opportunities that arise. We are approaching this as an opportunity to speak not only about the specifics of the legislation, but also to reiterate our key concerns around the lack of base funding increases for the sector, and the lack of emphasis on unique services for adults with disabilities such as supportive housing and independent living services.

Given the scope of the changes, we have also requested that the government conduct consultations throughout the province. We will provide the membership with key messages as needed.

### **Updates from the Roadmap's Advisory Table and Working Groups**

Work over the summer focused on two key pieces of work – Personal Support Rate Harmonization and Levels of Care. Ministry staff were mostly engaged in supporting the work around the introduction of Bill 210, so many of the committees, including the Advisory Table, did not have summer agendas.

#### *Personal Support Rate Harmonization – CCAC contracted services*

In early August, the Service Delivery and Coordination Working Group met with Ministry staff to discuss the roll-out and next steps surrounding the rate harmonization process which will be implemented as of April 1, 2017. To recap, the proposed wage enhancement was a \$30.22 base rate with a change in the PSW wage enhancement of \$4.52 to bring the new harmonized rate to \$34.74. The Ministry indicated that the original proposed \$4.91 for wage enhancement was changed based on preliminary data collected by the Ministry in their labour survey, which validated that the majority of employers had hit the \$19 wage cap and they therefore would not provide the intended

funding of \$4.91. (The \$4.91 = the \$4.50 promised wage increase and 16% statutory benefits.)

Despite strong lobbying by table members, the Ministry would not agree to flow the difference of \$0.39 to employers to address other compensation shortfalls presented such as required or negotiated wage benefits.

The implementation of the harmonized rate was outlined, which included the retention of Deloitte to meet with every impacted home care provider organization to review and validate the contract volume data, as well, to allow the providers to speak to the impact of the harmonized rate on their operations and revenue for 2017/18.

As we understand it, for now this rate is applicable only to contracted providers to the CCACs. There has not been any discussions surrounding new rates for CSS or Attendant Care providers, but we can anticipate that LHINs will be looking at this at some time in the future – particularly as they roll out Regulation 386/99.

The Ministry indicated that only a handful of providers (5-7) would be seriously impacted (those whose bill rates are coming down significantly) but we are aware that the \$19 cap is playing havoc with employers particularly in light of their collective agreements. The Ministry is interested in continuing the work of the table to look at this issue and others such as harmonized rates for other contracted services.

### *Levels of Care Update*

The Ministry completed work on a draft position paper which had been presented to the Advisory Table and was to have undergone a number of revisions before going out for consultation. The Ministry arranged for two workshops to be held in July and August, presenting what was essentially their initial thinking around the framework, put forward in the form of a discussion paper. The workshop included presentations by the Levels of Care Expert panel co-chairs Irfan Dhalla (HQO) and Dipti Purbhoo (TCCCAC) as well as the Ministry (Nancy Naylor) and HQO (Lee Fairclough).

The discussion paper and workshop content centered on five areas – the framework, the functional support tool, quality standards, the assessment policy and the development of new home care indicators.

### **Levels of Care Framework**

The framework included very few details, so it was difficult to provide meaningful feedback on it. The Expert Panel will be doing much of the legwork surrounding this and have met twice now over the summer. (Associations were not asked to sit on this, but providers were. Lori Holloway – formerly of OCSA and now the CEO of Bellwoods Centres for Community Living, an OCSA member – sits on this Panel). The Ministry also has a three year contract with the University of Waterloo - interRAI, who will provide much of the evidence for the framework.

### **Functional Support Tool**

This tool – to be used by care coordinators – will stratify clients care needs based on the RAI screener to determine high, moderate or low needs for personal support. This tool has been piloted at some CCACs and is to be tested with CSS as well.

### **Quality Standards**

HQO is leading work to implement clinical standards for specific conditions i.e. community-based wound care, dementia, and end of life. It is anticipated that these standards will be used primarily in home care to ensure consistency in treatment options.

### **Home and Community Care Assessment Policy**

This section speaks to the consistent use of the RAI tool for assessment of clients receiving home and community services. The details of this policy are embedded in the regulatory changes made to personal support under Regulation 386/99 passed in July of 2014.

### **Home Care Indicators**

This section reflects the directions that HQO will be taking in developing new home care indicators over the next year. Specifically, there is an interest in developing more “provider-level” indicators that can be publicly reported. OCSA has been invited to sit one of the new working groups for this process.

