

strengthening ontario's home healthcare



Complex care, Simple comforts

VHA Home HealthCare
2001 Annual Report

moving forward together

board chair and
president/ceo report



our milestones

- The confirmation of significant new contracts with the completion of the first complete round of Toronto Area Community Care Access Centres (CCACs) managed competition processes. We also confirmed a *new* CCAC contract for PSW/homemaking with the Durham Access to Care. We want to thank our local CCACs for the confidence they have demonstrated in our work. Congratulations to the many VHA staff who participated in VHA's RFP team lead by Carol Annett.
 - a) With these successes, we believe that VHA's position as a preeminent local provider of Personal Support Work (PSW)/homemaking has been re-confirmed.
 - b) This victory is shared by the following eight local not-for-profit organizations who participate in this CCAC work as subcontractors:
 - Carefirst Seniors and Community Services Associaton
 - Don Mills Foundation for Seniors/Taylor Place
 - North York Seniors' Centre
 - Scarborough Support Services
 - Senior Peoples' Resources in North Toronto (SPRINT)
 - St. Christopher House
 - St. Clair West Services to Seniors
 - West Toronto Support Services
- Despite the severe limitations placed on us by the nursing shortage, VHA's Health and Private Services grew 12% in 2001 through aggressive marketing and recruitment.
- Following the approval of our new business plan in June, VHA restructured our services into two divisions:
 - Contracted and Charitable Services: encompassing all government contracts, United Way and other charitable services and,
 - Health and Private Services: includes health services, private sales of PSW/homemaking, nursing and home cleaning as well as VHA after hours services.

Alan Ely,
Chair, Board of Directors
VHA Home HealthCare

David Wright,
President and C.E.O.
VHA Home HealthCare

- VHA's Planning and Development Department, which oversees business development as well as quality improvement, was strengthened with the addition of two excellent staff focused on RFP's and other program proposals and quality improvement initiatives
- Judy Harris, our long serving Director of Finance, retired in 2001. Janet Crofton, who joined VHA early in the year, had a period of several months' overlap with Judy and has now successfully completed her first full business cycle.
- A long-term agreement has been concluded with our field staff (SEIU, Local 204) that, we are pleased to say, included significant wage increases as well as a major breakthrough in the benefits area. As the year ended, we were working towards a similar agreement with our internal staff (represented by OPSEU, local 548)
- In 2000, VHA purchased an apartment house on Sherbourne Street, which will provide longer term transitional housing to individuals in danger of becoming chronically homeless. This major new homeless project for VHA is mounted in partnership with COTA (Comprehensive Rehabilitation and Mental Health Services), who will provide both individual case

management and site support services to the facility's up to 30 tenants, with funding from the Ministry of Health and Long Term Care - Mental Health Homelessness Initiative, renovation support by the Supporting Communities Partnership Initiative, and the Residential Rehabilitation Assistance Program. The building was subject to extensive renovation throughout the entire year and will open in the Spring of 2002.

- VHA's By-laws were amended to extend voting privileges to general members.
- In the midst of all this good news, VHA and all our colleagues in the field were forced to endure mammoth volume cutbacks that were reluctantly passed along to us by our local Community Care Access Centres (CCACs). The cutbacks resulted from decisions made by the Ontario Government in May, 2001 that severely restricted their CCAC budgets. These cutbacks led to substantial, and in some cases drastic, reductions to the services we could provide to our clients especially the frail elderly. The cutbacks also severely impacted on homemaker wage packets and increased VHA's deficit.
- As the year closed, we were confident that, in time, we could deal with the financial impact of these changes. But it is evident that the significantly reduced service levels to clients will represent the sad new benchmark for in-home services for the foreseeable future in Ontario.

- Time will tell what impact these changes will have on the other parts of the healthcare system but it is expected to imagine that new, and largely unnecessary, demands will surface for emergency rooms as well as long term care and acute care beds.

2001 board of directors

OFFICERS OF THE BOARD

Alan Ely, Chair
 Vik Sharma, Vice Chair
 Kenneth Chan, Treasurer
 Catherine Kohm, Secretary

MEMBERS OF THE BOARD

David Duff
 Joyce Gordon
 Adrienne Goulet
 Dennis Long
 Ian McHaffie
 Joy Nedricksmith
 Estrella Santos
 Chuck van Winsen

COMMITTEE MEMBERS

Wayne Laughlin
 Cynthia Majewski
 Catherine Maunsell



“... all of our services and activities are responsive to the needs of each individual client, respectful of the diverse communities served and delivered with competence and sensitivity”.

