



HEALTH HUMAN RESOURCES INNOVATION FUNDING

Final Report 2021-2022

April 2022

QUICK SUMMARY

- The Niagara Ontario Health Team – Équipe santé Ontario du Niagara (NOHT-ESON) would like to extend its gratitude to Ontario Health for the Health Human Resources Innovation Funding. The NOHT-ESON used over \$230,000 to support the following types of projects:
- Types of projects funded:
 - Vaccination clinics for vulnerable populations through REACH mobile clinics
 - Transportation services for isolated individuals
 - Peer support navigation for individuals experiencing homelessness
 - Emergency staffing coverage to maintain services
 - Extra staffing support to tackle cancer screening backlogs
 - Mask fit testing
 - Building bilingual palliative care physician capacity
 - Positive Approach to Care training
 - Mobile support to homebound individuals (meals, safety equipment, travel costs)
 - Support to individuals experiencing food insecurity
 - Interpretation services
- 20 organizations across Niagara participated in or led projects made possible with this grant:
 - Alzheimer Society of Niagara Region (ASNR)
 - ARID Group Homes
 - Bridges Community Health Centre
 - Centre de santé communautaire Hamilton / Niagara (CSCHN)
 - Community Support Service of Niagara (CSSN)
 - Entité2
 - Foyer Richelieu
 - Gateway Residential and Community Services
 - Heidehof Home for the Aged
 - Hospice Niagara
 - March of Dimes Canada – Niagara
 - Niagara Falls Community Health Centre
 - Niagara Medical Group Family Health Team
 - Niagara North Family Health Team
 - Niagara Region Mental Health
 - Oakwood Park Lodge
 - Quest Community Health Centre
 - REACH
 - Royal Rose Place
 - Salom Manor and Gardens

ACTIVITIES

The following is a description of the activities, made possible with this funding, as they align with Ontario Health's HHR Strategy – Areas of Strategic Focus:

INNOVATE

REACH Mobile Vaccination Clinics:

During wave five of the pandemic, it was very challenging to run COVID-19 vaccination clinics across Niagara as many community medical providers were deployed to their own COVID-19 vaccine efforts at their agencies or experiencing their own staffing challenges due to isolation, sickness, and exposure. Many of the primary care providers who are employed by REACH mobile clinic on a part-time basis were deployed to their own organizational COVID efforts as a result. This left the agency little opportunity to deploy clinics for individuals experiencing homelessness. The funding allowed REACH to coordinate COVID-19 vaccination clinics for vulnerable populations with participation from numerous partner agencies in various roles.

7 vaccination clinics
5 sites
4 municipalities
137 vaccinations
16 community partners involved

Remote Interpretation Services

Finding bilingual professional/clinical staff to serve our Francophone priority population has always been a challenge, now amplified by the pandemic. While interpretation in French is not the same as offering services in French, this tool will bridge language gaps, responding to urgent, critical and unforeseen situations. This service will be implemented as part of Niagara's newly launched Virtual Urgent Care program until services are available in French.

Will provide:
300 units of service
30 minutes each
180 languages

EMPOWER

IT Equipment:

At CSSN, three staff members were using old and outdated technology through coordination of services. The outdated computers proved to work against providing effective use of time and efficiency in service delivery. HHR spent more time seeking solutions, which saw greater IT costs.

3 laptops

Bilingual Community Palliative Care Physician Program:

During COVID, all in-home community supports were challenged to meet the needs of people living with chronic illness and to support primary care physician providing pain and symptom management. This area of palliative care (i.e. community outreach and physician consultation), has been underserved by physician specialists in Niagara for many years. COVID and COVID recovery have only complicated this issue, causing many at home to visit EDs because they are not receiving the in-home support needed to manage the complexities and changing illness trajectories. HHR funding is being used to develop a **bilingual** community palliative care physician program and capacity building to help people living with chronic, terminal illness to remain in home and avoid ED visits particularly during the last 90 days of life (a partnership between Hospice Niagara and CSCHN).

Full daily physician support for residents in hospice during 3.5 days a week – 7.5 hours per day.

213 visits with residents and families.