OCSA is putting the finishing touches on a more formal response to the Ministry’s work around Levels of Care, to be submitted shortly. Of critical importance will be the inclusion of community support services as part of the basket of services that will be

provided AND funded under the Levels work. The work of the Expert Panel – and presumably the Levels of Care design – should be wrapped up by end of 2017.

### **OCSA Meets Premier’s Office Regarding PSW Wage Enhancement, Sector Issues**

On September 9<sup>th</sup>, OCSA met with Adrienne Spafford, who has been the Senior Health Policy Advisor at the Premier’s office since June 2016. Adrienne requested the meeting in response to negative press coverage regarding changes some CCACs were making to PSW hours, which were seen to be negating the benefits of the PSW Wage Enhancement. We communicated that we sought feedback from our members and provided her with answers to some key questions and clarifications to regarding how PSW work is structured. In addition, we were able to introduce some of our sector’s key issues and concerns, including the lack of base funding increase to CSS agencies, the importance of Independent Living providers, and remaining implementation issues from the PSW Wage Enhancement and rate harmonization.

Adrienne was interested in how we were finding progress on the Roadmap and she indicated that she would like to see things proceed more quickly. Adrienne also asked for our opinions on Bill 210, and said that our member feedback paper would be valuable. There appears to be a continuing interest in consulting with us more frequently, and also in visiting some of our member agencies. We are optimistic about building this relationship in the future.

### **LHIN “Renewal”**

Given the significant changes anticipated with the passage of Bill 210, the Ministry has progressed with a process they are calling LHIN Renewal. This process is intended to take all the proposed changes to LHINs and operationalize them through a formal governance structure set up at the Ministry of Health. It will include a secretariat and fifteen work streams focusing on every new operational aspect of a LHIN, including Clinical Leadership, work force, performance & data, primary care, governance and corporate entities. This is to be staffed primarily by LHIN and CCAC staff (no known external participation) and may be modified if there are any changes in the *Patients First Act*. We will keep members updated as we get more information on this process.

### **Update: PSW Training Fund**

After a significant lull in activity around the PSW Training Fund, we contacted the Ministry and scheduled a meeting on August 31st. To our question regarding the timing

of this year's Fund, we were informed that the Ministry was proceeding to meet with their lead agencies (bankers) on September 9th.

We were also informed that they would be returning to using these bankers approve applications, rather than Ministry staff. This is good news, given the fiasco of last year; we are hopeful that these bankers are more familiar with our sector and PSW training needs. The disappointing news however was that most of the criteria used for approval last year will remain. The exception is the guideline for the length of eligible training, which was shortened to 3 hours from last year's requirement of full-day training. This is good news as we lobbied hard for this last year and were successful in getting this change.

Unfortunately, PSW Training Fund deadlines appear to have been set by the various bankers/lead agencies, and therefore are not consistent across regions. Some deadlines were as soon as last week, while others are as late as October. Members are advised to check with their respective lead agencies if they have not received information or are unclear about their deadlines. Questions and concerns can also be addressed to [PSWTraining@Ontario.ca](mailto:PSWTraining@Ontario.ca).

OCSA is aware of member concerns regarding timelines and eligibility criteria, and will continue to advocate on this issue. In addition, we will be pushing to ensure that approval and distribution of funds is more timely than last year.

### **Update: Harmonized Personal Support Bill Rate**

In early August, the Service Delivery and Coordination Working Group met with Ministry staff to discuss the roll-out and next steps surrounding the rate harmonization process which will be implemented as of April 1, 2017 for CCAC contracted providers. To recap, the proposed wage enhancement was a \$30.22 base rate with a change in the PSW wage enhancement of \$4.52 to bring the new harmonized rate to \$34.74. The Ministry indicated that the original proposed \$4.91 for wage enhancement was changed based on preliminary data collected by the Ministry in their labour survey, which validated that the majority of employers had hit the \$19 wage cap and they therefore would not provide the intended funding of \$4.91. (The \$4.91 = the \$4.50 promised wage increase and 16% statutory benefits.)

Despite strong lobbying by table members, the Ministry would not agree to flow the difference of \$0.39 to employers to address other compensation shortfalls presented such as required or negotiated wage benefits.

