

Pathway to Enhanced Health Services

A Public Health Partnership Pilot

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CDSB
CSDC

Our presentation team



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Agenda



Vision and Values

Cochrane District Services Board (CDSB) serves 13 municipalities, and those territories without municipal organization through 8 operating locations across the district.

Vision:

To further develop a District service environment that is responsive to community needs and which values the individuality of its residents

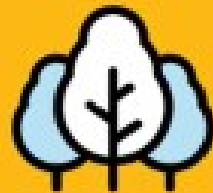
Values:

Respect – Communication – Growth – Collaboration



North East – Regional Profile

557,220
(population)



Projected population growth over next ten years

-.01%

Projected population over age of 65 in ten years

30%
(23.3% currently)

Number of approved Ontario Health Teams

3



HEALTH SERVICE PROVIDERS



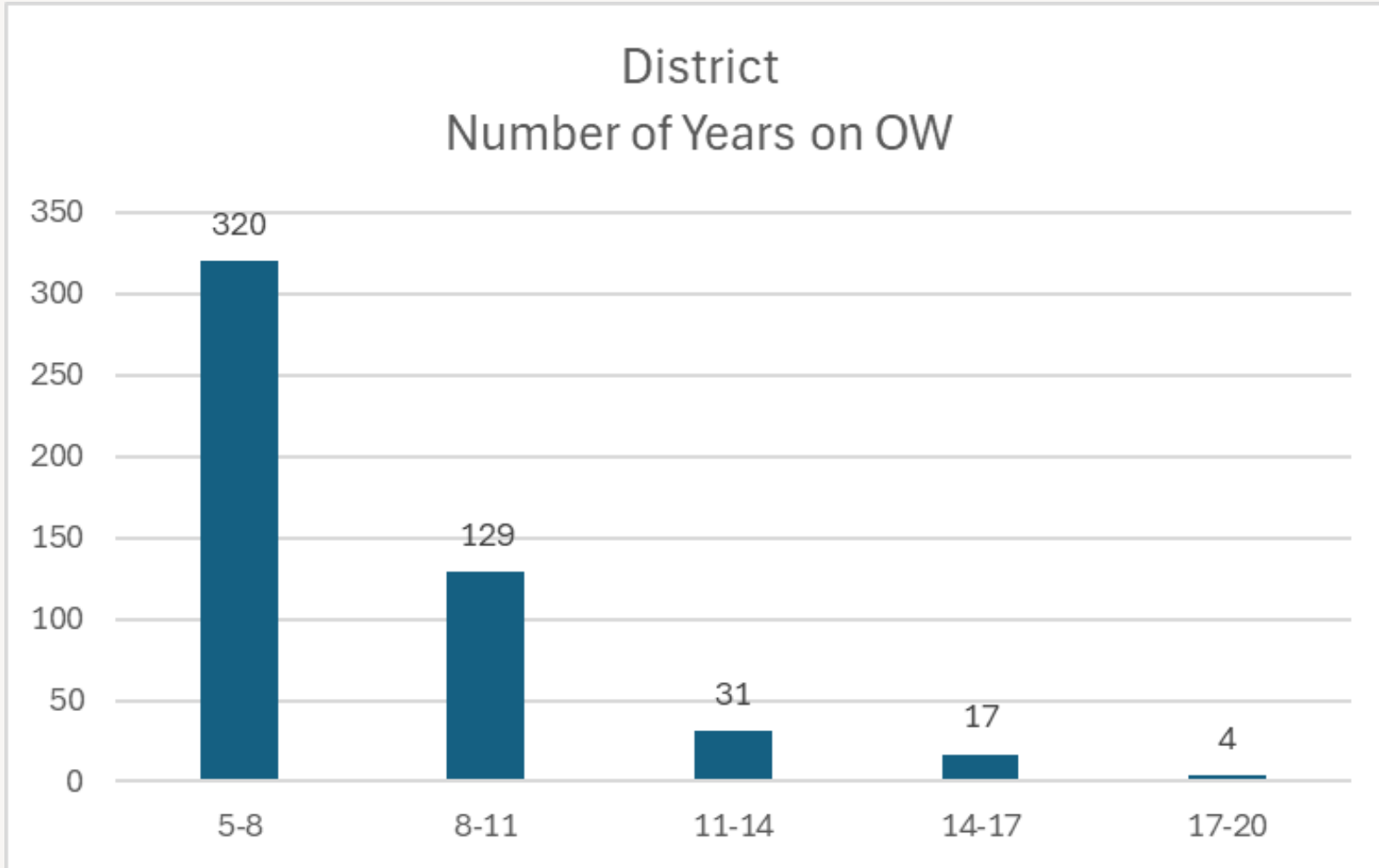
CDSB's Ontario Works Client Data



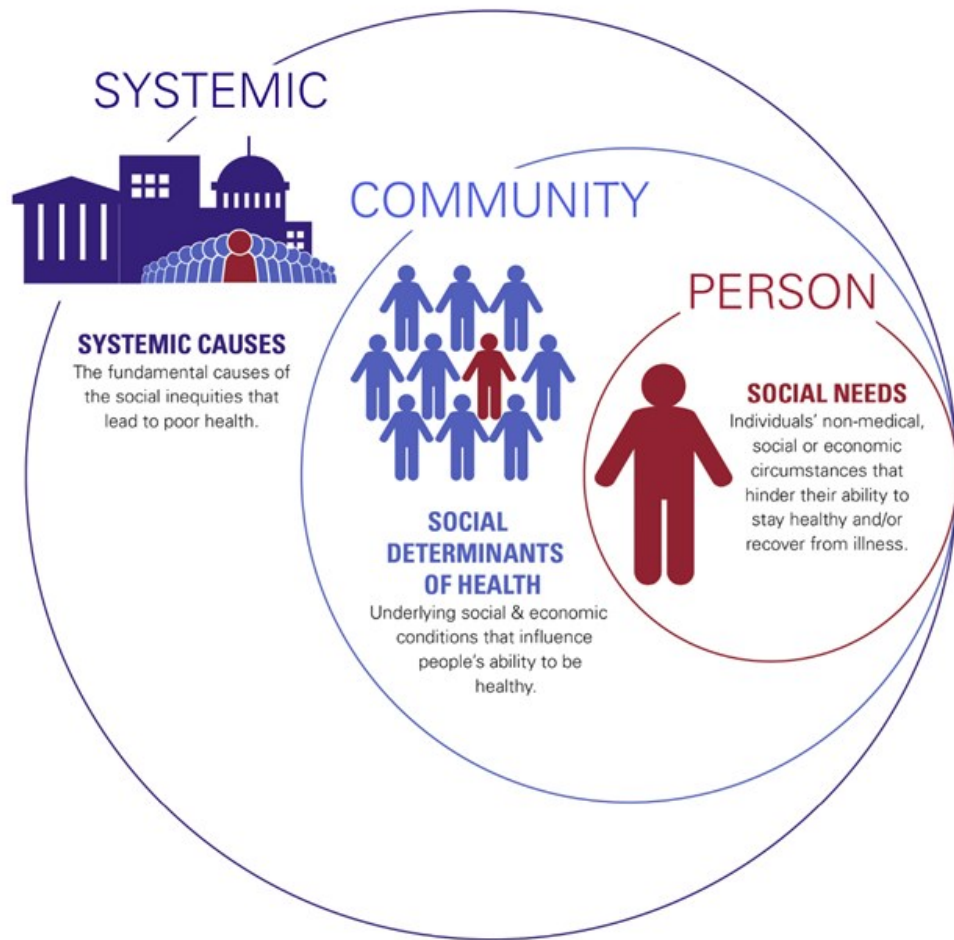
2023 Data:

