

Seven Hamilton Organizations Collaborate to Find a Solution to Social Isolation for Seniors

A safe and thorough transition from hospital to home can be a very challenging task for seniors, especially ones that are isolated. With the support of \$2 million in federal funding from New Horizons, seven organizations in Hamilton, including St. Joseph's Home Care, are coming together to close the gap and reduce social isolation in seniors, through a collaboration termed the **Hamilton Seniors Isolation Reduction Impact Plan**.

The project includes a three-step process involving: a citywide plan to tackle isolation in seniors driven by focus groups and interviews with local seniors and service providers; an interactive referral system to link all 110 community support service agencies in Hamilton; and lastly implementing a Care Connector program to help seniors transition back into the community.

We are proud to announce that the Care Connector for St. Joseph's Home Care is Marianne Amodeo, who will be working with St. Joseph's Healthcare Hamilton for the three-year duration of the project. Marianne comes to St. Joseph's Home Care from Acclaim Health where she had extensive experience working with high-risk seniors in adult day programs, and was involved in Personal Support Worker (PSW) duties as assigned.

In collaboration with hospital staff, Hamilton Niagara Halidmand Brant (HNHB) Community Care Access Centre (CCAC) teams, and community support services, Marianne's main objective is to ensure that seniors with a high risk of isolation receive support for a successful transition from hospital to home or the community. She will also be

responsible for visiting clients in their homes and attending their appointments with them as required, coordinating Meals on Wheels, arranging PSW visits, outreaching to local resources to help deal with hoarding and more; all while providing ongoing support to clients until they are anchored to community resources.

Other organizations that are a part of the collaboration are:

- AbleLiving
- Hamilton YWCA
- Thrive Group Support Services
- Wesley Urban Ministries
- McMaster University's Gilbreath Centre for Studies in Aging
- Hamilton Council on Aging

Marianne will be physically located at Park Street with focus on the Durand neighbourhood because there is a higher amount of seniors than normal, and they are more at risk of being financially vulnerable in that specific area. In fact, the current population of seniors in Hamilton is at 14.9% compared to Ontario at 13.6% and Canada at 13.7%, and the number is expected to double in the next two decades. The other Care Coordinators in Hamilton through Thrive Group Support Services are working with the Juravinski Hospital and Cancer Centre, and the Hamilton General Hospital. The reasons why there is emphasis on the urban areas of Hamilton are that there are more new immigrants, a higher proportion of people with activity limitations than in the city in general, a higher

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Representatives from partner organizations in the Hamilton Seniors Isolation Reduction Impact Plan



Mr. Jean-Yves Ducloux, Minister of Families, Children and Social Development speaking at the event



Banners representing the organizations involved in the project

PRESIDENT'S CORNER

A message from Jane Loncke, President



As we, St. Joseph's Home Care (SJHC), and as a part of the greater community providing home care and community support services, embark on changes happening corporately and federally, I would like to ensure that our tight knit community is aware and comfortable during these changes by providing the utmost transparency of information pertaining to all of our employees.

There is much excitement and intrigue amongst many of our employees around the potential partnership with Bayshore HealthCare, where the process is currently, and what the partnership might look like. In my previous letter to all staff at SJHC on June 6th, the organization was about to engage in Phase One, which consists of reviewing and assessing operations and implementing recommendations to strengthen both current home care and community support services to prepare for an expanded role in St. Joseph's Health System and beyond. SJHC will maintain transparent and the line of communication is open with all employees, therefore once Phase One review is complete, we will provide further information and next steps.

Another major change that will be occurring is the Patients First Act, which has been discussed in previous issues of SJHC Corner. After the discussion paper was released in

December of last year, the Minister of Health and Long-Term Care (MOHLTC), Dr. Eric Hoskins, decided to table the Patients First Act in June. As a result of the legislation, the Local Health Integration Network (LHIN) will have more responsibility and will be divided in sub-groups to make it easier for patients to receive better care and access services easier. Furthermore, existing Community Care Access Centres (CCACs) will be disassembled and the LHINs will oversee home and community care.

Lastly, there will be a new Care Connector role as a part of a project collaborating with seven other organizations across Hamilton to address the isolation of seniors; in particular, those transitioning from hospital to home. This three year federal funded pilot project was given the name, Hamilton Seniors Isolation Reduction Impact Plan. The goal of the Care Connector is to anchor seniors that are at high risk of isolation, and closing the gaps they would face transitioning into the community.

As SJHC embarks on many new pathways, corporately and federally, the value and importance on each employee remains as we go on this journey together with transparency centred at the core. I'd like to thank everyone for your patience while some pathways are unknown, but the lines of communication are always open.

If you do have any questions or concerns, I encourage you to send your messages to Natasha Voogd by email at nvoogd@stjhc.ca, by phone at extension 2225, or anonymously by placing a note in Natasha's mailbox (in the front copier room in the office) so I can respond to your queries as they come up. I'd like to thank everyone for your patience and dedication to St. Joseph's Home Care; creating a tight-knit community.

UNITED WAY - POSSIBLE THANKS TO YOU

Thank you for participating in SJHC's United Way fundraising in 2015.

Thanks to your donations, United Way of Burlington & Greater Hamilton was able to help change the lives of 69 people by raising \$2,854. Those helped include children, youth and seniors. Our continued fundraising efforts help families escape poverty, provide needed services to people, and guide children on the path to success and builds a network of support that is essential to building healthy communities.

We ask that you continue to support United Way in 2016.