22 clients served

210 hours of orientation in Hospice Residence

Train-the-Trainer Mask Fit Services:

Staff in many sector are wearing N95 masks when in contact with clients, and this funding has allowed Niagara to train/build a team of individuals who can provide mask fit services across Niagara (instead of having to engage with third parties).

14 mask fitters trained

Positive Approach to Care:

Due to COVID-19 and restrictions surrounding Long Term Care (LTC), our Psychogeriatric Resource Consultants (PRC) were unable to enter LTC facilities and provide direct consultations to frontline staff. They provided phone and virtual consultations. Caring for residents has been enough of a challenge and training to deescalate behaviours has been impossible. Through this funding, a PRC was certified as a trainer of Positive Approach to Care (PAC). The PAC concept uses knowledge and practical interventions to aid in the development of a partnership between the carer and the person living with dementia. Through PAC training, caregivers (professionals and family members) gain a better understanding of dementia-related behaviors, and learn positive communication and care partnering techniques that will change the way they approach and interact with someone living with a dementia.

5 – 8 hour sessions offered annually with 10-12 participant per session

Continuous 10-15 minute sessions with up to 10 staff at a nurse's station to teach small nuggets of PAC information

RETAIN

Community Support Services:

In March 2022, Meals on Wheels services were at great risk of having reduced meal deliveries and/or rides to medical appointments. As the services rely heavily on the support of volunteers, the rising cost of fuel meant that many volunteers could not continue their support in the same capacity. The funding providing one-time relief in mileage compensation to volunteers so they could continue their services and it allowed CSSN to increase staff hours to accommodate the shortfall when volunteers were unavailable.

237 Meals on Wheels routes
665 homemaking visits
502 ride to medical appointments
168 unique individuals served
90 grocery orders placed and delivered

Peer Support Navigation in the Emergency Department:

The program is based in the EDs of Niagara Health and, as result of lockdowns and restrictions, it has been placed on hold a number of times. It has been challenging to retain staff as the hours and shifts have been reduced. Once the lockdowns and restrictions began to lift, our team worked with Niagara Health to remain in the EDs. This allowed our Peer Support Navigators to remain in the EDs and increase our hours. With the increase in hours it became apparent that the St. Catharines and Niagara Falls Site required full time Peer Support Navigators to help meet the needs of clients.

53 clients served
1 ED site added
5 additional shifts per week
2 new hires
30 meals/snacks provided
20 gift cards provided

Staffing at ARID Group Homes:

This funding helped prevent layoff of part-time staff or reduced hours spent with clients and reduced safety or health concerns for residents on entry to our Homes in the month of March. Lay off of part-time staff in the intake and isolation home (Fort Erie) where residents are isolated and or processed for COVID related issues and this could interrupt their entry into our homes.

5 intakes processed
5 care plans initiated (including peer support)
5 clients served

Cancer Screening (PAP Tests):

At Niagara North Family Health Team, COVID-19 impacted the ability to complete basic preventative care measures with patients due to restrictions on in-person visits, as well as reduced laboratory capacity. This has resulted in a large backlog of patients who are overdue for cervical cancer screening. The FHT was able to extend the hours of one of Nurse Practitioner by one day per week for five additional days to do PAP tests

60 clients seen

March of Dimes:

MOD has experienced staffing shortages over the course of the pandemic, leaving clients in precarious positions in terms of daily support. The funding allowed MOD to engage with third party agencies to fill staffing gaps on short notice.

115 home visits
513 hours of care
23 clients served

Bulk N95 Fit Testing:

The NOHT-ESON engaged with a third party mask fitting agency to ensure that staff across the continuum (with a particular focus on long-term care) are properly fitted for their N95 masks and protected against COVID-19, as the system cannot afford to lose any more staff, temporarily or otherwise, due to COVID-related issues.

Over 230 staff fit tested

COLLABORATE

Safety Equipment:

Due to pandemic, there was a backlog of in home visits through CSSN, and need for safety equipment exceeded allocated funding. The funding ensured older adults received the supports needed to live safely in their home.