- 65% of cases on OW > 12 months (62% North, 59% Provincially)
- 48% > 24 months (43% in the North and Provincially)
- 12% of our caseloads have no fixed address (homeless) (North 9% and the province 6%)
- A 39% increase in homelessness in 1 year
- Participation 38% vs 69% in the North and 55% Province
- 40% deferred vs 17% North and 12% Provincial

CDSB's >5yr on Ontario Works Client Data



- 60% are female
- 40% male
- 60% are single
- 33% sole support parents
- 25% high school educated
- 64% < high school education
- 7% have Post secondary



Systemic Problem Unveiled:

Ontario Works Client Health Related Barrier

- Physical
- Mental
- Addictions
- Access to health care

Associated Risks

- Client physical and mental health
- Housing stability
- Food security

Approximately 1 in 4 Ontarians
– that's 4.4 million who will be without a family doctor by 2026.

Social Determinants of Health





“

If you don't like something,
change it. If you can't
change it, change your
attitude.

”

Maya Angelou

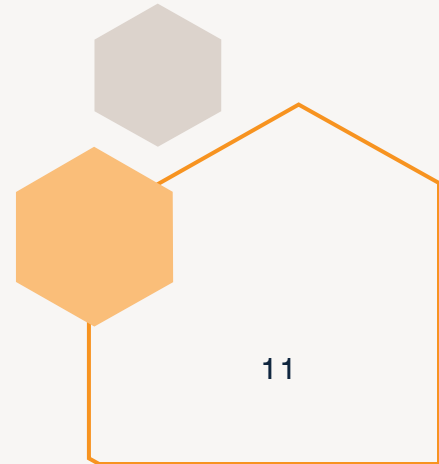
AMERICAN MEMOIRIST, POPULAR POET,
AND CIVIL RIGHTS ACTIVIST



The Pilot Project: Objectives and Partnerships



1. Assess and provide the client with their health prognosis
2. Develop a plan for return to work and/or
3. Support the completion of the necessary documentation to apply to the Ontario Disability Support Program (ODSP)



The Pilot Project: Operational Roll-out – Data Tracking

Data tracking categories include:

- Total Clients
- Age
- Racial Identity
- Sex
- Gender
- Status (Indigenous, Caucasian and other)
- Family Composition (single, couple, and family)
- Declared Disability (i.e. mental health/addiction, physical, intellectual)
- Health care appointment status i.e. Attended
- DDP Received
- DAU Decision (Granted or Denied)
- Final DAU Decision (granted 1, 2, 5-year review, denied, and no medical review)



The Pilot Project: Operational Roll-out – Departmental Communication

- Engaged team members and partners in regular meetings
- Reviewed operational and site processes for enhancements
- Supported smooth assessments and accurate data collection

