



*Complex Care.
Simple Comforts.*



Complex care, Simple comforts
annual report 2002



Stepping Up Efforts

Board Chair and CEO's Report

For Ontarians who need in-home care to avoid being forced out of their homes into some form of premature institutional care arrangement, 2002 was not a good year:

A series of dramatic steps starting in mid-2001 has forced 115,000 frail elderly and disabled individuals out of home care services and broad sided the sector's province wide provider network with cutbacks averaging 30%.

This crisis forced one of Ontario's most respected service providers into bankruptcy. VHA Hamilton, closed their doors forever in August of 2002 after 73 years of service to their community. And many more Ontario providers are, like us, having a very difficult time. Although we share a similar history and name, we were not technically connected with VHA Hamilton. Still, VHA Toronto, it is like we have lost a member of the family.

Because of this situation, our provincial non-profit providers, association, Ontario Community Support Association (OCSA), joined with the for-profit providers' association, Ontario Home Health Care Providers Association (OHHCPA) and, over the past year have conducted a joint government relations campaign at a level of intensity unprecedented in the sector's history. Despite this, in the recent provincial budget, wherein hospitals and physicians were earmarked for billions of dollars in upward base funding adjustments, community services were not even mentioned.

In a host of public announcements in recent years, our provincial government has promised Ontarians that they will grow our sector and that home care services are to be awarded \$170M of additional base funding.

These funds did not flow.

Because of our methodical government relations campaign, conducted in good faith with the senior government officials, we know our plight is understood. Because of their silence on the matter in the recent budget there can now also be virtually no doubt that this government has no plans to fulfill their \$170M promise.

This is unacceptable.

Surely it is false economy to reduce capability of in-home services while continuing to add billions to expand hospitals.

Therefore, in the months ahead OCSA and OHHCPA will combine forces with our many friends in Ontario's consumer groups to expand our campaign by taking it – out of the back rooms of Queen's Park – to the people of Ontario.

We hope we can count on your support.

As you will learn from the information provided at our AGM, the issues addressed here have resulted in VHA Home HealthCare experiencing one of our toughest years. The promised \$170M increase to home care must be provided now: ideally more, nothing less.

Alan Ely, Board Chair
David Wright, President and CEO



Our Year in Review

VHA highlights for 2002



Delivered more than 1 million hours of complex care, simple comforts to over 9,550 clients and their families across all our programs

Secured a number of new and renewed existing CCAC and private contracts for nursing services; personal support services; supplementary staffing in facilities; and insurance related health assessments

Sponsored a first Annual Celebration of Life Memorial Service for staff who experienced loss through the death of a client



Received Letters Patent which officially confirmed our name change from Visiting Homemakers Association to "VHA Home HealthCare" reflecting our growing continuum of health and home support services

Launched a new Employee Recognition Program

Increased staff resources devoted to our Quality Improvement Program with expertise in evaluation, research and quality management



Implemented a number of client and referral source satisfaction surveys to assist staff in their efforts to continuously make program improvements

Initiated new communications and marketing initiatives to heighten public awareness of our services

Opened “Adams House”
a supportive housing complex for
tenants with severe mental illness
who are homeless or
at risk of homelessness



Upgraded our technological infrastructure and capabilities

Reviewed and enhanced our Risk Management Program

Continued to focus on building a strong
pediatric program, including the renewal of all
Child and Family contracts with the Toronto
area Community Care Access Centres for
both nursing and personal support services



Reached a 3-year settlement (2001 – 2003) with
OPSEU for our administrative employees

Committed significant resources to training and development activities
across the organization – including over 3000 hours of training to our
home support staff alone

Successfully recruited 30 new nurses and
140 new home support workers to our
staff complement despite the challenging
human resource shortages in the GTA



Supported 92 home support staff in obtaining
their Personal Support Worker certificates

Continued to offer significant charitable homemaking
services to the most vulnerable in our community through
a substantial grant from the United Way of Greater Toronto,
including expansion funds to support Adams House
– VHA’s new supportive housing initiative.



United Way
of Greater Toronto

Complex Care. Simple



THERE ARE TIMES WHEN A SIMPLE ACT OF KINDNESS AND CARING

can be indistinguishable from a treatment modality, the purpose of which is to promote the health and safety of the clients with whom we work.

