



Community-centred primary health care



Ontario Federation of Community  
Mental Health and Addiction Programs

*Sharing Resources, Exploring Common Issues*



OCSA

Ontario Community  
Support Association

*United in our commitment to care*

## **Community Health & Social Services Infrastructure Fund Proposal**

***Bringing Services Closer to People;  
Creating Jobs***

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The OCSA, the AOHC and the OFCMHAP  
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## Background

The opportunity to significantly improve the quality and accessibility of services provided to Ontarians in their communities is behind the work now underway to establish a **Community Health & Social Services Infrastructure Fund (CHSSIF)** in response to the economic challenges facing Ontario.

The Association of Ontario Health Centres (AOHC), the Ontario Community Support Association (OCSA) and the Ontario Federation of Community Mental Health and Addiction Programs (OFCMHAP) look forward to working with the Ontario Government on this critical project.

## Who We Are

### Association of Ontario Health Centres (AOHC)



AOHC provides leadership for the promotion, advocacy, education and development of Community Health Centres (CHCs), Aboriginal Health Access Centres (AHACs) and Community Family Health Teams (CFHTs). Our vision is for all Ontarians to have access to not-for-profit, community-governed, interprofessional primary health care.

[www.aohc.org](http://www.aohc.org)

### Ontario Community Support Association (OCSA)



OCSA is a provincial association that supports, promotes and represents the common goal of its members, which are providers of community based not-for-profit health and social services, so that they are better able to support people to live at home in their own communities.

[www.ocsa.on.ca](http://www.ocsa.on.ca)

### Ontario Federation of Community Mental Health and Addiction Programs (OFCMHAP)



OFCMHAP bring together community mental health and addiction services in the province of Ontario to help members provide effective, high-quality services through information sharing, education, advocacy and united effort.

[www.ofcmhap.on.ca](http://www.ofcmhap.on.ca)

## The Opportunity

The **Community Health & Social Services Infrastructure Fund** presents an unprecedented and historic opportunity to put a down payment on Ontario's future community health & social services' infrastructure to meet growing demand, while creating jobs for workers in small and mid-sized construction and related companies. These initiatives will stimulate the economy in rural and urban communities throughout Ontario.

Under the sponsorship of a Community Health Centre, a Community Support Service Agency, a Community Mental Health & Addiction Programs provider or an Aboriginal Health Access Centre, we envision under one roof: community health centres, supportive housing, community support services for seniors and persons with disabilities, community mental health & addiction services, wellness centres, refugee and immigrant services, Aboriginal Health Access Centres – the possibilities are endless and will be determined by communities across the province. Not only will this better serve the needs of Ontarians, especially those facing barriers to accessing service, it also advances the integration goals of the Government and Local Health Integration Networks (LHINs) by enhancing community partnerships and reducing the overhead costs for local service providers.

This **Infrastructure Fund** would also implement many of the recommendations in the Government of Ontario's *Breaking the Poverty Cycle* report, including the Oral Health Plan, the *Roots of Youth Violence Report*, support to vulnerable populations, and other Ontario Government priorities like the Aging at Home Strategy, quality family health care, and the enhancement of access to mental health and addiction services in local communities.

## The Goal

The goal is to bring together health providers, mental health and addiction programs and community services that support the transformation and integration of community health and social services to better serve Ontarians in their own communities, and to help meet the economic goals of the province.

The **Community Health & Social Services Infrastructure Fund (CHSSIF)** will build on current and planned upgrading of existing over-burdened buildings and already approved new Community Health Centres (CHCs), CHC satellites, and Aboriginal Health Access Centres (AHACs) with enhanced capacity to co-locate with other community partners.

## What is Being Proposed

In 2004 and 2005, the Government announced the development of 21 new CHCs and 27 new CHC Satellites. Of these, 8 new CHCs and 17 new satellites are already well into construction and would not benefit from the proposed Infrastructure Fund, however, the remaining 13 new CHCs and 10 Satellites would be in a position to utilize additional capital dollars under the Infrastructure Fund to move from a stand alone CHC to a social service and community health hub.

In addition, there are integration partnerships/projects in the Community Support Services and Community and Mental Health & Addictions Programs and existing Community Health Centres that could be fast-tracked if capital investment through this Fund were made available.