success thru teamwork

departmental summaries



program highlights

client services

- In 2001, Client Services provided over 815,000 hours of PSW/homemaking to more than 7,000 clients, touching the lives of approximately 10,800 people in the Greater Toronto Area.
- With the acquisition of new PSW/homemaking contracts and the implementation of resulting services with the North York CCAC, Toronto CCAC and Scarborough CCAC and service expansion into Durham Region with Durham Access to Care, it was necessary to restructure the service coordination and field supervision roles and add support to these roles within the Client Services Department.
- Pursuant to the recommendations of our new business plan, further reorganization was required to separate Client Services Department from private pay services as the department evolved into the Contracted and Charitable Services Department, providing care to government funded clients, specialized programs, and clients receiving subsidized care.
- Field supervisors achieve the final step of remote electronic access to the office reducing the time they have to spend in the office and increasing their time in the field and therefore, ability to provide efficient and quality service to staff and clients.
- The focus on quality improvement resulted in the implementation of planned department changes, identified through the process of accreditation the previous year.
- Due to the unfaltering commitment and professionalism of field staff, office and support staff in 2001 we have maintained our ability to sustain an important VHA value such that, "... all of our services and activities are responsive to the needs of each individual client, respectful of the diverse communities served and delivered with competence and sensitivity".



efforts lead to results

private and health services
business development
human resources

private and health services

- Nursing volumes continued to grow – a total of 23,392 hours, which includes our CCAC and private nursing hours. The hours were increased despite a severe nursing shortage through very aggressive recruitment plans.
- Sustained recruitment efforts have resulted in a growing staff complement numbering over 50 at year end
- Health Services has continued to expand to include nursing care in clinics, nursing homes, and private home settings and our referrals come from a variety of sources including CCACs, home support agencies, hospitals and individual clients.
- Health and Private Services formed as a new department in November 2001 pulling all privately funded services into one department – nursing, homemaking and home cleaning
- We continue to expand in a number of areas including our nursing expertise in child and family with about 30-40 % of our cases now pediatrics

business development

- A host of media and government relations related activities as well as communications and marketing initiatives were implemented to raise awareness of VHA and its services, as well as the critical issues in home health care.



- VHA's Web site was redesigned to make it user-friendlier and the first edition of a new biannual newsletter "Community Care Connection" was designed and published.
- Significant strides were made in further developing and coordinating quality improvement activities throughout the organization. From the Board's piloting of a tool to assess their own governance performance to the ongoing monitoring of key operational performance indicators, our collective attention has been focused on identifying opportunities to make improvements that will make a real difference to our clients, their families and our staff. Thanks to the incredible efforts of staff and volunteers, over 90 % of our 2001 Quality Plan objectives were achieved.

human resources

- In 2001 VHA signed a three-year settlement with SEIU for our nursing and home support staff. This contract provides wage and benefit increases for each of the three years and for the first time, provides monetary incentives for training and education for our home support workers.
- These and other retention measures have contributed to a significant drop in our turnover of home support workers and to an increase in our nursing staff complement.
- An organization wide training program on managing and valuing cultural diversity was begun late in 2001 to equip and assist all of our staff in managing the increasingly diverse environment in which we work and serve. Training for all will be completed in mid 2002.
- A staff committee met throughout the year to study the results of the Employee Satisfaction Survey published in early 2001 and to provide recommendations to management for improving employee satisfaction and communication. The report was forwarded to management in December and implementation will proceed throughout 2002.
- The annual staff recognition and appreciation dinners brought staff together to celebrate their achievements throughout the year.



keys to satisfaction

vision

To be a preeminent not-for-profit provider of community health and home support services in the province, an employer of choice in the health care sectors, a learning and accredited organization that integrates best practices in all areas of its operation and a provider of an ever increasing amount of charitable services to those in need.

Long Service Award Recipients: 2001

Personal Support Workers/Homemakers, Nurses and Home Cleaners

25 Years

- Busawa, Peggy
- Davies, Judy

20 Years

- Googoo, Patricia
- Hajer, Erika

15 years

- Greenidge, Ianthe
- Gunnis, Meleita
- Lewis, Barbara
- Parchment, Duleta

10 Years

- Acosta, Josefina
- Capriotti, Cathy
- Charles, Eva
- Dilbey, Ann
- Gordon, Daisylyn
- Henry, Gorley
- Holmes, Phyllis
- Lawrence, Jestina
- Mungal, Gemma
- Obermuller, Lenneth
- Parris, Cecelia
- Rodie, Marlene
- Rodrigues, Maria
- Stewart, Yvonne

5 years

- Araya, Hrity
- Carter, Maxine
- Cerezo, Dominga
- Chavez, Ana
- Chung, Wha Sup
- Codrington, Roselyn
- Czajkowski, Danuta
- Das, Shankhya
- De Leon, Julieta
- Edwards Viola
- Findlay, Kathleen
- Gleizerman, Sofia
- Grani, Maria Elena
- Harriott, Evette
- Harris, Desrine



mission

To enhance the quality of life, health, well-being and independence of individuals and families by providing excellent community health and home support services.

values

CLIENT-FOCUSED SERVICES All our services and activities are responsive to the needs of each individual client, respectful of the diverse communities served and delivered with competence and sensitivity.