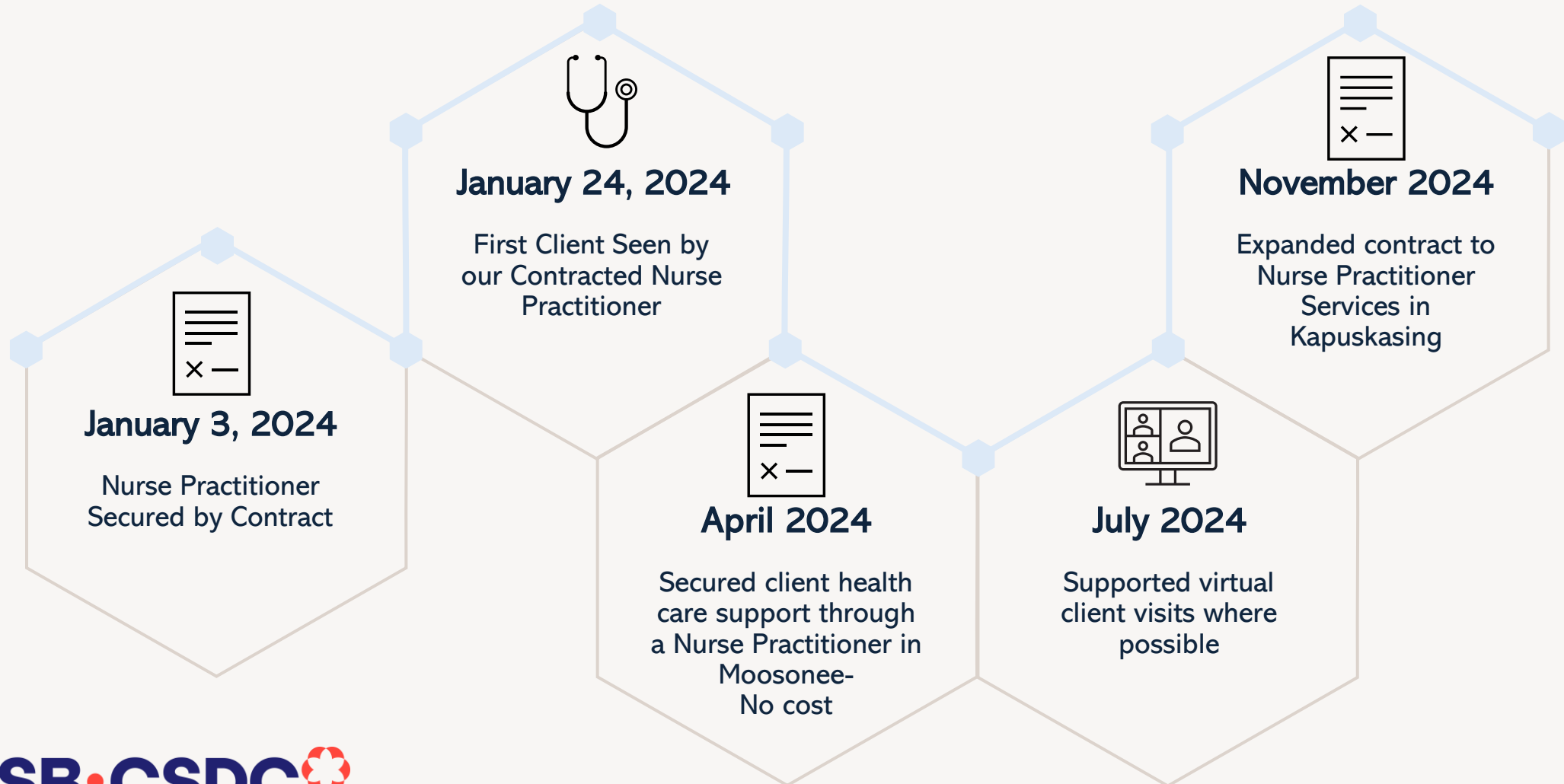
Implementation Timeline by Community

(Data reflects Jan 24 to Aug 14, 2024)

- Iroquois Falls- January 24
- Cochrane and Smooth Rock Falls - January 31
- Matheson, Ramore, and Holtyre - February 8
- Moosonee - April
- Timmins - June 11



