Community Healthcaring KW Operations

February 21, 2024

Locations

44 Francis Street S.

310 King Street East

Community Healthcaring
Kitchener-Waterloo

Model of Health & Wellbeing

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Kitchener-Waterloo

Mission, Vision & Values

VISION

Healthy clients and communities

MISSION

We provide accessible health care and supports to those facing barriers in our communities

VALUE STATEMENTS

- We respect and welcome our clients to a safe and accessible space.
- Staff are supported and empowered to deliver high quality service.
- We collaborate with community partners to provide care that is innovative and evidence-informed.
- We champion allyship and advocacy in response to oppression.

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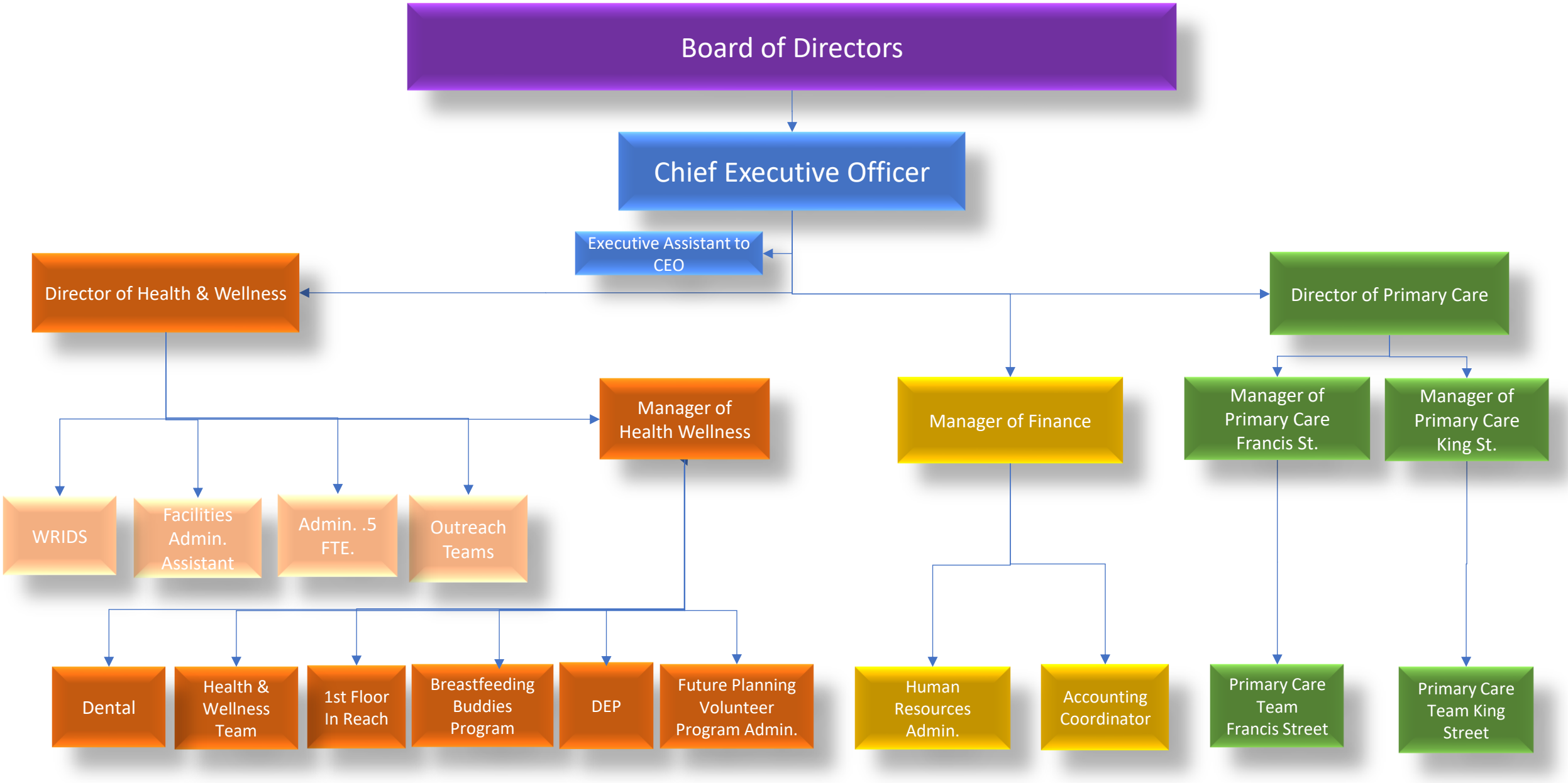

As of February 2024

Staffing

- 90 staff members
- committed to the CHC model
- Mirror cultural diversity and language skills of patient population
- Nurse Practitioners, Registered Nurses, Registered Practical Nurses, dental assistant, Social Workers, allied health (dietician, chiropody)and administrative staff members
- Salaried physicians and dentists

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Our Partners

- Langs, Woolwich, & Guelph CHC's
- Region of Waterloo
- KW4 OHT
- Grand River Hospital
- St. Mary's Hospital

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Our Funders

- Ontario Health West/Ministry of Health
- Breast Feeding Buddies – Lyle Hallman Foundation/ Region of Waterloo Public Health
- Ontario Seniors Dental Program – Region of Waterloo
- Diabetes Education Program – Langs (Transfer Payment Agency)