The implementation process for the new rate is to be facilitated by Deloitte. Deloitte will be meeting with every impacted home care provider organization to review and validate the contract volume data, as well, to allow the providers to relay the impact of the harmonized rate on their operations and revenue for 2017/18.

The Ministry indicated that only a handful of providers (5-7) would be seriously impacted (those whose bill rates are coming down significantly) but we are aware that the \$19 cap is playing havoc with employers particularly in light of their collective agreements. The Ministry is interested in continuing the work of the table to look at this issue and others such as harmonized rates for other contracted services.

As we understand it, for now this rate is applicable only to providers under agreement with the CCACs. There have not been any discussions to dates surrounding new rates for CSS or Attendant Care providers but given the proposed changes under Bill 210, we can anticipate that LHINs will be looking at this at some time in the future.

### **PSS Regulation Change Roll-Out**

There have not been any updates provided by the LHIN Collaborative on the progress of the roll out of the regulation change across the remaining LHINs. There was to have been a meeting held at the beginning of the summer however this was cancelled and no further dates communicated. It would be very helpful to OCSA to hear from members surrounding the roll out in their LHINs so we can help facilitate further lobby efforts surrounding this.

### **South East LHIN Community Investment Funding 1% Increase**

OCSA understands that the SELHIN has implemented a 1% base funding increase for all their community support service providers for fiscal 2016/17. In the briefing to the Board, there was acknowledgement by the LHIN that no funding increases had been provided to CSS agencies despite that fact that their volumes were growing. The LHIN also acknowledged that the CSS agencies in this region had implemented a large number of efficiencies but the pressures of rising costs and service volumes could not be sustained in the absence of base funding.

While in previous years we have seen base funding increases being announced by the province, it appears that the decision appears to be driven more by the LHINs. We will be lobbying all remaining LHINs with the same rationale used in the south east as the issues are similar in all regions.

### **Federal Government Remains Interested in Home Care Funding**

As negotiations continue between the federal government and the provinces regarding a new health accord, the subject of targeted funding has been [controversial](#). Health Minister Jane Philpott has repeatedly shown strong interest in funding earmarked for home care; while some of the provinces are somewhat open to this possibility, others insist on funding autonomy.

Other possibilities being discussed include funding tied to provincial demographics, intended to assist those with aging populations, and increased funds for palliative care. The current agreement, which gives provinces a six per cent increase in funding annually, expires next year, and annual increases to health-care funding will thereafter be tied to GDP growth. OCSA is monitoring this issue.

## **OCSA News**

### **2016 OCSA Conference Program Complete, Record-Setting Registration**

The program for our 2016 OCSA Conference is now complete – and if registration numbers are any indicator, OCSA members and non-members alike are excited about our lineup of speakers and workshop presenters. We're just a handful more delegates away from our largest conference ever – thank you!

This year's roster of [keynote speakers](#) is tightly-focused on some of our sector's most pressing priorities. On Tuesday, Dr. Mike Evans will share his approach healthcare education and changing landscape in healthcare. He will be followed by Dr. John Hirdes, leading one of the first public overviews of the development of the Levels of Care framework, and revealing the first batch of aggregate interRAI CHA data on the role of community support services in Ontario's health care system. On Wednesday, we begin the day with Dr. Walter Wodchis, providing useful lessons on the integration of health and social care for those with complex health needs, in Ontario and around the world. Lastly, we will close the conference with an illuminating and interactive discussion of Ontario's *Patients First* transformation journey, led by Santis Health.

On the [workshop](#) front, watch for case studies, best practices, and interactive discussions on cross-sector collaboration, integration, health equity, client-centred care and caregiver support. Just a few highlights: Ted Ball's dynamic exploration of whether subLHINs really put patients first, or just add another layer of bureaucracy, a panel discussion from early adopter agencies of the new PSS regulatory amendments, and results from the pilots of two emerging tools out of interRAI.

Of course, we'll have a little fun, too - join us for the Tuesday evening banquet, featuring the winners of our 2016 Commitment to Care Awards. Then stick around for popcorn and a screening of [Hip-Hoperation](#), a heartwarming documentary about New Zealand's beloved senior citizens dance crew.

Please see the [conference website](#) for full details and registration information.

### *OCSA's 24<sup>th</sup> Annual General Meeting*

We are pleased to announce that our 24th Annual General Meeting will be held in conjunction with the conference, the evening of Monday, October 17th.