### Fifty Communities/Projects: \$150.4 Million

Projects	Cost Per Project	Total Cost for all Sites
<b>23 New Community Health Centres and CHC satellites</b>		
1. Additional capital required to transform these already approved centres into community hubs	\$1.85 million	\$42.55 million
2. Community engagement/ planning/partnership development	\$50,000	\$1.2 million
<b>27 New Projects</b> <i>with leads by Community Support Services, Community Mental Health &amp; Addictions providers, or existing Community Health Centres</i>		
1. New capital funding	\$3.85 million	\$103.95 million
2. Community engagement/ planning/partnership development	\$100,000	\$2.7 million
<b>TOTAL</b>		<b>\$150.4 million</b>

## Proposed Infrastructure and Project Outline

### Which Organization would be Eligible to Sponsor an Infrastructure Project

Sponsoring agency must be an existing Community Support Service Agency, a current or newly approved Community Health Centre, an Aboriginal Health Access Centre, or Community Mental Health & Addictions Program provider in Ontario that receives funding from the Ontario Government and/or the Local Health Integration Networks (LHINs).

There must be at least two partners in addition to the sponsor working together to integrate services in the community. The partners can be either health or social/community services, immigrant and refugee services, or a non-governmental organization, e.g., United Way agencies.

### The Infrastructure Development Fund: \$3 Million

Building on experience and best practices from the recent expansion of Community Health Centres and Community Family Health Teams, it is recommended that there be a centralized Infrastructure Development Fund of \$3 million managed by a Steering Committee led by the Chief Executive Officers/Executive Directors of the three sponsoring provincial Associations that would oversee the development of each of the 50 project plans and designs to ensure timely, cost effective and efficient implementation.

This centralized project development fund would reduce duplication and ensure the hiring of the expertise needed across the province for successful project start-ups - expertise in partnership development, collaborative practice-enhancing site design, business case development, conceptual and functional planning. A key function of this fund would be to expedite the project plans and government approvals to help meet the key objective of creating jobs by getting construction under way as soon as possible.

### Eligibility Criteria for Priority Infrastructure Projects

Eligible infrastructure proposals will score high in the following categories:

1. **Stimulation of the Economy:** In order to have the most positive impact on the economy of Ontario, it is recommended that Projects be “shovel ready” in 6 months with project completion within 2 years. Projects must commit to contracting with local small to medium construction and related companies, hence creating and maintaining jobs in the community.
2. **Hardest Hit Communities/Under-serviced Areas:** priority should go to hardest hit communities regarding unemployment rates, poverty in the community, or serious gaps in social services and community health services.
3. **Capacity to Advance LHIN Goals for Integration:** Priority should go to projects that propose a high degree of partnership development for the purposes of service delivery efficiencies. This would also include the sharing

or consolidation of 'back-office' functions such as Human Resources, Finance and Information Technology, resulting in additional cost savings.

4. **Green and Accessible Design:** the capital infrastructure projects must commit to Green-friendly energy efficiency design, as well as meeting the Government's new Accessibility Design Standards for Persons with Disabilities.
5. **Contribute to the Progress of Critical Ontario Government Priorities:** in addition to acting as a stimulus to help meet the economic goals of the Government of Ontario, the Investment Fund would significantly contribute to the progress on other critical Government priorities, that move forward any of the following:
  - ✍ The Government's anti-poverty initiative (*Breaking the Cycle*), including the Oral Health Plan
  - ✍ The Health System Wait-Times Strategy
  - ✍ Improved access to quality family health care
  - ✍ The need to support vulnerable populations, including those with mental health and addiction issues, new immigrants and refugees, homeless persons or persons with disabilities by increasing access to housing, employment support and community spaces
  - ✍ The Aging at Home Strategy to allow seniors to age in place
  - ✍ The Diabetes Strategy
  - ✍ The recommendations of the Government-commissioned *Roots of Violence* report

### **Priority Programs and Services**

- ✍ Culturally appropriate mental health counseling/support
- ✍ Health promotion information/education on healthy lifestyles
- ✍ Supports for youth related to education/employment and life skills
- ✍ Outreach and supports for seniors and persons with disabilities, including supportive housing
- ✍ Supports for parents, including parenting skills/education
- ✍ Settlement support for immigrants and refugees, in particular, access to employment/training
- ✍ Food security
- ✍ Community arts, culture and recreation
- ✍ Education around drugs/alcohol abuse, including harm reduction
- ✍ Literacy skills for all ages

### **Guiding Principles for Projects**

Projects would provide Integrated and holistic services to vulnerable populations that incorporate quality health and social services and build on existing community partnerships and experiences. The community hubs would be open to all members of the community who wish to use the space, programs and services.

Opportunities would be created for community members to share their knowledge, resources and expertise with others: information resources, linking people to programs, services and organizations inside and outside the hub that can address their needs. Mechanisms would be in place for ongoing community engagement.