QUALITY IMPROVEMENT The best possible caring and compassionate service is provided to all our clients and support through ongoing evaluation, client feedback, meeting/exceeding the highest standards of care, exceptional staff and quality management practices.

RESPECT, SUPPORT AND RECOGNITION OF STAFF Our people are our most valued asset. We are committed to supporting our diverse workforce with appropriate supervision, professional development opportunities and participation in decisions which impact on them, as well as fostering a healthy and safe work environment that promotes job satisfaction and personal and professional development.

COLLABORATION Opportunities for alliances and partnerships with other organizations are actively sought to enhance service for clients and to use our resources most effectively.

ETHICAL PRACTICES We are guided by the VHA Code of Ethics as well as the codes of ethics established by professional and business regulatory bodies, such as the College of Nurses and Social Workers and we uphold anti-discrimination practices and policies in relation to governance, service and employment.

VOLUNTARY SECTOR As a charitable, not-for-profit organization, led by a volunteer Board of Directors, we share a commitment to manage our resources with fiscal responsibility and ensure the most vulnerable have access to the services we offer.

ADVOCACY VHA has a role in identifying gaps in services and advocating for more accessible and improved supports for those in need, as well as working to effect system changes for the overall benefit of the community.

Hernandez, Ana
Howard, Anthony
Hur, Sung Eun
Imecs, Margaret
Kandola, Surinder
Khan, Tahmina
Le, Trang
Malcolm, Barbara
Michael, Sharon
Munoz, Gilda
Nazirullah, Linda
Padilla, Genoveva
Pasag, Marivic
Peters, Beverley
Pintus, Jerida
Reid, Winniefred

Sandoval, Ana
Sandoval, Nelly
Santos, Rosa
Ventura, Marta
Vinci, Maria
Walker, Lorna
Williams, Adassa
Wint, Norma
Wong, Hannah
OFFICE STAFF
15 Years
Hannah Blackstock

5 Years
Joy Vicente

Finance and Administration Report

General Fund Condensed Statement of Operations (\$000's)

	Year Ended Dec. 31	
	2001	2000
revenue		
Community Care Access Centres	13,943	\$14,310
Client fees	1,500	1,617
Community & Neighbourhood Services, City of Toronto	1,323	1,140
United Way of Greater Toronto	865	898
Ministry of Health, pay equity	393	379
George Brown College & other training revenue	195	121
Interest	109	144
VON re: CCAC Subcontract	507	58
Donations - fundraising and bequests	2	10
	<u>\$ 18,837</u>	<u>\$ 18,677</u>
expenditures		
Salaries, wages and benefits	18,082	\$16,113
Office and building	356	307
Marketing and promotion	174	234
Purchased services	339	166
Recruitment, education and supplies	506	275
Transportation	75	36
Interest & bank charges	49	36
Other	53	15
	<u>\$ 19,634</u>	<u>\$ 17,182</u>
Excess of revenue over expenditures	(797)	\$1,495
Fund balance at beginning of year	0	0
Transfer to Capital Asset Fund	0	1,421
Transfer to (from) Future Fund	(797)	74
fund balance at end of year	<u>0</u>	<u>0</u>

Statement of Financial Position
(\$000's)

	as of Dec. 31	
	2001	2000
assets		
<hr/>		
Current assets:		
Cash and short term deposits	2,629	\$3,393
Accounts receivable	1,468	1,356
Prepaid Deposits	75	1,184
Sundry	0	6
Capital assets	2,094	628
	<u>\$6,266</u>	<u>\$6,567</u>
liabilities and fund balances		
<hr/>		
<i>Current Liabilities</i>		
Accounts payable and accrued liabilities	1,936	\$1,184
Deferred revenue	218	320
	<u>2,154</u>	<u>1,504</u>
<i>Fund Balances</i>		
Invested in Capital Assets	2,094	1,812
Future Fund	1,616	2,852
Restricted Funds	402	399
total liabilities and fund balances	<u>\$6,266</u>	<u>\$6,567</u>

Executed by Janet Crofton, Director of Finance

www.vha.ca



Complex care, Simple comforts

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