A WELL-DESERVED CLIENT COMPLIMENT

St. Joseph's Home Care received a very appreciative letter from Linda Donaldson, whose mother received PSW services at one of SJHC's supportive housing programs. Ms. Donaldson shared one particular experience:

Mom was having a really bad day yesterday. I even drove in from Brantford to make some lunch and have a visit. That night Melinda [Monang] was mom's PSW. I couldn't believe the difference in mom after Melinda left. She was so content. Melinda washed her feet, among other tasks, and let mom know that she loved her. What a gift.

Melinda's kindness may not be surprising to many of our staff, people who carry out tasks and show their compassionate nature in comforting clients day in and day out, but it is definitely gratifying to see the good work done by Melinda and colleagues recognized by clients and their family members. Congratulations Melinda and thank you for your great work.

BIDDING FAREWELL TO MR. JIM LOPRESTI

One of the longest-serving members of the Board of Directors of St. Joseph's Home Care left the Board this June after 18 years of service.

Jim LoPresti began his service to our organization as a member of the Board of Directors for St. Elizabeth's Visiting Nurses Association in 1998, and was a member of the various Boards of Directors until 2014. Over the last two years, Mr. LoPresti has continued to serve on the St. Joseph's in Hamilton Joint Boards of Governors as a member of the St. Joseph's Healthcare Hamilton Board of Trustees.

When his Board colleagues thanked him for his long service, Mr. LoPresti simply responded that "it's been an honour to serve". It is this modest and humble response that best describes Mr. LoPresti.

In recognition of his countless volunteer hours serving as a member of the Board of St. Joseph's Home Care over the years, Mr. LoPresti was awarded the prestigious Mission Legacy Award in 2011.

Jane Loncke describes Mr. LoPresti as resonating a deep caring about the human element when she defines how he often approached her at Board meetings to ask about staff at SJHC.

SJHC staff who had the pleasure of working with Mr. LoPresti over the years will remember his consideration for the people who form our organization. He has always kept staff at the forefront of his concerns and has been a strong advocate for doing the best possible for people, both as an employer and a service provider.

Candy Laidlaw, currently a Program Manager for the Gwen Lee and Wellington Terrace programs, served as the organization



Mr. Jim LoPresti

representative on the Board of Directors for three years and shares her experience working with Mr. LoPresti:

When I first started I was very nervous and felt quite out of my element. His kind words and warmth always put me at ease. His dedication and compassion for the work we do and the clients we serve never ceased to amaze me. His genuine interest in everything we discussed and his knowledge and understanding were a true testament to his loyalty to our clients and board of SJHC.

Angela Batelic, currently the ICC Program Administrator, worked with Mr. LoPresti over nine years on various committees of the Board, and feels fortunate to have worked with Mr. LoPresti through a very difficult time for St. Joseph's Home Care:

Back in 2008, SJHC received the devastating notice that we were not successful in the Hamilton CCAC contract bid; we had lost the CCAC business, which was our largest contract, and were expected to transfer patients to another service provider by April 1 of the following year. It was a very challenging time for everyone, but Jim never gave up hope in St. Joseph's Home Care. He believed in what the organization stood for and our mission. He gave voice to the feelings of clients, staff and other members of the Board and I am very grateful for his faith in all of us. Today, I am proud to be a part of SJHC's continued success and look forward to the years to come.

Everyone who is connected to St. Joseph's Home Care, and all who have had the privilege to serve and work with him over the years, wish Mr. LoPresti the very best and will miss him greatly.



Each year we recognize staff members for their commitment to St. Joseph's Home Care. SJHC is very fortunate to have dedicated, mission-driven staff working throughout the organization to improve the lives of our clients every day.

This year's Staff Service Award Dinner will be held at a **new location**, at the Waterfront Banquet Centre, located on the Hamilton Bay at 555 Bay St. North, Hamilton. The dinner will be held on Thursday, October 13, an easy date to remember as it is the first Thursday after Thanksgiving.

Award recipients will receive a letter inviting them, and a guest, to the event. Please contact Amy Pickernell to RSVP for the event at ext. 2233 or apickernel@stjhc.ca. Closer to the event, we will open up registration to those staff members who wish to attend and support their fellow staff members.

Award of Excellence Recipients

Carla Strickland, *Home Care Services*

Amy Pickernell, *Support Staff*

Linda Tessier, *Community Support Services*

Aden Hiscox, *Leadership*

Length of Service Recipients

20 Years of Service

Novelett Nembhard
Pauline Rodney

10 Years of Service

Megan Corrigan
Cheryl Thomas
Rukia Mohammed
Maria Montoya
Wilma Dulin-Anderson
Pamela Reid

5 Years of Service

Rica Villanfanía
Catharine MacKanyyn
Suzanne Johnson
Janice Stirling
Rebecca Buckland
Francisca Nam
Kathy Colaianni
Norita Columna
Vicky Al-Sayed
Mary Jane Realgo
Eva Quinto

15 Years of Service

Linda Borger
Cheryl Kuzub

Congratulations to all our Award winners!

Please note that for calculation of years of service, the entitlement year runs from April 1 of the preceding year to March 31 of the service award year. If you have a question about a length of service award entitlement, please contact Melissa Duguid at ext. 2245 or via e-mail at: mduguid@stjhc.ca

Important Message: One week prior to the event, SJHC is required to confirm the number of staff who will be attending the event. We respectfully ask that staff members, who have committed to attending the event, contact us promptly if they are unable to attend the dinner, as SJHC is required to pay for all guests, even if they do not show up.

Seven Hamilton Organizations...

rate of poverty, a higher proportion of seniors living in poverty, and more residents that identify with a visible minority group.

Marianne's goal is to make a connection with 95 clients each year over the three-year period. The eligibility criteria is the client must be 65 years or older who might be estranged or have cognitive issues, seniors that are financially vulnerable, or seniors that do not have any close relatives that are willing to support in the transition. The referrals are to come from St. Joseph's Healthcare Hamilton shortly, and Marianne will then begin the process of meeting clients in the hospital before discharge, reviewing their care plan, and then establishing the home visits and community support.