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Primary Care

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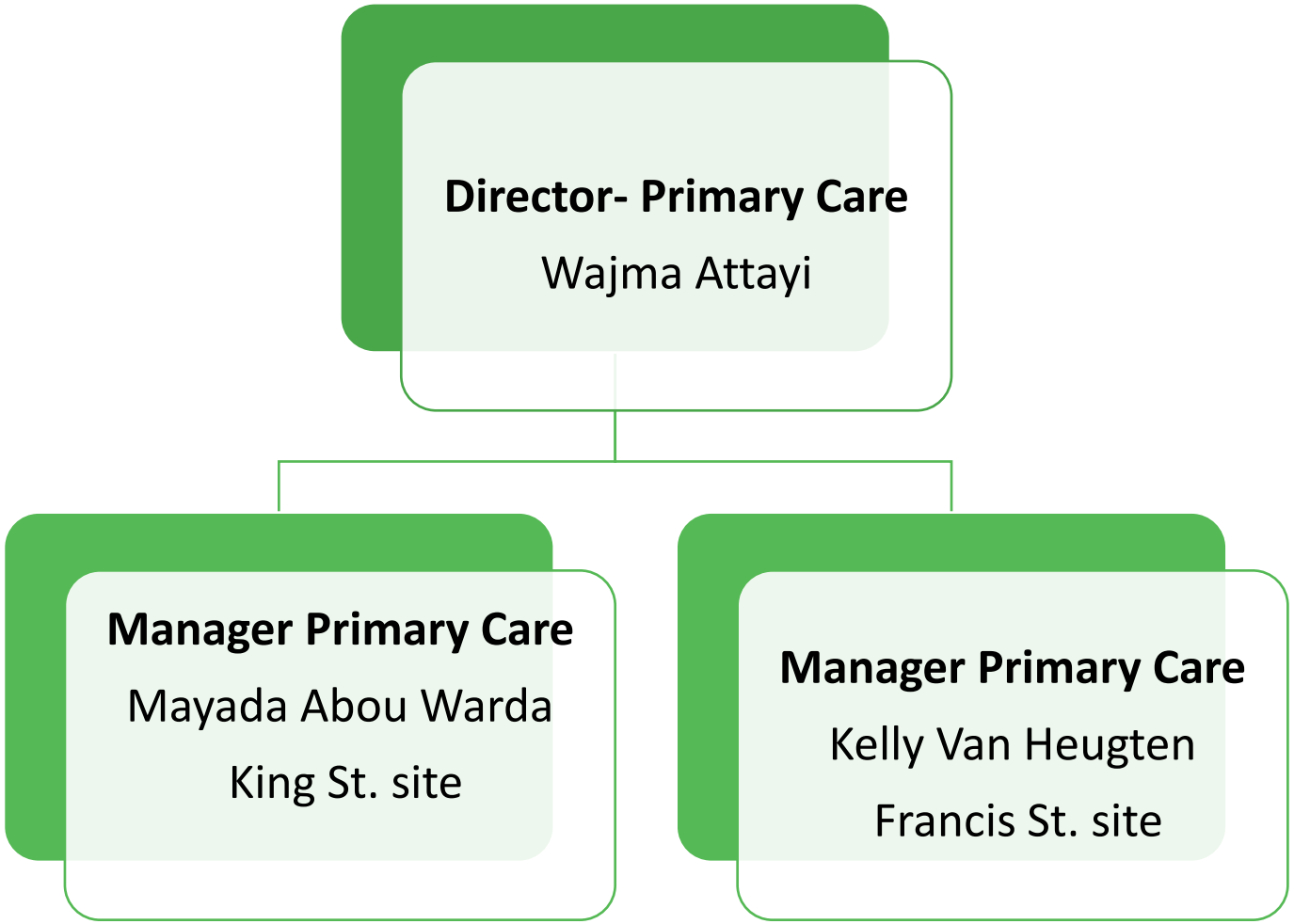
Primary Care Team Leadership Overview



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Primary Care

- Community Healthcaring Kitchener-Waterloo, serves **8420** primary care clients across our Francis Street and King Street sites (2022/2023)
- Intake continues to remain on hold at both sites. New referrals are triaged for urgency and accepted on a case-by-case basis.
- Both sites manage lengthy waitlists for access to services.
- Due to health human resources destabilization and the lengthy process of re-stabilization, we have clients receiving primary care services that are unattached to providers, challenging continuity in care.

We Serve

- People who are precariously housed.
- People experiencing mental health and addictions challenges and have often been turned away from other primary care offices.
- Refugees and Newcomers; those with language barriers
- Marginalized populations.
- Those with low income and food insecurity.
- Those who lack formal education or have limited opportunity.
- Those from the 2SLGBQT+ community.