The Home Support Worker (HSW) works with an elderly man, who is bed-ridden, can be seen holding him in a gentle "hug" from time to time during the course of her duties. This is not something one would normally expect from an HSW who is trained to always be professional, efficient, and unemotional in the course of her duties. But in this case, the hug is part of a care plan that keeps the client from injuring himself during a seizure. With the help of the client, who can usually predict the onset of the seizure, this "safety hug" is a simple method of providing care and avoiding further complications in his health status.

Comforts.

Aspire and You Will Achieve



ONE DOES NOT NORMALLY CONSIDER THE ABILITY TO SING A PREREQUISITE for providing personal support to children, although singing with a child can contribute to the building of a trusting relationship between child and caregiver. In this instance, singing is an important part of the care plan. A 10-year-old child, who is developmentally handicapped, exhibits an intricate set of behaviors including incontinence, tendency to fall, and aggressive behavior causing injury to others. The HSW assists the child with bathing, dressing and other personal care activities, sometimes at the risk of becoming the victim of a violent out-burst of uncontrolled aggression. One of the techniques of care used by the HSW to carry out her duties is to simply “distract the child with a song” using “a soft, calm voice”. A comforting gesture in response to a complex set of circumstances.

VHA’S PEDIATRIC NURSING TEAM HAS GROWN AND DEVELOPED over the past five years and now provides extensive care to medically complex and technologically dependent children in the community. Each child and family is a story with a message – a message of courage and hope – like the seven-year-old child dependent on a ventilator for life. This child is provided with mechanical ventilation through a tracheostomy (an artificial airway in his neck). His medical complexities are an enormous challenge. His airway must be suctioned regularly as he is unable to clear it himself. The risk of aspiration - which may lead to pneumonia - is high. As well, a gastrostomy tube provides the necessary nutrition to maintain life. Multiple daily doses of medication reduce the number of seizures which require him to be medically paralyzed for fear that he become detached from his ventilator. The quality of this child’s life remains dependent on two things; the love and support of his family and the dedication, motivation and competence of his VHA nurses and other care providers. VHA staff work with this child and his family to provide the complex care and simple comforts required, and to create an environment which celebrates his successes and works to provide the highest quality of life.



THE COMPLEXITY OF ONE'S LIFE IS SOMETIMES DETERMINED BY CIRCUMSTANCES THAT FALL OUTSIDE OF A PERSON'S SPAN OF CONTROL.

VHA Home HealthCare's Extreme Cleaning Program, designed to prevent eviction and homelessness, encounters such complex situations where a combination of age, mental illness, and severe physical illness results in placing one of life's basic human needs, that of shelter, into jeopardy.

A case in point is that of an 86-year-old woman whose life has conspired to place her at risk of dying, homeless and alone. She has outlived her parents, six siblings, spouse, and four children. She suffers from schizophrenia and osteoarthritis. Remnants of her family are now with her in the form of all their belongings, especially their clothing, which are stored in her one bedroom apartment, floor to ceiling, to the extent that the only usable furnishings and fixtures are the bathroom toilet, kitchen sink, and sofa, upon which she sleeps. Having finally received a "notice to evict" resulting from her inability to "let go of her family" and thus address the fire hazard concerns of her neighbours and superintendent, she faced the prospect of homelessness or, at best, forced institutionalization. Four months of work with this woman sorting, organizing, packing and donating to charity the memories of her family, has resulted in recovering her bathroom and half of her bedroom. She no longer performs her personal care from the kitchen sink, but she still prefers the comfort of her sofa for sleeping.

Raising The Bar

VHA's Vision, Mission & Values

Vision

To be recognized as the best provider of home and community health support services in the province.

Mission

To make a positive impact on every life we touch by providing complex care and simple comforts.

Values

- **Client Focused Services** responsive to individual and family needs and preferences, respectful of diversity and delivered with competence and sensitivity.
- **A Positive Organizational Culture** that values the contributions of its diverse workforce and fosters excellence through accessible supervision, consultation and professional development.
- **Continuous Quality Improvement** through ongoing evaluation with the aim of exceeding standards of care.
- **Cooperation and Collaboration** with our community partners and other stakeholders.
- **Advocacy** in identifying service needs and effecting positive system change.

As a charitable not-for-profit organization led by a volunteer Board of Directors, we all share a commitment to manage our resources with fiscal responsibility, to adhere to ethical practices in all our operations and to ensure, as we are able, that the most vulnerable in our community have access to our services.

A Second Chance in Life

Adams House is a Positive First Step

Adams House, a supportive housing complex located at 423-425 Sherbourne Street, opened its doors in July, 2002. The complex is named after its first owners, James and Eunice Adams.