The structure of the seven organizations is well thought out so that every organization plays a key role into warranting success. The YWCA and Wesley Urban Ministries will act as the frontline organizations focusing to target the neighbourhoods in both urban and rural Hamilton with the help of Peer Connectors. AbleLiving and St. Joseph's Healthcare Hamilton/ St. Joseph's Home Care will also act as frontline, but with a focus on using the Care Connectors as a resource for transitioning clients back home or the community. The Thrive Group will be the sole implementer on the interactive referral system linking the 110 community support services. McMaster University's Gilbrea Centre for Studies in Aging will be integral in the research and collating the statistics and indicators. The backbone function of this isolation project is the Hamilton Council on Aging, who will be responsible for putting the city-wide reduced social isolation action plan together and ensuring that all other organizations are on track in regards to timelines and success.

The overall objectives of the Hamilton Seniors Isolation Reduction Impact Plan are to fill a critical services gap for isolated seniors as they transition from hospital to home or the community, improve and coordinate current support, and decrease social isolation of seniors by connecting them to community services and ensuring connections are anchored and sustained. The underlying goal throughout is to reduce Emergency Department visits, and reduce the rates of re-admissions.

The projected impact of this plan for year one is to have 435 seniors across Hamilton reached and successfully connected to family, friends, support systems, or others by either a Peer Connector in the neighbourhoods, or a Care Connector in the hospitals. By year three, the projection is to reach 2,234 seniors city-wide. These projections mean that by the end of the three-year project, the target is to reach 20% of the senior population city-wide.

The organizations are currently in only the launch stage of the project, but SJHC will ensure to update everyone along the way with the statistics and stories of what all of the seven organizations in Hamilton are doing to prevent the isolation of seniors, and collaborate together to find a solution.



Minister Duclos speaking with attendees at the press conference launch for the project

ANNUAL REPORT TO THE COMMUNITY



Each year SJHC produces a Report to the Community in June that is posted on our website and printed for distribution. This report is our opportunity to share some of the exciting work we have accomplished over the previous year and share plans for the upcoming year.

The theme for this year's Annual Report to the Community is integration and collaboration. We highlight our work in the Integrated Comprehensive Care program in collaboration with St. Joseph's Healthcare Hamilton, our adoption of iPads in the Visiting Nursing Program in our Home Care Services division, and how the Collaborative Care Model and the Safety at Home programs align with the Home First philosophy adopted by the Hamilton Niagara Haldimand Brant Local Health Integration Network.

Take a look at the annual report online at www.stjosephshomecare.ca/news-events, on our Facebook page (@StJosephsHomeCare) or on LinkedIn. If you would like a paper copy of the report please contact Natasha Voogd at extension 2225 or nvoogd@stjhc.ca.

HEAT & HUMIDITY: DANGEROUS COMBINATION

Environment Canada has forecast a hotter and more humid summer than we experienced in the last couple of years, which means that we all need to pay closer attention to the potential dangers and increased risks associated with heat and humidity.

Canadian meteorologists measure the combination of relative humidity, surface pressure and air temperature to come up with a description of how hot weather feels like to the average person, called the humidity index (or humidex for short). Our bodies are always trying to keep a consistent temperature (about 37°C). Heat is removed from the body as liquids move to the surface of the skin; evaporation removes perspiration so that more liquid can escape. The humidex is essentially an indication of how well we can cool off. When humidity is high, evaporation is more difficult and the cooling process is less effective, increasing our risk of suffering from heat stroke and severe dehydration.

People suffer heat-induced illness when their bodies are unable to compensate and properly cool themselves. Symptoms of heat-induced illness include heat stroke, heat exhaustion, heat cramps (muscle cramps), heat edema (swelling of hands, feet and ankles), and heat rash.



The risks of heat-related illnesses are higher in older adults; infants and young children; people with chronic illnesses (such as breathing difficulties, heart conditions, or psychiatric illnesses); people who work or exercise in the heat; people who are homeless; and people who live alone. Obesity, dehydration, fever or infection, sunburn, and alcohol use also increase peoples' risk from extreme heat. Populations most at risk for heat-induced illness and death during extreme heat are people who are confined to bed, or have reduced ability for self-care

HEAT-INDUCED ILLNESSES – KNOW THE SIGNS

Even short periods of high temperatures can cause serious health problems. Here are some warning signs to look for that can indicate you need a break from the heat:

Heat Stroke

Heat stroke occurs when the body is unable to regulate its temperature. The body's temperature rises rapidly, the sweating mechanism fails, and the body is unable to cool down. Body temperature may rise to 106°F or higher within 10 to 15 minutes.

Heat stroke can be a life-threatening emergency. Seek medical attention if you suspect someone is suffering from heat stroke. Warning signs of heat stroke vary, but can include:

- An extremely high body temperature (above 103°F, orally)
- Red, hot, and dry skin (no sweating)
- Rapid, strong pulse and/or throbbing headache
- Confusion, dizziness and/or nausea
- Unconsciousness

If you or someone else is experiencing any of these signs:

- Get the victim to a shady area.
- Cool the victim rapidly using whatever methods you can: immerse the victim in a tub of cool water; place the person in a cool shower; spray the victim with cool water; or if the humidity is low, wrap the victim in a cool, wet sheet and fan him or her vigorously.
- Monitor body temperature, and continue cooling efforts until the body temperature drops to 101-102°F.
- Do not give the victim fluids to drink.



Heat Exhaustion

Heat exhaustion is a milder form of heat-induced illness that can develop after several days of exposure to high temperatures and inadequate or unbalanced replacement of fluids.