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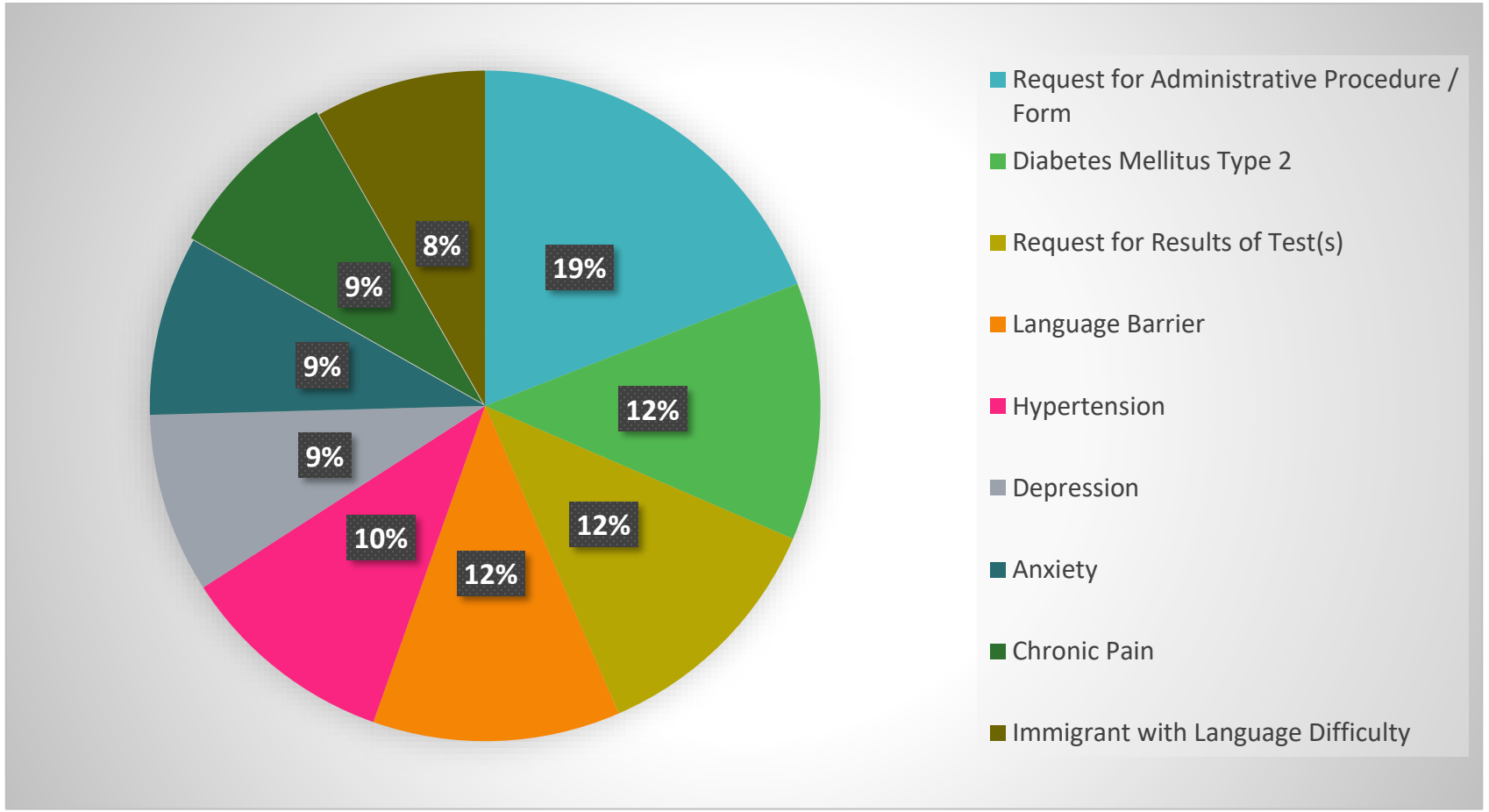
Top 10 issues addressed by Primary care



Total clients served: 23,156

Total service provider interactions, both sites: 44,171

Total client support interactions: 2,221

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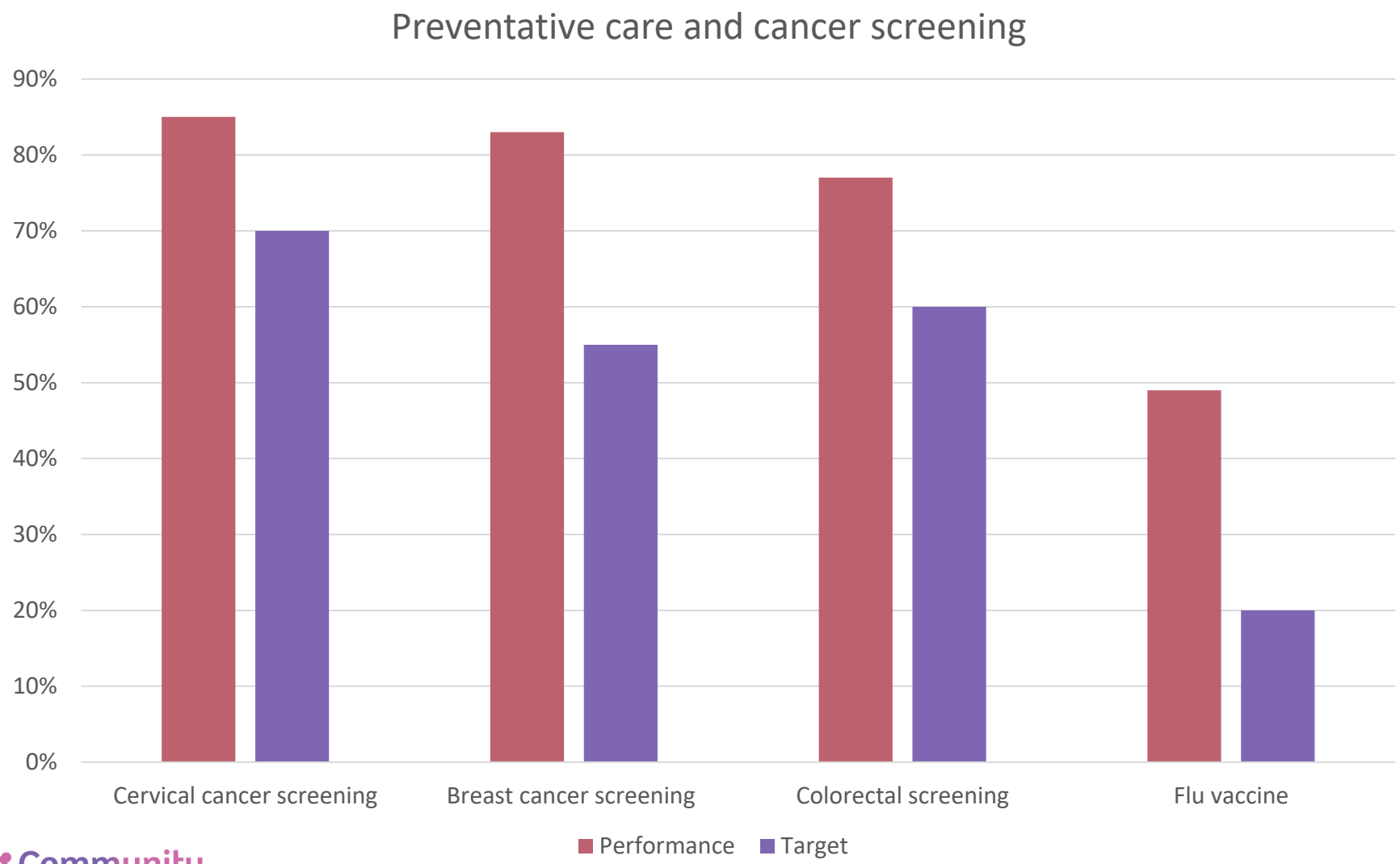
MSAA