The AGM will feature a short talk by sought-after speaker and thought-leader Claude Legrand entitled *Prepare, Adapt and Thrive Through Innovation*. In order to adapt to and keep pace with change, we know that we must think faster and more effectively. But how does this fit into our day-to-day work and our organizations? Claude will share his insight on our conference theme and practical advice on how thinking innovatively on the job every day can lead to better results. Claude comes highly-recommended by members who have seen him speak previously. All are welcome!

The AGM will be followed by a reception, and time to network with your fellow OCSA members.

### **Efficient, Affordable PSW Training - 2016 PSNO Training Conference - October 20**

Our conference is the most efficient and affordable way for PSWs to maintain and upgrade their skills. In response to feedback we've received from employers, and based on eligibility criteria from last year's PSW Training Fund, our 10<sup>th</sup> annual PSW and PSW Supervisor Training Conference has a new format that will allow PSWs to supercharge their skills in some of the most in-demand areas of care. It is our hope that these longer, more focused sessions will result in better training outcomes for PSWs and their

employers, and align our conference with the priorities of the Ministry of Health's PSW workforce strategies.

Delegates will have the opportunity to attend two sessions that are each three hours in length, allowing them to receive more in-depth training that will significantly contribute to their professional development, and make a huge difference to clients.

These areas of focus are:

- Dementia Care
- Falls Management
- Mental Health
- Palliative Care
- Person-Centered Care

Full session descriptions and learning objectives for each are now available on the [conference website](#).

Delegates may select two streams at three hours each, or focus on one subject for all six hours to truly power-up their training. Morning sessions will allow PSWs to explore topics broadly and from multiple perspectives, examining new trends and best practices. During the afternoon sessions, we will take a deeper dive into specialized information and training that teaches about a specific technique or issue within that area in more detail.

Though decisions are ultimately out of our hands, we expect the PSNO Training Conference is eligible for the 2016-17 PSW Training Funds based on the 3-hour length of training sessions, and conference subject matter. Applications should emphasize the subject matter and learning objectives of each session, and how it meets the eligibility criteria. All the information you need to submit your application for the PSW training fund is available on the website.

We are excited about this new format, which we believe will deliver even more bang for your training buck. To register your PSW delegates, please [click here](#).

### **Share Your #CommunitySupportStories this Community Support Month!**

It's that time of year again – October is Community Support Month, and just around the corner. OCSA encourages you to take advantage of this opportunity for community engagement! OCSA has created a document of promotion and participation tips, which

includes some key messages members can use. We have also developed media release template, which you can use when approaching your local newspapers, radio stations and other media. To customize it, simply fill in the sections indicated by red text with examples from your own community and organizations.

This year, we are placing particular emphasis on stories which demonstrate the impact of CSS – on our clients, their families, our volunteers and our communities. These stories can be told through words, photos, images, clients or volunteer testimonials, or even statistics which demonstrate they impact CSS has in your community. As you plan events or approach local media, focus on telling the story of your organization, your clients, and the importance of community support services to Ontario’s health care system.

If you are posting on social media, remember to use the hashtag **#CommunitySupportStories** so that we can see and share your posts. And follow the hashtag to see what your fellow CSS providers from across the province are posting! We have created a few graphics you can use in your posts – but feel free to make your own, too.

The above Community Support Month resources are available on our Members Only website or by clicking here: <http://bit.ly/CSSMonth2016>.

Here are this year’s suggested celebration dates:

<b>October 5</b>	Congregate Dining Day
<b>October 12</b>	Client Intervention and Assistance (CIA) Day
<b>October 2 - 8</b>	Meals on Wheels Week
<b>October 9 - 15</b>	Community Care Worker Week
<b>October 3</b>	Respite Services Day
<b>October 10</b>	Transportation Services Day
<b>October 16 - 22</b>	Adult Day Program Week
<b>October 7</b>	Supportive Housing Day
<b>October 14</b>	Friendly Visiting/Telephone Reassurance Day
<b>October 21</b>	Home Help/Maintenance Services Day
<b>October 26</b>	Attendant Services Day
<b>October 28</b>	Hospice Services Day

Please forward us any media coverage, or let us know about activities in your community, so that we can spread the word! If you have any questions or need any additional support, please contact [Breanne.Armstrong@ocsa.on.ca](mailto:Breanne.Armstrong@ocsa.on.ca).