Warning signs of heat exhaustion include:

- Heavy sweating
- Paleness
- Muscle cramps
- Tiredness, weakness and/or dizziness
- Headache and/ or fainting
- Nausea or vomiting

The skin may be cool and moist, the pulse rate will be fast and weak, and breathing will be fast and shallow.

Help the victim to cool off. Effective cooling measures include:

- Cool, non-alcoholic beverages
- Rest
- Cool shower, bath, or sponge bath
- An air-conditioned environment
- Lightweight clothing

If heat exhaustion is untreated, it may progress to heat stroke. Seek medical attention if symptoms worsen or last longer than one hour and seek immediate medical attention if symptoms are severe or if the victim has heart problems or high blood pressure.

Heat Cramps

Heat cramps are muscle pains or spasms—usually in the abdomen, arms, or legs—that usually affect people who sweat a lot during strenuous activity. Sweating depletes the body's salt and moisture and the low salt level in the muscles may cause heat cramps.

People who have heart problems or are on a low-sodium diet should seek medical attention for heat cramps.

Reduce the effects of heat cramps by:

- Stopping all activity, and sit in a cool place.
- Drinking clear juice or a sports beverage.
- Do not return to strenuous activity for a few hours after the cramps subside.
- Seek medical attention if it does not subside in one hour.

Dehydration

Dehydration occurs when the loss of body fluids exceeds the amount that is taken in.

To prevent dehydration, make sure you have water on hand at all times if you are outside or in a warm environment. Water is best, but other fluids count toward your daily intake goal of 8



cups a day: fruit juice, coffee, tea, etc.

Too often people suffering from dehydration ignore or neglect their condition, but it has serious short- and long-term effects, so prevent dehydration before it occurs and take steps immediately if you notice signs of dehydration:

- Muscle cramps
- Dry, warm skin and/or dry mouth
- Low blood pressure
- Low urine volumes and concentrated urine
- Water retention—edema, swelling
- Fatigue, dizziness or weakness
- Impeded short term memory or focus level and irritability
- Headache

Sunburn

Sunburn is the term for red, sometimes swollen and painful skin caused by overexposure to ultraviolet (UV) rays from the sun. Sunburn can vary from mild to severe and will depend on the person's skin type and the amount of exposure to the sun. Severe sunburns may require medical attention.

To treat a sunburn:

- Apply cold compresses or immerse the sunburned area in cool water
- Apply moisturizer, gel or lotion containing aloe vera, or hydrocortisone cream to the affected areas. Do not use salve, butter or ointments
- Do not break blisters
- Avoid repeated sun exposure

Heat Rash

Heat rash is a skin irritation caused by excessive sweating during hot, humid weather and looks like a red cluster of pimples or small blisters most often on the neck and upper chest, in the groin, under the breasts, and in elbow creases. It can occur at any age but is most common in young children

Treating heat rash is simple: move the individual to a cooler, less humid environment and keep the affected area dry.

STAYING SAFE IN THE HEAT - CONSIDER THIS...

To protect your health when temperatures are extremely high, remember to plan ahead, stay hydrated, keep cool, and use common sense.

Prepare for the heat

Tune in regularly to local weather forecasts and alerts so you know when you will need to take extra care.

Take care of yourself and others. Arrange for regular visits to check on family members, neighbours and friends during very hot days. Visiting is best because visitors can help identify signs of heat-induced illness that could be missed over the phone.

If you have an air conditioner, make sure it works properly before the hot weather starts. Otherwise, find an air-conditioned spot close by where you can cool off for a few hours during very hot days to help you cope with the heat better.

Stay hydrated

During hot weather you will need to increase your fluid intake. While this is especially the case when you are more physically active, you will need to stay hydrated regardless of your activity level.

Drink plenty of cool liquids, especially water, before you feel thirsty. Don't wait until you're thirsty to drink. Remind yourself to drink water by carrying a water bottle or leaving a glass by the sink. Flavouring water with fruit slices may make it more appealing.

Eat more fruits and vegetables as they have high water content.

If your doctor generally limits the amount of fluid you drink or has you on water pills, ask how much you should drink while the weather is hot.

Avoid drinking liquids that contain alcohol, or large amounts of sugar as these actually cause you to lose more body fluid. Also avoid very cold drinks – they can cause stomach cramps.



Keep Cool at Home

Stay indoors in an air-conditioned place if at all possible. Use a fan to help you stay cool and aim the air flow in your direction. Block the sun by closing awnings, curtains or blinds during the day. If safe, open your windows at night to let cooler air into your home.

Avoid using your stove and oven as much as possible to maintain a cooler temperature in your home. Refrain from eating hot or spicy foods and heavy meals — they add heat to your body.

If your home is extremely hot, take a break from the heat by spending a few hours in a cool place, like a shopping centre, grocery store, or public library.



Wear appropriate clothing and sunscreen

Choose lightweight, light-colored, loose-fitting clothing made from natural fibres and use a sunscreen with a high-SPF (sun protection factor) to avoid sunburns, which aside from causing pain and damaging your skin, affects your body's ability to cool itself and causes a loss of body fluids. Continue to reapply sunscreen as recommended.

Avoid exposure outdoors

Limit the amount of time you spend in the sun when its power is at its peak, between 10 a.m. and 4 p.m. and never leave people or pets in your care alone in closed vehicles or direct sunlight.

Pace Yourself

If you are not accustomed to working or exercising in a hot environment, start slowly and pick up the pace gradually. If exertion in the heat makes your heart pound and leaves you gasping for breath, STOP all activity, get into a cool area and rest.

SIMPLE WAYS TO REDUCE FOOD WASTE

Canada has some important steps to take when it comes to managing food waste.