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Primary Care Team – Francis Street

Healthcare providers

- 2 Fulltime physicians = 2.0 FTE
- Locum Physicians
- 4 NPs = 3.8 FTE
- 4 RPNs= 4.0 FTE

Allied Health

- 1 Counsellor = 1.0 FTE
- 1 Chiropodist = 1.0 FTE*
- 1 Registered Dietician = 0.2 FTE*
- 1 ODSP Worker = 1.0 FTE*
- 2 Pharmacists (contract)*
- 1 Respiratory Therapist = 0.2 FTE through partnership with SMGH

Support Staff

- 2 Medical Secretaries= 2.0 FTE
- 1 Client Coordinator= 1.0 FTE
- 1 Client Navigator= 1.0 FTE
- 1 Clinic Assistant= 1.0 FTE

Students

- Chiropody (Fall 2023)
- NP (Spring 2024)
- Registered Dietician (Fall 2023)
- University Co-op (Winter 2024)

* Shared with King St.

Refugee Health

- Community Healthcaring Kitchener Waterloo, King St. site serves **4919** refugees (Aug 2023)
- More than 1500 refugees on our wait list
- Refugees and Newcomers are a priority population for KW4 OHT
- Three main types of refugees:
  - Refugee claimants
  - Government Assisted refugees (GARs)
  - Privately sponsored refugees (PSRs)

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Clients - Demographics

- Patients identify 85 different countries of origin and over 63 different first languages, the most common of which are Arabic, Tigrinya, Spanish, Somali, and Turkish
- 46.1% of patients are under 20, compared to 23% of Ontario's population
- 3.2% is 65+, compared to 16.7% of Ontario's population
- Half of our female population (49.7%) is of child-bearing age

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Refugee Health, Primary Care Team

Healthcare providers

- 2 permanent physicians = 2.0 FTE
- 3 Locum Family Physicians = 1.1 FTE
- 1 Locum Pediatrician= 0.1 FTE
- 1 Locum Family Obstetrician= 0.1 FTE
- 2 Nurse Practitioners= 1.3 FTE
- 1 Physician assistant = 1.0 FTE
- 1 RN= 0.6 FTE
- 2 RPNs= 1.6 FTE

Support Staff

- 3 Receptionists= 3.0 FTE
- 2 Medical secretaries= 2.0 FTE
- 1 Patient care coordinator= 1.0 FTE
- 2 Clinical assistants= 1.8 FTE
- 1 Interpreter= 1.0 FTE

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Refugee Health, Primary Care Team

Onsite Services

- Primary Care
- Counselling
- Prenatal Care by Family Ob
- Pediatric Consultations
- Midwifery onsite and home visits
- Settlement services
- System navigation
- Breastfeeding buddies
- DEP

Community Partners

- Kitchener Waterloo Multicultural Centre
- Region of Waterloo
- Camino
- Home and Community Care Support services
- SHORE
- Centre For Family Medicine

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Health and Wellness

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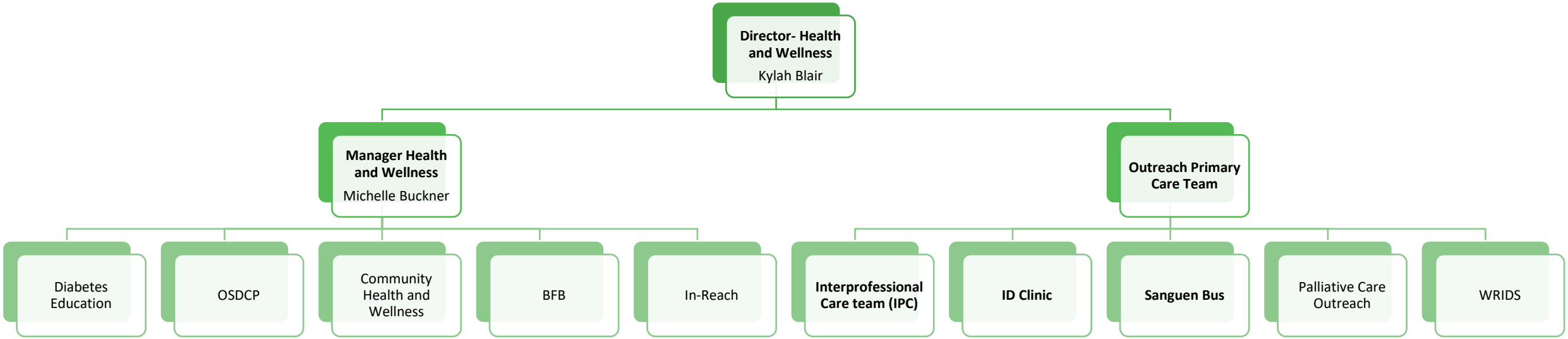
Primary Care and Outreach Teams Leadership Overview