## **Capacity Builders Is Your One-Stop-Shop for Training Eligible for the 2016-17 PSW Training Funds**

PSW Training Fund applications are now being accepted by lead agencies (bankers) and deadlines are fast approaching! Be sure to confirm your deadline with the banker in your region, and submit your application with quotes for training as soon possible.

That's where Capacity Builders comes in! Capacity Builders is OCSA's training division specializing in PSW training. We've been helping NFPs deliver quality, value-added training in the Home & Community Support Services sector since 2001, and OCSA Members are our priority.

All of the PSW Enhancement workshops listed below align with criteria described in the MOH Training Fund information package, and can be delivered in 3 hours (to cover the basics) or 6 hours (allowing for a deeper dive and increased participant interaction). You can copy and paste the "learning objectives" on each link right into your application.

Simply click on the links below and call us for a quote! After submitting your quote and receiving approval, call us to book your training date and we will coordinate a consultation with the trainer so your session can be customized to meet your organization's needs. Best of all - we deliver onsite training anywhere in Ontario!

Looking at several topics? Need help to put together a more comprehensive training plan? Give us a call. We can help!

- [\*\*Palliative and End of Life Care\*\*](#)
- [\*\*A Functional Approach to Supporting Clients with Selected Neurological Conditions\*\*](#)
- [\*\*Supporting Clients with Amyotrophic Lateral Sclerosis \(ALS\)\*\*](#)
- [\*\*Supporting Clients with Diabetes\*\*](#)
- [\*\*Supporting Clients with Parkinson Disease\*\*](#)
- [\*\*Understanding Depression and Suicide\*\*](#)
- [\*\*Supporting Clients with Schizophrenia: Practical Interventions for the Front-Line\*\*](#)
- [\*\*Supporting Clients with Bipolar Affective Disorder\*\*](#)
- [\*\*Problem Solving Responsive Behaviour in Your Client's Home\*\*](#)
- [\*\*Introduction to Mental Illness for Direct-Care Staff: From Myth to Understanding\*\*](#)
- [\*\*Depression in the Elderly: Not a Normal Part of Aging\*\*](#)
- [\*\*Dementia Care: Making it Personal for Better Client Outcomes\*\*](#)
- [\*\*Mobility Skills Refresher \(includes patient transfers\)\*\*](#)

- [Footcare](#)
- [Responding to Elder Abuse](#)
- [Crisis Aversion & Response Education \(CARE\) Certificate Training for Front-line Staff \(de-escalation\)](#)

Please contact Portia at [portia@capacitybuilders.ca](mailto:portia@capacitybuilders.ca) or call 1-800-267-6272 or 416-256-3010. ext 229 for a quote or help with your application.

### **Upcoming Training from Capacity Builders: interRAI Community Health Assessment Workshop**

November 22, 23 & 24, 2016 in Toronto

This comprehensive three-day workshop will equip new assessors with the skills and confidence they need to conduct quality interRAI CHA assessments, and use the information to inform and evaluate personalized care plans. In a supportive and engaging environment, participants will learn the general principles of conducting a competent interRAI assessment and learn how to accurately document client information through the interRAI CHA system.

For full workshop information and registration link, please [click here](#). Special reduced pricing for OCSA Members!

### **Patients First Act Webinar**

On September 15th, Kathy O'Brien from DDO Health Law facilitated a webinar for OCSA Members on the Patients First legislation. Kathy reviewed the existing scope of LHIN powers, and discussed the broader powers the LHINs will have over health service providers. The feedback from participants was excellent, and OCSA is already planning additional webinars to support Members in our changing health landscape.

### **Welcome to OCSA!**

#### *New Full OCSA Members*

[Alzheimer Society of Durham Region](#) is a non-profit, charitable organization founded in 1979, governed by a volunteer Board of Directors of community professionals and caregivers, funded by the [Central East LHIN](#) as well as through fundraising activities, donations and grants. One of 38 chapters of the Alzheimer Society of Ontario (ASO), ASDR works with local and regional agencies to meet the needs of people with dementia as well as provide support and education programs to people with

Alzheimer's disease and related dementia, and their family and professional care partners. Denyse Newton is Executive Director.