The house, which can accommodate 27 tenants, is a joint venture of VHA Home HealthCare and COTA Comprehensive Rehabilitation and Mental Health Services. VHA's charitable funds purchased the property, and, along with grants paid through two government programs (SCPI and RRAP*) for the extensive renovations to the hundred-year-old Victorian mansion. COTA staff are providing the on-going site support with funds from the Ministry of Health and Long Term Care's Mental Health Homelessness Initiative, and VHA is maintaining the facility.

Safe, affordable housing is in short supply in Toronto, especially for those living with severe mental illness. More and more people are forced to make do with streets, shelters, or rooming houses as their "home", and these places are more often than not unsafe, infested, and overcrowded environments. Evictions are on the rise, and waiting lists for social and supportive housing keep getting longer.

Tenants come with a wide range of mental health problems and from a variety of untenable or unsustainable living situations, but they all have in common a desire for a better future and believe Adams House is a positive first step.

Kirk, one of the first tenants to move into Adams House says, "Living here gives people a second chance in life." Samuel, Kirk's neighbour, says more supportive housing should be built just like this. "It's good for the people living there and it's good for the City."

Kirk came to Adams House from a boarding home. As a health conscious sports fan and past and hopefully future athlete, Kirk felt that the boarding home was a hazard to his health. The food was unhealthy and the living conditions were not clean. His case manager agreed and referred him to Adams House. Kirk is happy to be cooking for himself and, according to the staff, he makes great smelling curry stews. Kirk really enjoys his privacy, the cleanliness of the House (his own apartment is also spotless), and the landscaping.



He thinks that with his new living space, he will be able to work toward his goals in sports and cooking. (He studied culinary management at George Brown College but was unable to finish the program at that time.)

COTA staff are confident that the House will continue to be a healthy and safe environment with the great group of tenants living there. The staff feel good about the positive impact Adams House has on the tenants.

Everyone needs a safe place to call home. Adams House is such a home and a place for second chances in life.

* SCPI – Supporting Communities Partnership Initiative
RRAP – Residential Rehabilitation Assistance Program



Service

Recognition

Personal Support Workers,
Home Support Workers,
Nurses and Home Cleaners

30 Years

Gail Pettiford

Gail Pettiford has completed 30 years of service with VHA Home HealthCare working primarily in the East Toronto area. Gail's supervisor and many clients describe Gail as a "... caring, diligent homemaker who, over the entire 30 year period of full time employment, has constantly put her client's needs first".

Best Wishes Gail! Congratulations & Thank You!

15 Years

Virginia Forde
Marcia Messam
Rose Sullivan
Doreen Taylor

10 Years

Janina Aleksiewicz
Amanda Beckford
Maureen Blair
Dulcy Bryden
Pauline Kimber
Irena Pekic
Ivy Sharma

5 Years

Dolarosa Adrian Mark
Carmencita Agapay
Harriet Akom-Boateng
Maria Angulo
Marites Antonio
Linda Arsenault
Meskerem Beza
Nelia Botelho
Hyacinth Brady
Anastasia Charles
Lorraine Cheverie
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Milagros Destor
Savina Djenic
Maureen Forester
Juliet Fox
Marlene Francis
Cislyn Frith
Ghenet Ghebremariam
Jennifer Griffiths
Veda Guthrie
Luzviminda Guzman
Heather Gwinnett

Maimuna Hassan
Cynthia Icaro
Julie Johnson
June Johnson
Gloria Jones
Jacqueline Jowett
Jaiwattee Khubraj
Sophia Kim
Esmeralda Lim
Andrea Lindsay
Luisa Llanes
Sherline Lynch
Esmina Maxwell
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East York Access Centre
Etobicoke and York Community Care Access Centre
Family Services Association: Employee Assistance Program
LifePlans
Ministry of Community, Family and Children's Services
Ministry of Health and Long-term Care
North York Community Care Access Centre
North York Seniors Centre
Ontario Community Support Association
Regional Municipality of Durham
Scarborough Community Care Access Centre
Scarborough Support Services
Senior Peoples Resources in North Toronto (S.P.R.I.N.T)
St. Christopher House
St. Clair West Services to Seniors
Toronto Community Care Access Centre
Toronto Community and Neighbourhood Services:
Homemakers and Nurses Services & Shelter, Housing and Support Division
Toronto Rehabilitation Institute
United Way of Greater Toronto
West Toronto Support Services

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