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Outreach Primary Care Team

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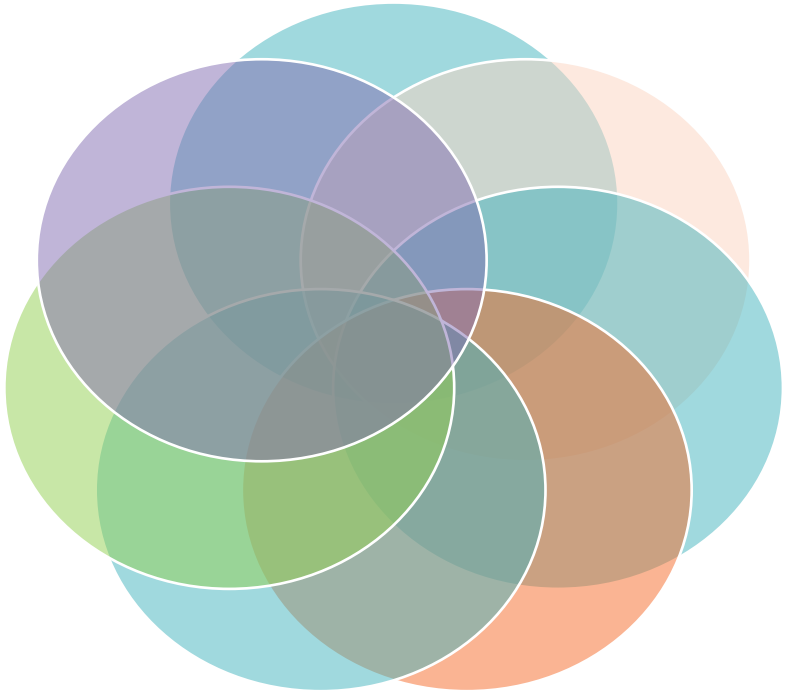
Our Outreach team is part of the Inner-City Health Alliance (ICHA) and works closely with:

Centre for Family Medicine

The Working Centre (TWC)



Ray of Hope

TWC Specialized Outreach Services

Sanguen Health Centre

House of Friendship

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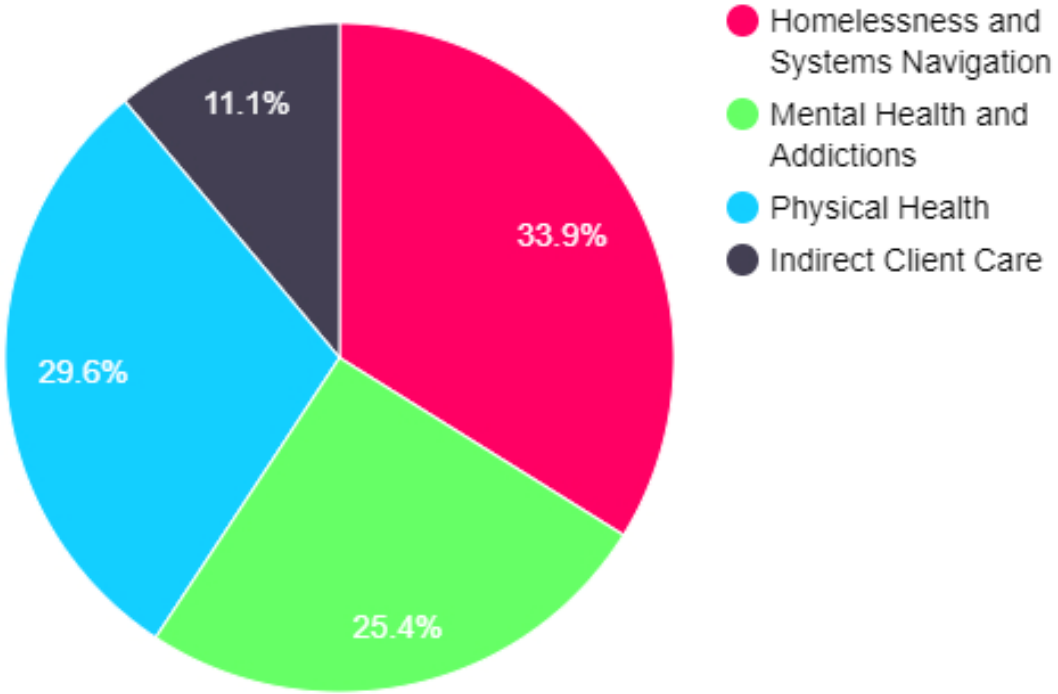
Outreach Primary Care Issues Addressed

Issues Encountered by Category



Highest Incident of Issues by Category

Homelessness
Wounds/ Soft Tissue Infections
Opioid Use Disorder
Prescription Renewal

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Waterloo Integrated Drug Strategy

0.8 Health Planner WRIDS

+ The WRIDS presents an opportunity to address problematic substance use across multiple sectors, amongst various populations and locales, throughout Waterloo Region.