[Dundas County Hospice](#) offers a variety of services to anyone suffering from a terminal or life-threatening illness. They support clients and their caregivers through all stages of their illness including bereavement support after the death of the client. Their services are supplementary to those that already exist in Dundas County in the Champlain LHIN. Lisa Casselman is Executive Director.

### *New Corporate Members*

[AlayaCare](#) is a software company that offers a comprehensive home and community care solution that supports Community Support Services and CCAC Nursing, Therapy and PSW services throughout Ontario. AlayaCare's vision is to reduce payer burden, enhance providers' ability to deliver better care and most importantly deliver better patient outcomes. For more information, contact [Brady Murphy](#). Visit AlayaCare at the OCSA Conference at Booth #17.

[Bedford Medical Alert](#) is the leading Canadian Medical Alert response service provider. Users maintain freedom and independence with Bedford's 24/7 personal emergency response service at home and while they are away from your home. Call them at 416.921.9977 or 1.888.755.3055 to learn more. Visit Bedford Medical Alert at the OCSA Conference Tradeshow at Booth #18.

[CARF Canada](#) is an independent, nonprofit accreditor of human service providers and networks. A provider earns accreditation by demonstrating conformance to CARF's internationally recognized standards in areas that span the continuum of life. More than 8.7 million persons of all ages are served annually in CARF-accredited programs. Visit CARF Canada at the OCSA Conference Tradeshow at Booth #22.

[MoveMobility](#) offers a specialized and customized solution for wheelchair van and other vehicle modifications for those who have a unique mobility need. MoveMobility provides drivers with physical challenges that impede their ability to drive or even ride in a normal vehicle with the opportunity to regain freedom through a custom wheelchair accessible vehicle.

### **Welcome Kim, OCSA's New Business Development and Marketing Manager!**

Kim Prince joined OCSA on July 18th as Business Development & Marketing Manager to grow revenue through increased OCSA membership, corporate support and expansion

of Capacity Builders training and other funding or entrepreneurial activities. Kim has already had an impact by jumping right in and taking over conference tradeshow sales resulting in return and new business. Kim can be contacted at [kim.prince@ocsa.on.ca](mailto:kim.prince@ocsa.on.ca) or extension 227.

Kim brings a wealth of experience in business development from a variety of backgrounds including retirement living and long-term care, e-health consulting, associations, start-ups and non-profits. Kim keeps busy with her two teenage children and their cat Theo. In her spare time, you will find Kim dancing at a Nia class, doing yoga, hiking or escaping to a meditation retreat in the country.

### **Welcome Patrick, OCSA's New Manager of Policy and Stakeholder Relations!**

As most of you are aware, Amanda McGoey left OCSA this summer to start a new role at Baycrest Hospital. We are pleased to announce that we have completed our search for a new Manager of Policy and Stakeholder Relations. Patrick Boily will be joining us in this role commencing October 3.

Patrick is currently the French Language Services Coordinator and Aboriginal Health Consultant for the Central West LHIN. In this role, Patrick was responsible for leading community consultations and facilitating sector-specific strategic planning for the Francophone and Aboriginal communities in the region. This role has also led him to be engaged with a broad array of health service agencies, including home and community service providers. Patrick has spent some time in his career on the political side, having worked for the Legislative Assembly of Manitoba for a Member in the Constituency Assistant role.

Patrick has a BA from McGill and a Master's in Public and International Affairs from York University. Patrick has also completed the Rotman's Advanced Health Leaders Program and the HealthCareCAN's Health Service Management Certificate.

Members will have an opportunity to meet with Patrick the conference and put a face to the name.

### **Two OCSA Members part of Rural Health Hub Pilot Project**

On August 7, MOHLTC announced a \$2.5 million dollar investment in rural health hubs to enhance service integration at five health care locations to help them become fully integrated health hubs that better meet the unique needs of rural communities, and that provide high-quality care for patients. The goal is to connect modern services and coordinate transitions between caregivers and doctors -- and make it easier for patients

and their families to understand and access their health care choices. Two OCSA members, [North Shore Health Centre](#) (formerly Blind River District Health Centre) and [Haliburton Highlands Health Services](#) are two of the five health care centres involved in the pilot. [Click here](#) to read more.