The Pilot Project: Operational Roll-out: Timeline for Enhancements

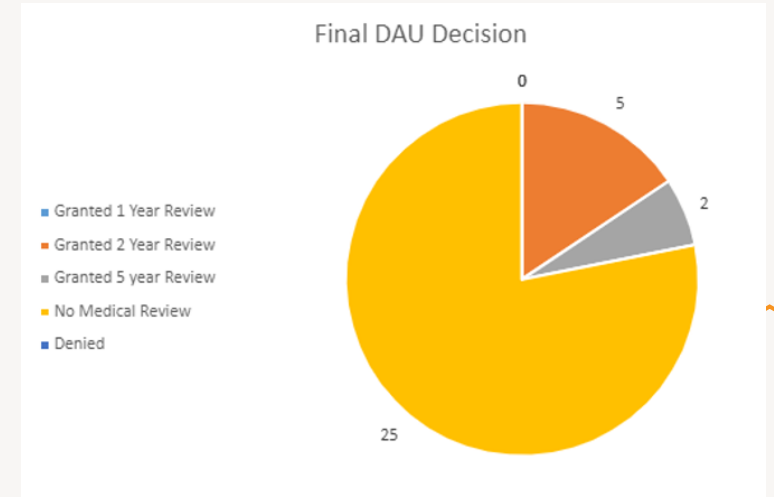
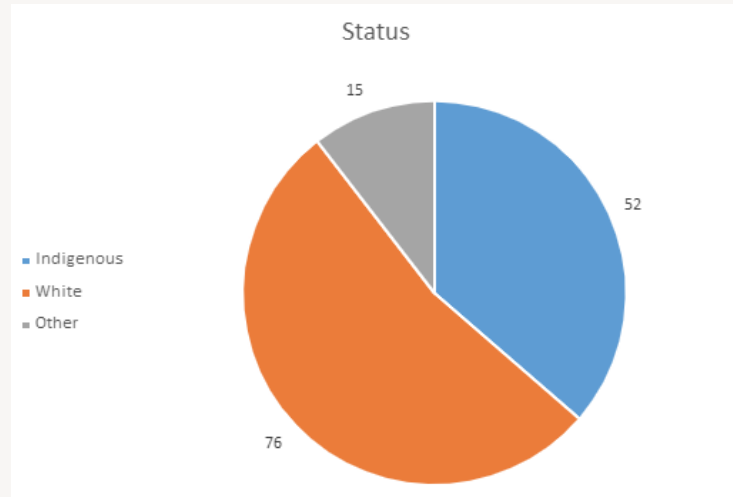