  The WRIDS VISION is to make Waterloo Region safer and healthier.

  The WRIDS MISSION is to prevent, reduce or eliminate problematic substance use and its consequences.

  The WRIDS PURPOSE is to:

  - Lead the collaborative in facilitating the implementation of recommendations contained within the **Waterloo Region Integrated Drugs Strategy** (2012).
  - Develop an overall implementation plan and process to assist in identifying recommendations that will be key priorities for implementation
  - Establish Coordinating Committees to address and support the implementing of recommendations

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Community Partnership Programs

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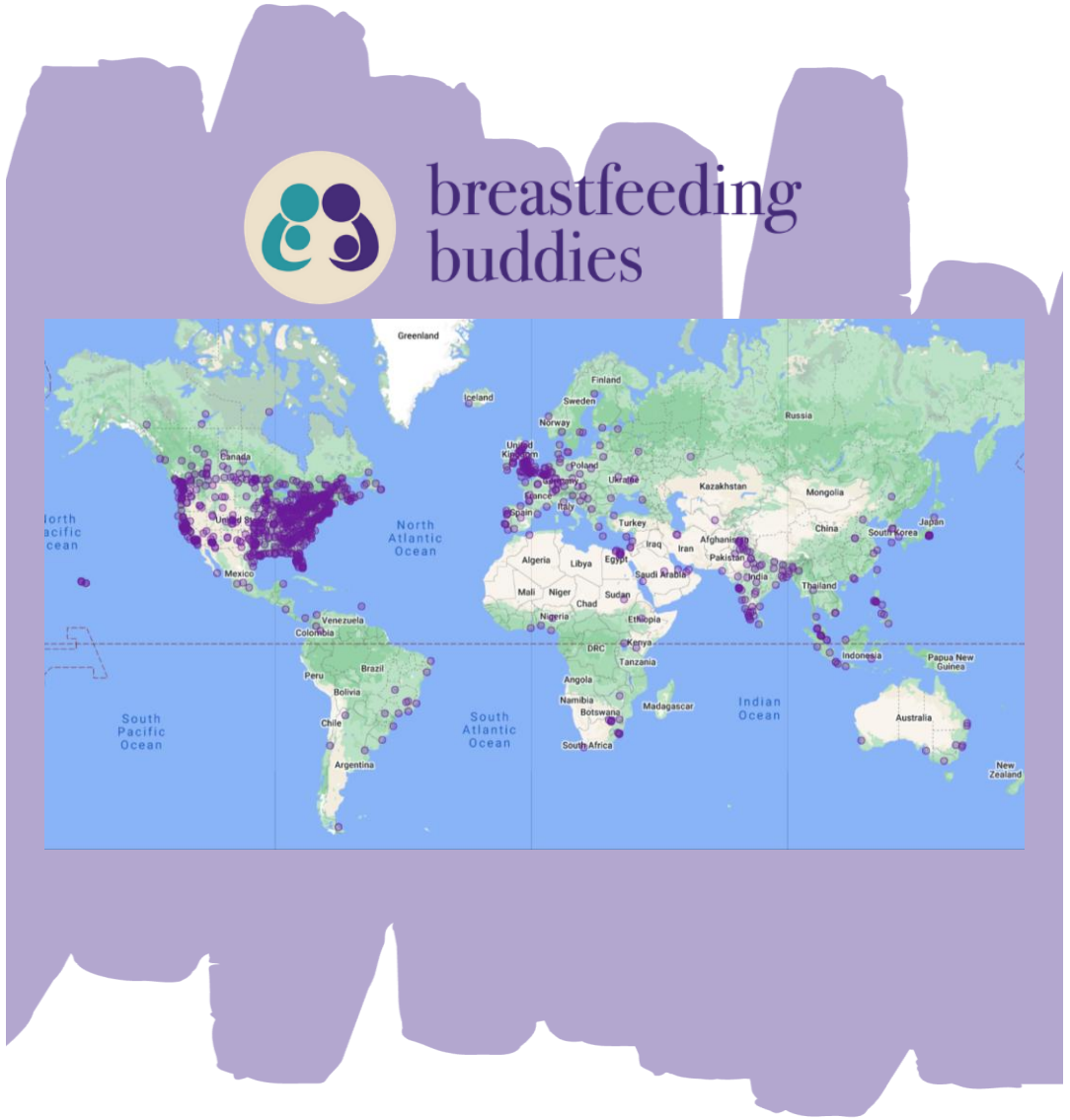
Breastfeeding Buddies

- A volunteer peer-based breastfeeding support program
- Prenatal Workshops, parenting sessions and 1:1 buddy matches promote breastfeeding/chestfeeding by helping all families meet their breastfeeding goals.
- Cambridge Memorial Hospital bedside lactation support program



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Community Health & Wellness

Health & Wellness Programs May 2022

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- In-person groups have limited space available due to public safety measures.
- Please call or email to register in advance. COVID-19 Screening will take place prior to all in-person groups and masks are mandatory
- Some workshops will take place virtually via ZOOM. We are happy to support you in setting up and learning how to use ZOOM.