Programs and services would be provided to a community's residents in ways that:

- ✍ build synergies and support collaboration across these agencies for more effective and efficient service delivery;
- ✍ provide community members who come to the hub with seamless access to a range of programs and services that they need and want; and
- ✍ ensure that programs and services evolve and change over time in response to changes in the community, so as to ensure the hub continues to be responsive to the needs and aspirations of diverse community members.

## Appendix A

### **Appendix A: Examples Of Current Community Partnerships And Partnerships Currently Under Development**

There are many excellent examples of existing community health & social services hubs in neighbourhoods across Ontario. The 6 examples below are examples of the different configurations that can emerge when communities set their own priorities to meet local demand.

#### **1. The Langs Farm Community Health Centre, Cambridge (existing hub)**

This Centre is located in Cambridge and has a proven track record of being a community partnership model. The organization fulfills its strategic direction of creating “meaningful places, spaces and partnerships” by being co-located with three community partners and works with 15 community partners to provide 18 social, health, recreational, educational and vocational services on site. The centralization of services ensures that residents have access to a wide spectrum of programs and an increased understanding of what is available in the community. In addition to the Community Health Centre, there are counseling services, public health programs, senior’s fitness programs and a pharmacy.

#### **2. Prince Edward County Community Care, Picton (existing hub)**

Prince Edward County Community Care for Seniors office is located in a building that serves as a community hub in the town of Picton, Prince Edward County. Its location makes it ideal to house a number of community services which complement each other in various ways. Clients use services such as the volunteer transportation program offered by Community Care, the Learning Centre to complete Grade 12 equivalency, the Ontario Disability Support Program, (ODSP), vocational services, and the Volunteer Income Tax Program. Building space is also utilized by caregiver support programs and health clinics.

#### **3. The Mel Lloyd Centre, Shelburne (existing hub)**

The Mel Lloyd Centre serves the needs of seniors in the community through programs like County Community Support Services, the Adult Day Program, and the Shelburne Meals on Wheels Program as well as providing facility-based care. Many partners have contributed to make this community hub a success: a Federal/Provincial re-development grant, a Ministry of Health and Long Term Care Primary Health Care Transition fund grant for leasehold improvements, furnishings and equipment for a medical clinic for the Mel Lloyd Family Health Team.

A 22 unit apartment complex that provides supportive housing for persons with physical disabilities and frail elderly persons was a partnership between the Ontario March of Dimes, the County of Dufferin and Strong Start funding through the CMHC/Ontario New Affordable Housing Program Agreement. And, recently Ontario Early Years Centre-Dufferin relocated to the Centre.

#### **4. Bathurst-Finch Community Services, Toronto (planning underway)**

New Heights Community Health Centres (New Heights CHC) provides primary health care, health promotion and community capacity building programs to people living in the CHC's catchment area. The Bathurst-Finch Community Services (BFCS) hub currently in the works would be co-located with the New Heights CHC's Bathurst- Finch satellite office. BFCS would enable community members to get support and advice from a variety of community and social service agencies. These agencies would focus their work in areas such as settlement (for newcomers to Canada), employment, mental health, the arts, and on target populations such as women, youth and seniors. BFCS also enables community members to access space for their own activities and purposes. Among its partners are the Downsview Services to Seniors, Victorian Order of Nurses, Family Services Toronto, Hong Fook Mental Health Association, North York Women's Centre, and Vietnamese Youth & Family Social Services.

#### **5. Community Care Kawartha Lakes (planning underway)**

Community Care Kawartha Lakes (a community support agency) is developing an integrated health/social services model whereby it is converting into an agency which will offer both community support services as well as the primary care services through the Community Health Centre. In addition to the integration of services, dialogue is taking place with the Community Independent Living sector to explore joint tenancy as well as a private sector rehabilitation company for other tenancy in the same building – to make good use of space and co-location for improved client service.

The ability to fund positions using the Community Health Centre and Community Support Service Agency's budgets is a perceived benefit of the integrated model, particularly related to finance, technology and human resources – all these positions will have part of their budget from CSS and the other from the CHC budget, enabling a more effective team.

There are also plans to build a Supportive Housing Project adjacent to the CHC. There is a collaborative arrangement with Community Living, Kawartha Participation Projects, Canadian Mental Health Association (CMHA) and the City for rent supplements for 20 additional units.

#### **6. Hamilton Urban Core Community Health, Hamilton (planning underway)**

The Hamilton Urban Core Community Health Centre is in the heart of Hamilton's inner city, with the 2nd highest poverty rate in the province at 20% and an unemployment rate of 8%. The health centre has plans for an integrated centre that would partner with a primary health care provider, a mental health provider, an addictions service, the Public Health Department to address oral health needs, a community employment and educational institution, the Centre for Immigrant and Refugee Health, inner city women's health and wellness centre, and transitional housing.