### **OCSA to Host Strategic Forum on Meals on Wheels on October 17 at Hilton Toronto/Markham Suites Conference Centre**

Meals on Wheels programs across the province face a number of challenges in maintaining service delivery across Ontario. We believe that by building on our Provincial networking we are better positioned to meet these challenges.

A stronger Provincial network will help:

- Reduce the challenges of having many small service providers. By working together we can develop similar processes, systems and implement new technologies that will help reduce administration costs.
- Advocate for more consistent and appropriate funding levels for Meals on Wheels Programs directly to the LHINs.
- Address cost pressures due to food sourcing issues such as the increasing costs from Apetito (the main frozen food provider) by leveraging economies of scale.
- Address the issue of increasing competition from private providers (including Apetito's Heart to Home).
- Increase MOW program usage in areas where service numbers are low.
- Provide additional resources that would enhance marketing and promote the Meals on Wheels Brand.

Geoffrey Reekie ([greekie@multiservicecentre.com](mailto:greekie@multiservicecentre.com)), ED, [Tillsonburg Multiservice Centre](#), and Sarah Campbell ([scampbell@meals-on-wheels.ca](mailto:scampbell@meals-on-wheels.ca)), ED, [Meals on Wheels London](#), have been studying these concerns and have developed a series of strategic actions that they believe will sustain and grow our programs behind the collective action of OCSA members.

**OCSA will host a MoW Strategic Forum on Monday, October 17, 1-4pm at the [Hilton Toronto/ Markham Suites Conference Centre, 8500 Warden Avenue, Markham](#).** The purpose of the forum is to have an open and frank discussion regarding the challenges detailed above and to give Geoffrey and Sarah an opportunity to share their ideas for stabilizing and increasing the collective impact of MoW programs.

Attendance is free but registration is required. Teleconference access will be available. To register, click [here](#).

### **OCSA Hosts Online Discussion of Friendly Visiting Trends on September 20<sup>th</sup>**

Friendly visiting services provided by volunteers are an unheralded CSS program that addresses social isolation for housebound seniors and individuals with physical disabilities. Jan Watson from the Friendly Visiting program for [The Mills](#) in Almonte (Champlain LHIN) began a conversation on the OCSA listserv in August to determine if other service providers were experiencing a decline in the number of clients accessing FV like they were.

As a result of significant interest, OCSA hosted an online discussion on September 20 with 37 participants representing urban and rural catchment areas from 10 LHINs. A poll of attendees indicated that approximately 40% were experiencing a decline while other programs were stable and even growing with waitlist for service. More trends mentioned during the discussion:

- Some clients being referred to FV by CCAC are more complex and may be inappropriate for friendly visiting and need respite.
- Clients are not always interested in FV – trust issues, don't want people in their homes that they don't know.
- Volunteer recruitment and retention are a challenge for these programs. Police checks and vulnerable persons screening can take weeks, months and volunteer may have found another position. Without an adequate volunteer component, it is a challenge to meet targets.
- Clients may be getting their "visits" or social interaction other ways. Clients are getting more sophisticated with technology – Facebook, facetime, etc. Clients are able to have social connection when they use other services such as transportation.

The CBC Radio One program *The Current* had a recent program on how loneliness now is a public health crisis comparable to obesity and smoking. To hear the program, click [here](#). One model being used in the UK is the [Silver Line](#), a free confidential helpline providing information, friendship and advice to older people, open 24 hours a day, every day of the year.

## **Wage and Benefit Survey**

OCSA is in the final stages of selecting a vendor for the wage and benefit survey. Consultations with members will begin over survey positions and definition will begin in early October. Full details to come via OCSA ED listserv.

## **Transitions**

Carole Beauvais has succeeded Beverley John as Chief Executive Officer of [Nucleus Independent Living](#) in Oakville and Toronto.

Dave Coglan is the new Executive Director for [Dorothy Ley Hospice](#) in Mississauga.

Tracy Koskamp-Bergeron is the new Executive Director for [Alzheimer Society of Dufferin Region](#).

Nazira Jaffer is the new Executive Director for [Bethel Hospice](#) in Inglewood in the Central West LHIN.

Debbie Watt is the new Executive Director for [Beth Donovan Hospice](#) in Kemptonville in the Champlain LHIN.

Joanne Wilson, CEO for [PACE Independent Living](#) and former OCSA Board Chair has announced that she will retire in December 2016.