If you are in need of a device to connect to any of these groups or KDCHC services, please contact us.

Monday	Tuesday	Wednesday	Thursday	Friday
2	3 Chronic Disease Self Management 1:30pm (Virtual)	4 Walking Group 10:00am; Pointillism 6:00pm	5 City of Kitchener: Leisure Access Pass Info Session 10:00am	6 Now Playing 10:00am; Intro to Fitness 1:30pm
9 Alzheimer's Society: Healthy Brains 1:00pm	10 Chronic Disease Self Management 1:30pm (Virtual)	11 Walking Group 10:00am; Mindfulness Circle 6:00pm	12 Garden Club 10:00am	13 Intro to Fitness 1:30pm
16 CARIZON Newcomer Refugee Seniors Garden Club 10:00am; Eat Well Spend Less 1:00pm	17	18 Walking Group 10:00am	19 Sun Safety 10:00am (Virtual)	20 Intro to Fitness 1:30pm
23 KDCHC/Sanctuary Closed for Statutory Holiday	24	25 Walking Group 10:00am; Mindfulness Circle 6:00pm	26 Garden Club 10:00am; Emotions 101: Anger 1:30pm	27 Now Playing 10:00am; Intro to Fitness 1:30pm
30 Eat Well Spend Less 1:00pm	31 Living Life to the Full 10:30am			

If you have diabetes or are at risk, let us help you connect to the Diabetes Program for 1:1 appointments or virtual classes. See the back of this page for details.

Scan to sign up today! →

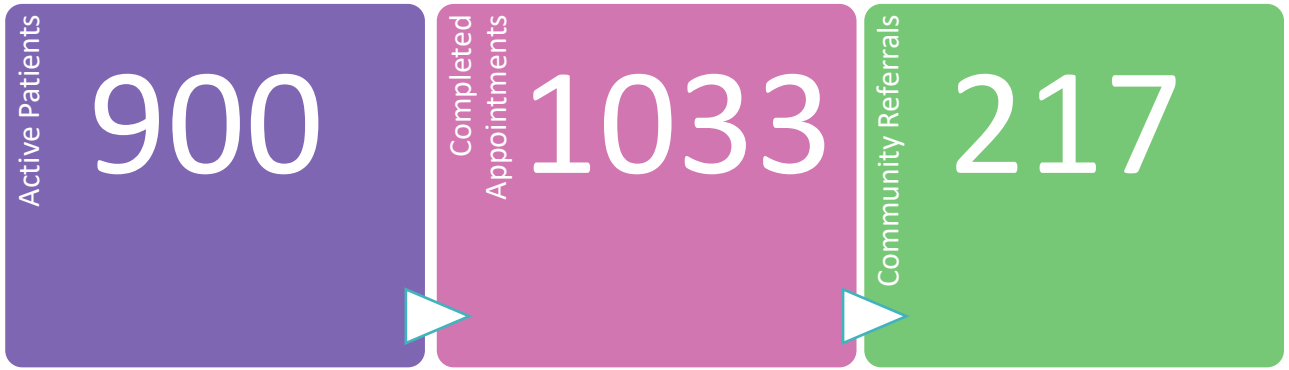
Address
44 Francis Street, South
Kitchener
Phone: 519-745-4404

For more information or to sign up, please contact the Community Health & Wellness Team at
519-745-4404 ext. 234
OR healthwellness@kdchc.org

- **Group Programs-** providing opportunities for clients to build healthy lifestyle skills and increase social connections
- **Tablet lending library-** promotes digital equity
- 1:1 Support supporting clients who are isolated through friendly check in program
- **Food Program-** addresses food insecurity and hidden hunger in a dignified "pay what you can" market model through community food donations
- **Eat Well Spend Less-** is a community program dedicated to promoting healthy cooking, meal preparation, nutrition education, food safety, food access, and budget-friendly cooking practices.
- **Social Prescribing-** non-clinical supports prescribed by clinical team to address isolation

Ontario Seniors Dental Care Program & Oral Health Peer Worker

- Dental and Hygienist services to low-income seniors (including dentures)
- Health promotion and outreach support to promote oral health and connect people to PH funded services



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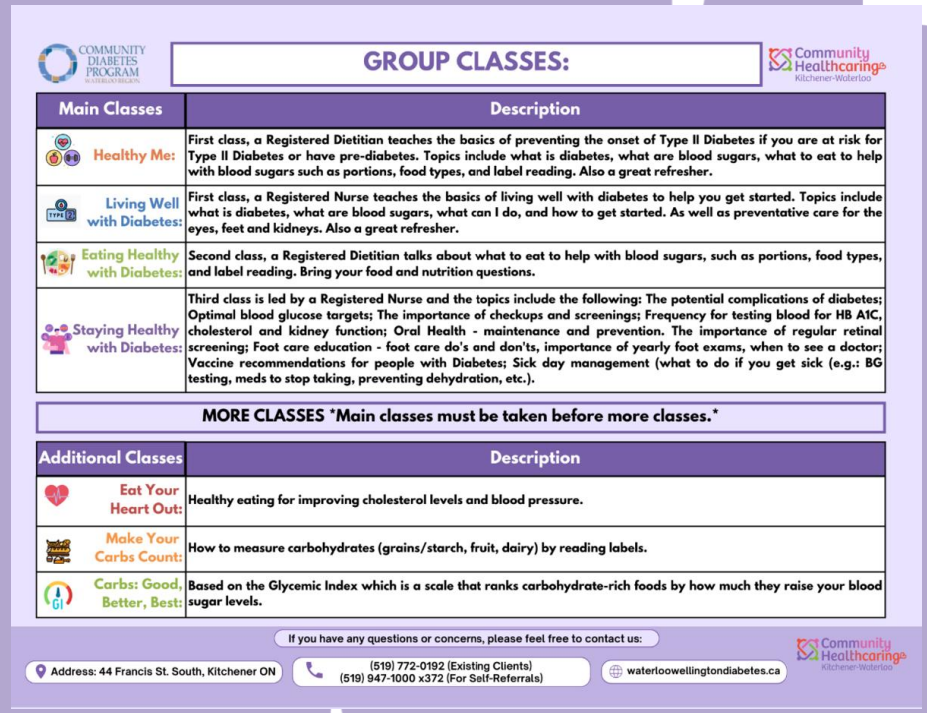
Diabetes Education Program