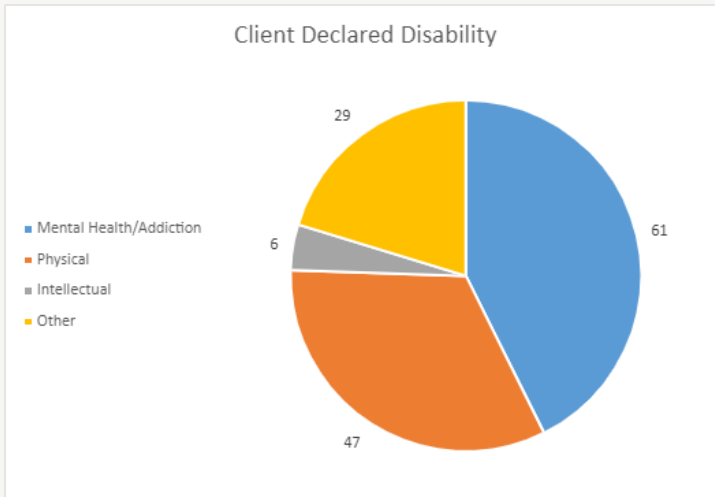
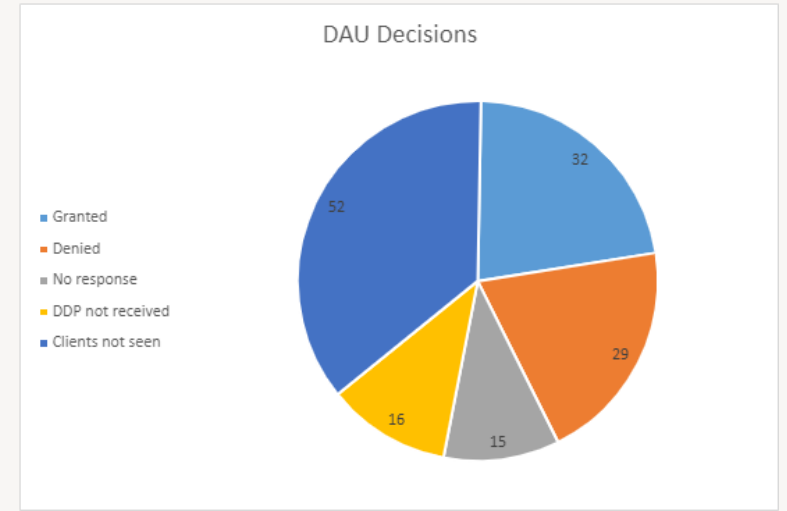
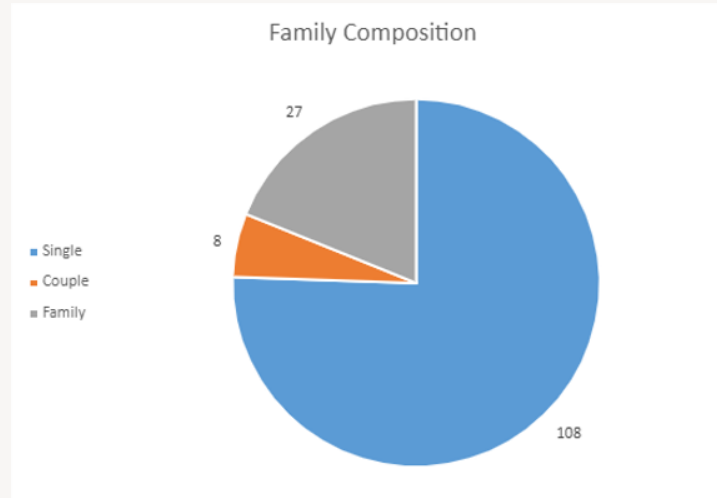
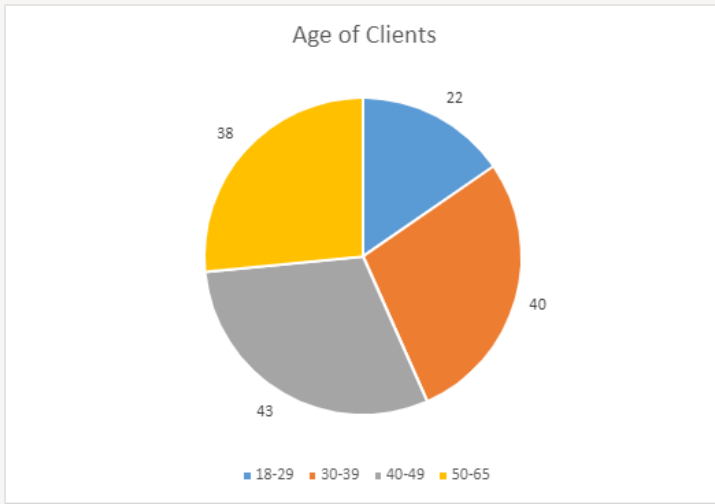