At the same time, 800,000 people across the country depend on food banks for their meals, \$27 billion worth of food ends up in the garbage each year. What is worse is that half of this food waste is happening at a household level. On average, Canadian households spend \$1,500 on wasted food each year.

Be portion savvy

Calculate your portion sizes before going shopping so you don't buy more food than you and/or your family will eat.

Make friends with your freezer

You might have cooked a large batch (and some foods lend themselves to large batch cooking). Freeze portions of your large batch cooking immediately to enjoy at a later date.

Plan ahead

Plan your menu in advance so you only buy the food you plan on preparing. Organize your refrigerator so that the oldest items are at the front and ready to be used first.

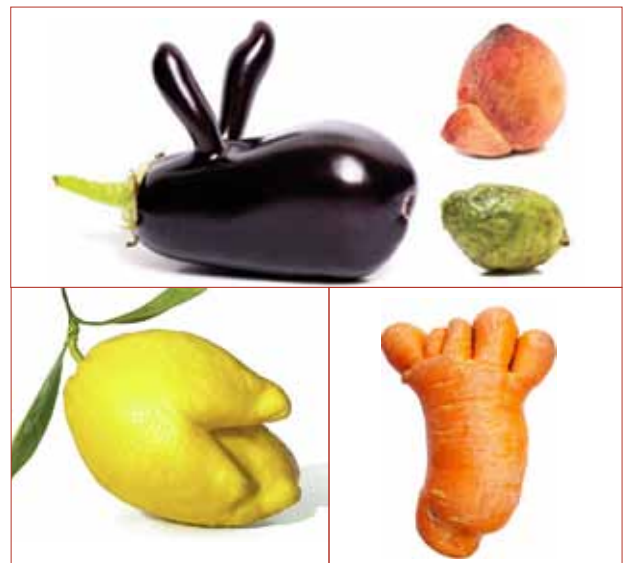
Get creative

Use familiar ingredients in a different way. Do you have mushy bananas? Try making banana bread or a smoothie, or freeze them for later use.

Don't be fooled by aesthetics

Do you throw out an apple when it has a couple of bruises? What about bananas with spots?

Much food waste would be avoided if we didn't hold fruits and vegetables to a standard of perfect appearance. A misshapen fruit or vegetable tastes exactly the same as a perfectly shaped one. This problem could also save you some money; some grocery chains (in particular, the Loblaw Company stores) offer a discount on "ugly" fruits and vegetables.



SJHC CLIENT RECEIVES VOLUNTEER AWARD



Ms. Claudette Joseph was recognized with the **Diversity and Cultural Award** at the 2016 City of Hamilton Municipal Senior of the Year event held on June 14, 2016 at Michelangelos. The award recognized Ms. Joseph's work as founder of the Trinidad and Tobago Association of Hamilton and her volunteer work with the Hamilton Council on Aging in the Improving Access Program, that helps connect seniors from diverse backgrounds with community support services.

Ms. Joseph is a client of St. Joseph's Home Care in the Neighbourhood Model program, where she has volunteered for many years. She is always baking for the program's coffee hour and was essential in organizing the orders and distribution of the Good Food Boxes in the building.

To celebrate this important recognition and all Ms. Joseph does for her community, her neighbours held a BBQ in her honour on Wednesday, July 6.

In the pictures:

Ms. Claudette Joseph with staff from the Neighbourhood Model program (above) and receiving the Diversity and Cultural Award (below)



WELCOME ABOARD!

NAME	PROGRAM AREA
Yanisleidy Acea, RN	Visiting Nursing
Marianne Amodeo, Social Worker	Marketed Services
Lina Atehortua, RN	ICCP (KW)
Susan Baker, RN	ICCP (KW)
Aurelia Balanay, Dietary Aide	Wellington Terrace
Mary Ballantyne, RN	ICCP
Alex Bindi, Server	First Place Food Services
Zenda Bugtai, PSW	Marketed Services
Corrina Caddle, PSW	Collaborative Care
Gladys Daka, RN	Visiting Nursing
Andrea DiPaola, RN	ICCP
Candia Fletcher, RPN	ICCP
Pamela Fulton, RN	Visiting Nursing
Chyanne Garneau, Program Assistant	Visiting Nursing
Erin Grainger, RN	ICCP (KW)
Robin-Lea Greenland, PSW	Marketed Services
Mary Harris, PSW	ICCP
Felicia Henry, Program Assistance	Visiting Nursing
Amanda Jong, RPN	ICCP

NAME	PROGRAM AREA
April Kazemir, PSW	Marketed Services
Faten Khella, RPN	Visiting Nursing
Merylyn Lungayan, PSW	Collaborative Care
Rebecca MacDonald, RPN	ICCP (KW)
Tanya McKinney, RPN	Visiting Nursing
Marianne Meyer, PSW	ICCP
Jennifer Noel, Program Assistant	Visiting Nursing
Diana Ough, PSW	Marketed Services
Henry Paderon, RN	Visiting Nursing
Billie Page, PSW	ICCP
Gagandeep Purba, RPN	Visiting Nursing
Arminda Rapi, RPN	Visiting Nursing
Cereline Sandi, HSW	Neighbourhood Model
Maureen Springer, Server	First Place Food Services
Lisa Terrana, Program Assistant	Visiting Nursing
Deny Thomas, RN	ICCP
Sayda Valle, PSW	Park Street
Natasha Voogd, Executive Assistant and Communications Lead	Corporate
Debbie Woodhouse, Recreational Assistant	First Place
Falan Zakoor, RN	Visiting Nursing

CELEBRATING SENIORS MONTH IN JUNE

St. Joseph's Home Care participated in the Seniors Month kick-off event hosted by the City of Hamilton at Sarcoa Restaurant on May 30. What a beautiful day it was to celebrate seniors!