Grab bars
Anti-slip mats
Sock aids

Food Security:

This funding allowed CSSN to secure 1,200 frozen entrées that will be distributed to individuals in Niagara experiencing food insecurity. These entrées responded to an immediate need while community workers continue to work through scheduling challenges to complete in home visits. CSSN is working with Niagara Region Senior Community Services for the distribution of meals.

1,200 meals for 120 clients
10 clients already served with 100 meals distributed

Gateway Residential and Community Support:

Over the pandemic, Gateway was not able to reach out to consumers, family and service providers when they called about referrals for support. Many were upset that we were unable to reach out to the extensive list. This funding allowed the organization fund a position to reach out to those on the waitlist. The assistance provided our staff with updated laptops so they could work safely in their preferred environment.

200 clients served

MedicAlert:

Due to COVID-19, ASNR and several other community agencies have not been doing home visits for clients living in the community that would have included safety checks and home strategies. ASNR also serves individuals with little or no family support and over the past 2 years. By providing a yearly subscription to MedicAlert, an individual's complete medical and relevant identifying information, including photos is registered into a database that can be accessed 24/7 by police, medical services or community members in the case of an emergency or if an individual goes missing.

52 individuals will receive a bracelet and a one-year subscription to an emergency database

Peace of mind for many family members

Support for Food and Personal Care and Hygiene:

Many partner organizations of the NOHT-ESON have vulnerable clients facing challenges with food security, supplies and adequate clothing for the different seasons. Various fundraising initiatives would raise funds to provide such items that are outside of government funding. However, due to COVID, ability to fundraise with in-person events was significantly reduced. We have heard that supports for individuals receiving benefits of a meal and/or gift cards have are temporarily unavailable to because of caregivers having to self-isolate; others have indicated that due to COVID-19 there is a longer wait time for HHR staff to implement services that aid in completing paperwork to ensure financial stability. The meals and gifts cards are a stopgap measure to ensure no one goes hungry while waiting for HHR staff time implement services.

9 organizations received gift cards

CLIENT STORIES

I was registered on a waiting list for a booster in a pharmacy since November and they never called me. A worker at the vaccination clinic called me in morning, provided transportation to the clinic and I got my shot a few hours later. They made me feel comfortable and at ease. I left with a meal and a gift card for Timmy's so I didn't have to cook dinner.

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- *Randi (36)*

When sharing the news of a one-time mileage enhancement to offset the rising price of fuel, a volunteer from Meals on Wheels broke down in tears. She was overwhelmed by the generosity of the granting body. The volunteer stated that she was devastated when she thought she would need to pause her volunteer duties due to financial restraints. The personal benefits that she received by having a meaningful task to leave her home, and knowing she is helping vulnerable people in her community. Delivering a meals on wheels routes and seeing clients ensures a positive mental health and well-being.

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- *CSSN Staff (volunteer wished to remain anonymous)*

A client who is currently receiving service from our ACT team (Assertive Community Treatment) has metastatic lung cancer. He has recently had neurosurgery to remove tumour, knee surgery for pre-existing issues, hip replacement after having a couple of falls due to his weakened condition and possible spread to bones. He struggles with money and has very limited family support. Neighbours and ACTT/community services are supporting as best we can but the pandemic has limited this support. The Walmart card would ease things a little by allowing him to purchase some over-the-counter medical items and food.

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- *Niagara Region Staff*

Client B presented to the Niagara Falls Site ED with lower back pain. The ED staff connected with the HELPS team as Client B identified as housing insecure. Our PSN was able to provide support and advocacy for Client B and worked with the ED team to ensure the clients voice was heard. In the ER it was discovered that Client B had a serious infection which required a stay in ICU. Our PSN was able to support the client with the news and help with the transition from ER to ICU. While in the ICU, the client disclosed on a note that they were experiencing relationship violence from their partner and that they needed help. The Niagara HELPS team was able to provide discrete support, notify the ICU staff and work to establish a safety plan for the client. The Niagara HELPS continued to check in with the client, communicate with ICU staff and secure safe housing once discharged. It is because of this additional funding that Niagara HELPS was in the Niagara Falls Site ED.

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- *Quest CHC Staff*