The Pilot Project: Operational Roll-out – Internal Processes

- Identified clients without a family doctor
- Contacted clients about the opportunity
- Completed ODSP referral and obtained signed consents
- Verified and supported the completion of the self-report
- Scanned documentation to the Nurse Practitioner
- Requested extensions from DAU as needed
- Monitored DAU decision through SAMS
- Informed the clients of decision and provided legal clinic information if denied
- Reviewed SAMS notes regularly and updated data tracker
- Maintained individual tracking spreadsheets



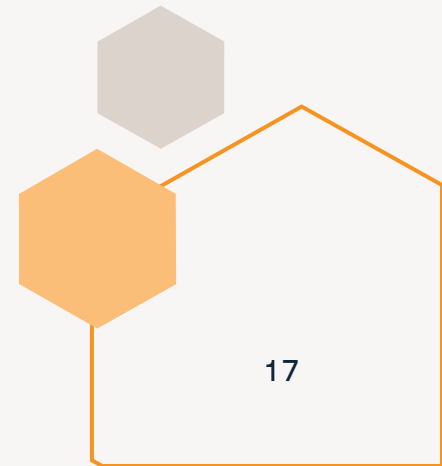
Project Results



Project Results - Testimonials

Client Testimonials

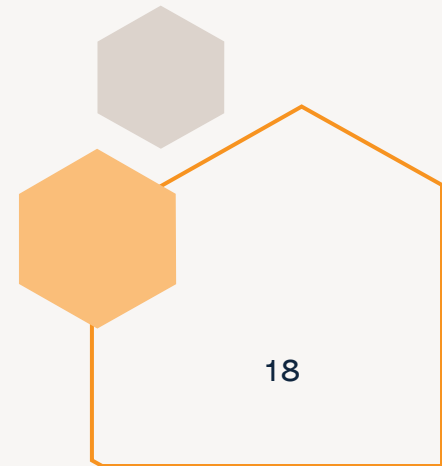
- "I am grateful and happy I finally was granted. It has been a huge struggle especially over the past two years. I am homeless and my next thing is to secure a residence since I will be getting more money. This will help me get custody of my children as I will have a better income. Thank you to all the OW staff for always being there for me when I needed them."
- "I'm so overjoyed that I can now afford to live!"
- "Being on OW and unable to work with no family doctor or family to help - this opportunity gave me HOPE and now I can afford to eat every day and pay my rent!"
- "I'm in shock and don't quite believe it. This is good news, thank you.....Thank you for everything that you have done to help during my struggles."



The Pilot Project: The results - Testimonials

Staff Testimonials

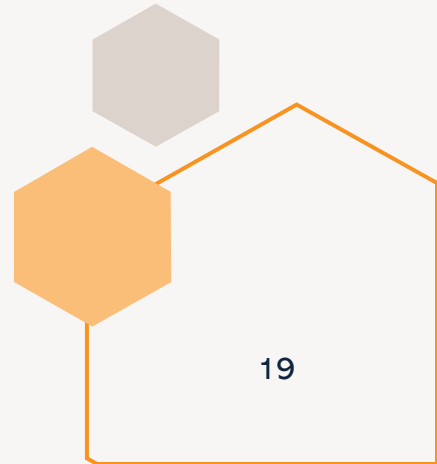
- "I witnessed clients that were so overjoyed when they qualified for a special diet that they burst into tears..."
- "When we received the news that our client was granted ODSP, we cried as we worked with this client for over 10 years. This is truly a good news story."
- "Through this process, I developed a more trusting relationship with clients, and it opened my eyes to many of the barriers, beyond financials, that many OW clients face."
- "When I received notice that my client was granted ODSP, ecstatic was not a strong enough word to describe how happy I was for her knowing how long she struggled. It was a process, but it was successful. Having a medical professional on our team can improve the lives of so many of our clients. If we work together, we can achieve anything."



The Pilot Project:

Lessons learned throughout the project

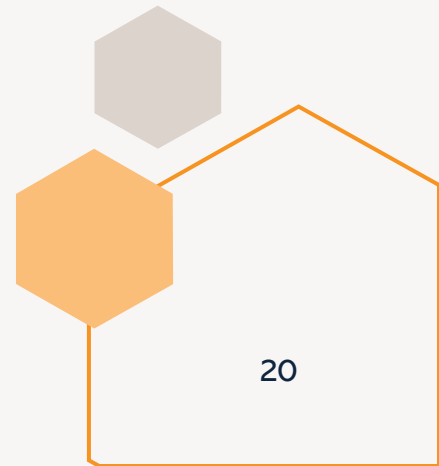
- Explore your data
- Be resolved that partnerships exist
- Complete a soft rollout
- Use technology where possible
- Verify and clarify roles and responsibilities in your agreement and amend as needed
- Communication is key
- Be open to learn and watch for bias
- Staff support and voice are instrumental
- Assign lead staff per site
- Help remove client barriers (i.e. travel, childcare)
- Expand pathways to health to include all referrals
- Keep a copy of all documents
- Track the data
- Commit to success!



Next steps



- Support our clients continued access to health care
- Monitor and track the data
- Support the appeal process
- Continuously improve processes
- Explore and expand partnerships
- Evaluate data through various lens
i.e. community vs. district
- Commit to success



Thank you

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