Over the course of the month, we published helpful articles for seniors on our Facebook page. Topics ranged from healthy aging and remaining social, to elder abuse warning signs and prevention, to common fraud schemes aimed at older adults, to ways to improve memory and keeping your mind sharp as you age. Take a look at the articles on the St. Joseph's Home Care Facebook page.

TAKE BETTER MOBILE PHOTOS

Hold your hand steady

It can be difficult for your mobile to focus on the image if your hand is shaking. Steady your hand by holding your wrist with your free hand.

Pay attention to the light source

If shooting inanimate objects (like food), try to shoot toward the light or with the light coming from the side. If you are shooting indoors and your subject is an individual or group that is in front of the light, faces may appear darker in the photo. Only use a flash when absolutely necessary; it can drain colour from your image, not to mention cause the dreaded "red-eye". Outdoors, you will have to pay close attention to shadows, especially on sunny days.

Back off the zoom and give the subject room

Moving back from your subject helps provide context. For example, if you are shooting a flower, showing a little grass or other flowers around it can improve the photo composition.

Consider changing the angle

Think about whether changing the angle might improve the photo. For example, if you are taking a photo of a sandwich from above, all you will likely capture is the bread, so it makes more sense to take a horizontal view.

This applies to people too. Don't forget that some people prefer to have their "better side" photographed.

Break the rules

Don't follow the tips above too strictly. There are many right ways to take photos and breaking the rules will allow you to experiment freely.



PATIENTS FIRST ACT

In the last issue of SJHC Corner, we brought you news about the Patients First Discussion Paper released in December 2015 by the Ministry of Health and Long-Term Care (MOHLTC) that outlined the Ministry's plan to increase responsibilities for the

Local Health Integration Networks (LHINs) and the consultation process that was initiated by the LHINs with representatives from across the healthcare sector.

In early June, Dr. Eric Hoskins, Minister of Health and Long-Term Care tabled the Patients First Act.

Designed to make it easier for patients to receive better care and access services more easily, regardless of

where they live in the province, the proposed changes affect the Local Health System Integration Act, 2006 (LHSIA) and the Home Care and Community Services Act, 1994.

Under this new legislation, the LHINs would have additional responsibilities for advancing locally integrated patient-centred healthcare delivery. The LHINs would be subdivided into sub-regions to allow for improved service planning and care coordination, including better transitions of clients across the continuum of care; the LHINs would also be responsible for the implementation of the MOHLTC's 10-point plan outlined in Patients First: A Roadmap to Strengthen Home and Community Care; and existing Community Care Access Centres (CCACs) would be dismantled with oversight for home and community care being transferred to the LHINs.

The role of frontline home and community care providers has been acknowledged by the MOHLTC often. The Ministry plans to continue consultations with the health sector throughout the legislative process. The need to ensure continuity, service to clients and minimize disruption during this time change is vital.

The changes to the structure of the healthcare system is significant and the Ministry has committed to rolling out implementation of these amendments, including the dismantling of the CCACs, in waves depending on readiness of the 14 LHINs across the province. By doing this, the MOHLTC will be attempting to minimize disruption to service through an orderly transition that will be seamless for clients. The target date for the changes to be in place is April 2017.



RESPECTFUL WORKPLACES – PART 3

In previous issues of SJHC Corner, we discussed the principles of a respectful workplace, as well as the causes of workplace conflict and some communications tactics to promote positive interactions. To continue with this theme of how to communicate so that we can have more positive interactions with our colleagues.

Five Principles of Respectful Communication

1. We are all responsible for our own verbal and non-verbal communication

In verbal (spoken) communication, avoid words that are insulting, sarcasm, and generalizations (e.g. "You always..." or "You never...") and unauthentic statements. Pay attention to your vocalizations, tone and gestures, and silence.

In written communication, use icons, emoticons, punctuation, and upper vs. lower case carefully and considerately. It is often difficult to convey tone in written communications, like emails, which leads to misunderstandings due to "misreading" the tone intended.

2. Each of us is responsible for our communications in different mediums; this includes conversations, texts, emails, posts on social media sites, etc.
3. Good communication occurs within positive climates. To maintain a positive communication climate:
 - Maintain open respectful communication
 - Accept others
 - Respect diversity in relationships and work habits
 - Don't permit inappropriate behaviour to go unaddressed

4. In order to ensure a respectful climate, everyone must respect the rights of others.

We all have 5 rights:

- The right to the use of our time
- The right to the use of our property
- The right to the use of our bodies
- The right to be treated with respect
- The right to express ourselves

No one, in exercising their rights, has the right to violate the rights of another; for example, one person may need to express frustration or anger, but should not do this by violating another's right to be treated with respect.

5. Manage conflict with grace and respect
 - Go to the source first. Don't triangulate. Support others to deal directly with the source of conflict. Don't act as another's agent.
 - Don't use email, letters, print media, or social media to manage conflict. Meet face to face.
 - Listen without judgment
 - Seek areas of agreement and possible compromise



PROTECT YOURSELF FROM FRAUD

Did you know that fraud is the number one crime against older Canadians? But it's not just older adults who fall victim to con artists; anyone can be a victim of fraud.

Fraud can take many shapes. The best way to protect yourself from being a victim of fraud is to know the most common types of fraud schemes and be skeptical of unsolicited offers.

Successful frauds share common elements. The offenders gain trust and confidence through their charisma, often creating the impression that the individual has been "chosen" or is "lucky" to receive the offer, and that such offers are rare. They encourage their victims to make an immediate decision limiting the opportunity for consultation with others.