- The Diabetes Education Program at Community Healthcaring Kitchener-Waterloo is one of several sites in the Waterloo Region.
- We receive referrals from the Waterloo Wellington Diabetes Central Intake Program. We are a client centered and education driven program.
- We encourage clients to lead their own health journey and are committed to providing high quality care to those who are impacted by the social influences on health.



COMMUNITY DIABETES PROGRAM WATERLOO REGION

GROUP CLASSES:

Community Healthcaring Kitchener-Waterloo

Main Classes	Description
Healthy Me:	First class, a Registered Dietitian teaches the basics of preventing the onset of Type II Diabetes if you are at risk for Type II Diabetes or have pre-diabetes. Topics include what is diabetes, what are blood sugars, what to eat to help with blood sugars such as portions, food types, and label reading. Also a great refresher.
Living Well with Diabetes:	First class, a Registered Nurse teaches the basics of living well with diabetes to help you get started. Topics include what is diabetes, what are blood sugars, what can I do, and how to get started. As well as preventative care for the eyes, feet and kidneys. Also a great refresher.
Eating Healthy with Diabetes:	Second class, a Registered Dietitian talks about what to eat to help with blood sugars, such as portions, food types, and label reading. Bring your food and nutrition questions.
Staying Healthy with Diabetes:	Third class is led by a Registered Nurse and the topics include the following: The potential complications of diabetes; Optimal blood glucose targets; The importance of checkups and screenings; Frequency for testing blood for HB A1C, cholesterol and kidney function; Oral Health - maintenance and prevention. The importance of regular retinal screening; Foot care education - foot care do's and don'ts, importance of yearly foot exams, when to see a doctor; Vaccine recommendations for people with Diabetes; Sick day management (what to do if you get sick (e.g.: BG testing, meds to stop taking, preventing dehydration, etc.).

MORE CLASSES *Main classes must be taken before more classes.*

Additional Classes	Description
Eat Your Heart Out:	Healthy eating for improving cholesterol levels and blood pressure.
Make Your Carbs Count:	How to measure carbohydrates (grains/starch, fruit, dairy) by reading labels.
Carbs: Good, Better, Best:	Based on the Glycemic Index which is a scale that ranks carbohydrate-rich foods by how much they raise your blood sugar levels.

If you have any questions or concerns, please feel free to contact us:

Address: 44 Francis St. South, Kitchener ON

(519) 772-0192 (Existing Clients)
(519) 947-1000 x372 (For Self-Referrals)

waterloowellingtondiabetes.ca

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Thank you, Questions?

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Navigating Frontline Healthcare Challenges: Some successful strategies

February 21, 2024

Frontline Challenges

- "VUCA" Environment
  - Volatility, Uncertainty, Complexity, Ambiguity
- Demand does not equal supply
  - Inability to hire new roles to meet current demands due to lack of/consistent funding
- Workload and Burnout
- Patient demographic and their needs changing
- Vicarious trauma and compassion fatigue

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Refugee Health Integrated Care Team (RH ICT)

Goals:

+ To bring team-based care to non-team based primary care providers
+ Transition 300-500 refugees to permanent primary care

Successes to Celebrate:

- Transitioned over 1200 refugees to permanent primary care in KW
- NPLC, and 13 FHO physicians have taken on clients
- **Program still ongoing**

[To read more, click here]

Centre for Family Medicine Family Health Team
Community Healthcaring Kitchener-Waterloo
camino Wellbeing + Mental Health
Reception House Waterloo Region
YMCA Newcomer Information Centre
KW4 Ontario Health Team
HOME AND COMMUNITY CARE SUPPORT SERVICES
SERVICES DE SOUTIEN À DOMICILE ET EN MILIEU COMMUNAUTAIRE

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What is the RAP Clinic

Goals:

+ Provide rapid in-person primary care team access for unattached patients who are at risk of hospital admission and/or are post-discharge and at risk of readmission.
+ Create stronger and more direct connections between primary care and specialty care
+ Build a more patient-centered community care model for complex patients (by coordinating and integrating services for a more seamless experience)

Referral Criteria

- **Client DOES NOT have a primary care provider** (A MUST and the main qualifying factor)
- Lives in one of the **4 priority neighbourhoods** (postal codes N2H, N2G, N2C or N2M) AND/OR
- **Had a recent ER visit**

What RAP Clinic offers
• On-Demand/Live Interpretation Services
• Immediately engage in preventative screening
• Better positioned to ensure follow-up and continuity of care
• Offer holistic comprehensive care and NOT limited to care acute or episodic
• Referral to other interdisciplinary services within the CHC model

KW4 ONTARIO HEALTH TEAM

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