An introduction to the

Community Care Access Centre of London and Middlesex

Community Care Access Centre
Centre d'accès aux soins communautaires

London Middlesex

Introduction

- Established 1996 by the Province of Ontario
- 43 Community Care Access Centres (CCACs) across Ontario
- Controlled by local Boards elected by the CCAC's membership
- Responsible for funding home care, placement, information and referrals

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Topics for Discussion

- The single access point for service
- Information about CCAC services
- Who runs the CCAC?
- How do I get services?
- The role of CCACs
- Did you know?
- Contact us

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CLIENT-DRIVEN

- Client is empowered to assume leadership role in determining own care to the extent he/she feels appropriately involved.
- Appropriate involvement depends on the client's
  - knowledge
  - status
  - authority
  - self-efficacy

Focus - Health and resources for every day living of client in larger life context.

Process - Mutually create potential for health.

Outcome - on-going process

Model - Professional as enabling/empowering change agent.

CLIENT-DRIVEN:

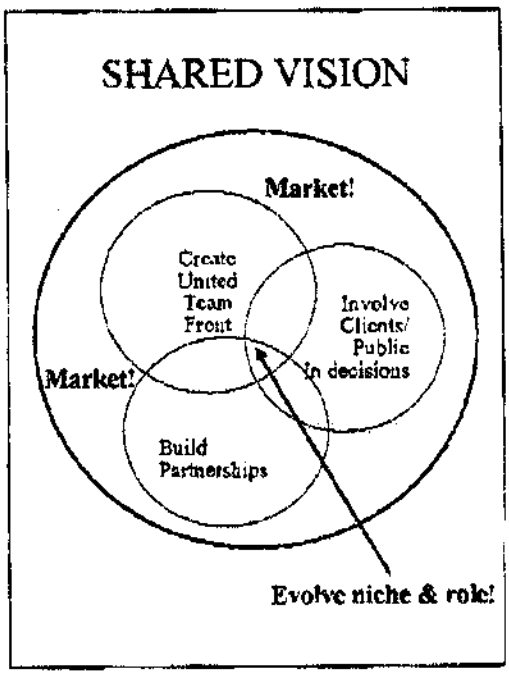
- CLIENT CENTRED
- CLIENT EMPOWERMENT

CLIENT EMPOWERMENT:

equitable balance of

- knowledge
- status
- authority

in the care relationship



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One access point for care

- One phone number for all services
- Information about community services
- Health care services in the community
- Placement to long-term care
- Referral to other agencies

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What services do CCACs provide?

- Professional health services
  - care coordination, nursing, nutritional counseling, occupational therapy, physiotherapy, speech therapy, and social work
- Support services
  - personal care, respite care, medical supplies and equipment, drugs
- Special needs services
  - palliative care, children services, and adult day centers, School health support services
- Placement Coordination Services
  - the only access point to long-term care facilities

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Who governs CCACs?

- Volunteer Board of Directors elected by membership
- Each CCAC has its own membership — **you can join!**
- The Board governs each CCAC according to provincial guidelines
- Each CCAC is 100 % funded by the Ministry of Health and Long-Term Care, approximately $40 Million

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The Role of CCACs

- Manage services, equipment and supplies to those requiring help in the community
- Allow people to return home sooner after surgery or a hospital stay
- Coordinate short and long-term placement
- Provide information services

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Provision of Services

- CCAC acts as service "broker"
- "requests for proposals" managed through open, transparent process to provide the best quality services at the best price

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How do I get services?

- You can self-refer by calling the CCAC **London 473-2222 or Strathroy 245-3233**
- You can be referred by family or friends
- A case manager will assist you to get the services you need
- Case managers are available at all seven hospital sites

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Who qualifies?

- Ontario residents who possess a valid Ontario Health Card
- People who can receive care safely at home
- People who need long-term care
- People who have a school-age child with special needs

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Did you know?

- Each week thousands of Ontario residents receive home-care, personal care and information referrals from local CCACs
- At any time the London and Middlesex CCAC has over 7,000 active clients
- We coordinate over one million visits a year

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CCAC Vision

- To build a community of informed citizens connected to resources that promote personal health

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Thank you

- Remember: If you, a family member or someone you know needs help, your local CCAC is here to provide assistance
- Eligible services are funded by the Ministry of Health and Long-Term Care
- A case manager will explain what services are available

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PATIENTS, DOCTORS AND A HEALTH CARE TEAM WORKING TOGETHER

Integrating Physician Services in the Home (IPSITH) is a pilot project providing treatment in the home for patients with acute illness. For a short period, upto two weeks, patients who otherwise would have been admitted or been required to remain in hospital will receive care from a community team consisting of home care staff, case managers, a nurse practitoner, and the patient's family physician.

This Ministry of Health project is a collaboration between the Community Care Access Centre of London and Middlesex and family physicians in London and Middlesex. As well, a research team funded by the Canadian Health Services Research Foundation will evaluate the project.

Over a period of 18-24 months, approximately 30 doctors and 100 patients will participate in the project.

PATIENT'S PROFIT

- **IMPROVED** technologies for in-home care allow you to stay at home when ill
- **COMFORT** of your own home may enhance a quicker recovery
- **AVOID** the risk of hospital acquired infections
- **CONTINUE** to receive care by your own family physician and multidisciplinary team

WE ALL BENEFIT

The research will evaluate home care services from the viewpoint of the patient, family caregivers, health professionals and other service providers. Patients who participate can be assured that they will continue to receive the best possible medical care while taking part.

Selected individuals and their caregivers will be interviewed and asked to complete a questionnaire. They will be asked about their satisfaction level with various aspects of the care and treatment, including their experience with community care providers and physicians involved. It will provide an opportunity to talk about benefits and to identify problems that were encountered.

The results of this study will provide valuable insights into the best ways of designing tomorrow's home and hospital care system. A report on the results will be shared with local, regional, and national health care policy makers (and with participating patients and their families).