The Royal Canadian Mounted Police website has a comprehensive list of scams on their website, but the most common types of fraud include:

Identity theft happens when someone uses vital personal information, such as your name, address, date of birth, social insurance number, and mother's maiden name without your permission to access your financial accounts, open new bank accounts, transfer funds, apply for credit, etc. Avoid identity theft by not sharing your PIN, social insurance number or your computer or online passwords with anyone. Cancel lost or stolen credit and/or debit cards and report any discrepancies in spending. Always take your receipts; and shred receipts, paper bills, expired contracts, etc. before throwing them out.

Charity scams involve someone who asks for a donation on behalf of their charitable organization, only the organization is bogus. The most successful charity scams use a charity name that is similar to a legitimate organization or event, so arrange to have your contribution delivered to a legitimate charity of choice directly.

Health, funeral and insurance fraud happen when con artists offer funeral, medical or insurance services, often over the phone and/or by mail. Only deal with reputable providers and be careful when purchasing insurance.

Prize scams involve informing the victim that he or she could win or has already won a valuable prize (trip, lottery, inheritance, car, etc.). To claim the prize you are required to send in payment to cover expenses (like taxes, shipping or processing fees). Avoid falling victim to this scam by never sending money in advance to retrieve a prize.

Business or investment scams happen when someone proposes a once in a lifetime business or investment opportunity promising high returns, but requires a registration or initial investment payment. Remember that no legitimate investment firm will guarantee a rate of return or require a registration or investment fee upfront.



Confidence games involve a variety of deceitful scenarios to get cash from an individual. These can take a number of forms, like helping a family member in financial or legal trouble or a call supposedly from your bank branch about a problem. Verify the situation directly and never send money through money wire services to persons you do not know personally.

Home and automobile repair scams involve pressuring a person to make "emergency" repairs to their home (like roof repairs, driveway resurfacing, waterproofing, or pest control) or car that require an advance deposit and an immediate decision. Demand a few days to get a second opinion and consult the Ministry of Consumer and Business Services or the Better Business Bureau to verify the company is legitimate.

Protect yourself and others from fraud

Be alert. Be especially suspicious of unsolicited offers. Never turn over large amounts of cash to anyone – no matter how good the deal sounds and do not give out personal or banking information over the telephone unless you have initiated the call and you know you are dealing with a reputable business.

Take your time. Do not sign an agreement or contract without giving yourself time to think it over. Consider getting a second opinion from a trusted friend, family member or legal representative. If a salesperson insists that an offer is "time limited" and you must decide in that moment, it is probably better not to sign.

Ask questions. Read the fine print and ask about anything you do not understand. Get more than one opinion as to how necessary work is and get a written quotation. Call family members or service providers directly to verify information you get over the phone, by email or at your front door.

Report scams. If you are the victim of a scam, report it to the police, even if you are embarrassed or feel the amount of money is not very significant. While you might not be able to get your money back, you can help stop the fraudster from scamming others.

MAKE A PLAN

In the event of an emergency, having a plan that you and your family have reviewed and rehearsed can help you respond quickly to the situation in a way that ensures everyone's safety. Thinking about what you would do in different situations and preparing a plan with every member of your family is the first step to being prepared.

Create your own or use this article as a template to start collecting your emergency information.

YOUR PLAN SHOULD INCLUDE:

Family Information

Your plan should outline personal information about you and each of your family members, including:

- Insurance information: _____
- Allergies: _____
- Medical conditions and/or surgeries: _____

- Medications: _____
- Family medical history: _____
- Recent vaccinations: _____
- Health screenings: _____
- Emergency contacts: _____
- Accommodation needs: _____

Make copies of important documents like birth and marriage certificates, passports, driver's licenses, licences, wills, land deeds and insurance. Take photos of family members in case a lost persons record is created. Keep them in a safe place, both inside and outside your home: keep a copy in your emergency kit or in a safety deposit box, give a copy to friends or family who live out of town, and upload to a secure online location (like a cloud).

Family Communications Plan

During an emergency, it may be easier to reach someone using text messaging or social media or to make a long-distance call than to call someone locally (due to network damage or a jammed system). Discuss with your family which way(s) you will try to get in touch with each other.

Choose an out-of-town contact who lives far enough away that he or she is unlikely to be affected by the same event so that you and your loved ones can call or text to connect and share information. If you are new to Canada or have recently moved to a new area, make arrangements through friends, cultural associations or community organizations.

Make sure everyone in your family, as well as your two key

contacts, knows how to use text messaging. Always keep your communications devices fully charged.

- Out-of-town contact: _____
- Other family members: _____
- Friends/neighbours: _____

Evacuation Plan

In case you are asked to evacuate your home, or your area, select two safe locations you could go to. One should be nearby, such as a local library or community centre. The other should be farther away, outside your neighbourhood, in case the emergency affects a large area.

- Safe meeting place 1 (near home):

- Safe meeting place 2 (outside my neighbourhood):

You should also plan how you would travel to a safe location in case of an evacuation. Have an emergency survival kit ready to take with you (check the Fall 2016 SJHC Corner for information on what to include in your emergency kit).

- My evacuation route:

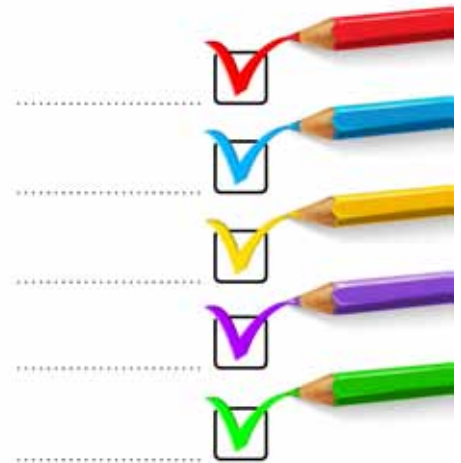
- Health information:

- Medication and medical equipment:

- Location of my emergency survival kit:

- Location and contact information for pet assistance:

In case of an evacuation, remember that pets are not allowed in some public shelters or hotels. Take steps to identify pet-friendly hotels or pet boarding facilities in your area and further away from home.



Planning for Special Needs

If you or anyone in your family has special needs, be sure your plan reflects them. For instance, for someone with special medical needs or a medical condition, you may want to include in your plan a medical history, copies of prescriptions, information for key health-care contacts.

It is also a good idea to teach others about any special needs, such as how to use medical equipment or administer medicine. Establish a personal support network of friends, relatives, health-care providers, co-workers and neighbours who understand your special needs.

REVIEW OF SAFETY IN YOUR HOME:

Evacuation Route

Review safe exits in your home. Make sure everyone in your family knows how to safely exit your home—by a main exit and an alternate one. Be sure to consider your living situation; for instance, if you live in a high-rise building and have special needs, talk to your building manager or neighbours to make special arrangements.

Emergency Numbers

Keep a listing of emergency numbers at the ready and make sure all members of your family know where they are. Here are some numbers you should include in this list:

- 9-1-1
- Police: _____
- Fire: _____
- Family Doctor: _____
- Telehealth: _____
- Health Clinic: _____
- Local hospital(s): _____
- Poison control: _____
- Insurance contact: _____
- Home security system: _____
- Utility companies:
 - Gas: _____
 - Hydro: _____
 - Water: _____
 - Cable: _____

Call 9-1-1 (where available) to report a fire, a crime or to save a life and remember that 9-1-1 is only for emergencies. When calling emergency services, let them know your location (both the exact street address and nearest intersection). For non-emergency calls, use the regular phone numbers for police, fire and other health services and include the information in your emergency plan. Teach children when and how to dial 9-1-1 and other key numbers they may need to call.

Fire and Other Safety

Follow general household safety rules for smoke alarms, carbon monoxide detectors and fire extinguishers. More information on how many to have, where to place them, how often to check and replace them can be obtained from our local fire department.

Utility Shut-off Procedure

Every adult in your family, as well as older children, should know how to turn off main utilities—water, electricity, and gas. In certain emergencies, authorities will ask that these be turned off for safety reasons. If needed, write out instructions and post somewhere visible.

Everyone should also know where the floor drain is located and ensure that it is not obstructed, in case of flooding.



EMERGENCY PLANNING BEYOND YOUR HOME:

Inquire at your workplace and your children's school(s) and/or daycare about their emergency plans. Find out about their evacuation plans and how they will contact family in an emergency. Make sure you keep all emergency contact information up to date at work and at your children's school(s) and/or daycare.

You may not be able to pick up your children from school yourself when there is an emergency situation and you may need to send someone in your place. Find out what type of authorization the school or daycare requires to release your children to a designated person ahead of time. Make sure the school or daycare has updated contact information for parents, caregivers and designated persons.

YOUR PLAN IS READY, NOW WHAT?

Once your plan is ready, discuss your plan with other family and friends so they know what you would do in an emergency.

Keep your plan in an easy to reach location. A good place is with your emergency kit. Make sure everyone in your family knows where to find it.

Review your plan once a year with the entire family and update it to reflect any changes you want to make. Refresh your survival kit at the same time, with new food, water and other supplies.

HQO REPORTS ON CAREGIVER DISTRESS

The Negative Impact that Home Care Can Have on Unpaid Caregivers

The home care service communities are aware of the burnout and negative impacts that can occur as a result of being an unpaid caregiver to a long-stay home care patient with little physical and emotional support. Recently, Health Quality Ontario (HQO) confirmed the notions around caregiver burnout when they released their annual Measuring Up 2015 report, which evaluates how Ontario's health system is performing. The report indicates that there is double the distress on caregivers such as family members, friends, and neighbours who are unpaid caregivers of long-stay home care patients. Out of 97 per cent of long-stay home care patients who also received care from an unpaid caregiver in 2013/14, one third of caregivers experienced distress, anger, or depression relating to their caregiver role, which had doubled from 2009/10.

HQO highlights that the underlying issue is growth in the elder population who are increasingly affected by cognitive impairment, functional disability, and frail health. Publically funded home care relies heavily on the caregivers since

there are normally long periods of time where a professional caregiver is not available. Therefore, the more hours of care that family, friends, and/or neighbours have to provide, the more likely they will deteriorate in their overall happiness within their working lives, personal relationships, social activities, and leisure activities. In general, the more elderly, unwell, or cognitively impaired the patient is the more distressed the caregiver.

The plan moving forward to improve the quality of health for caregivers:

- Patients First: A Roadmap to Strengthen Home and Community Care: 10-step plan to improve integration of home and community care
- Ontario's Community Care Access Centres are implementing initiatives for family-centred care that acknowledges the role of caregivers, and identify those experiencing burnout before they become distressed
- The Change Foundation is partnering with the Ontario Caregiver Coalition to examine the relationship between interactions family caregivers have with the Ontario health system, as part of their strategic plan for 2015-2020
- Registered Nurses Association of Ontario and St. Elizabeth developed guidelines and programs that recognize the role of caregivers for home care patients
- HQO is working with the Ministry of Health and Long-Term Care, as well as other partners, to create the Levels of Care Framework, where the goal is to improve consistency and quality of care in Ontario and provide information of care to patients
- HQO and the Local Health Integration Networks are working together to develop indications for home and community care that can be used to guide performance improvement and accountability in home care

For more information, you may visit www.hqontario.ca for the full report.



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