



HEALTH STARTS AT HOME

## Community Health Services Integration (CHS) - Durham Cluster Stakeholder Survey #2 - January 2013

This survey is designed to gather feedback from clients and caregivers, staff, board members, community residents and other health care partners to determine whether the proposed DRAFT Integrated Service Delivery Model will improve people's experience in accessing and/or delivering community health services in the Durham Cluster.

**The proposed DRAFT Integrated Service Delivery Model streamlines many of the services delivered by multiple organizations by creating designated service centres within the Durham Cluster through the merger of appropriate agencies, the transfer of some services between like agencies and strengthened partnerships and strategic alliances between community-based providers particularly in the Durham North Zone.**

**It is important to remember that one of the key elements of the model is that community health services such as footcare, hospice services, congregate dining, volunteer visiting, supportive housing and primary care services in community health centres, will continue to be provided to existing clients in existing communities and facilities.**

Your comments are extremely valuable and will guide the team on their next steps.

As you get ready to complete this survey, please take the time to first review **the proposed DRAFT Service Delivery Model** that is posted on the Central East LHIN website.

Additional resource documents, posted on the same page, also include:

- Document #1 - Health Service Provider Overview
- Document #2 - Access to CHS Services in the Central East LHIN Durham Cluster
- Document #3 – Current Service Descriptions

If you have any questions while you are completing this survey, please contact Barry Hyde, Facilitator CHS Integration (Durham Cluster) Integration Planning Team through the LHIN at 1-866-804-5446 or by contacting him directly at (289)200-1062 or [bhyde@tsh.to](mailto:bhyde@tsh.to)

**The deadline for submitting completed surveys is January 31, 2013.**

Thank you for your participation.



## Questions:

### Part 1 – Who are you? (Please check off the appropriate response.)

To help us in our review of the results of this survey, please take a minute to answer the following question to help us determine your perspective.

**1. I am a: (please check the ONE that is most appropriate as you respond to this survey. If you represent more than one category, please fill out another survey.)**

- Client** from one of the ten Community Health Services (CHS) organizations/agencies
- Family member/Caregiver** of a CHS client
- Staff member** from one of the ten CHS organizations
- Volunteer** from one of the ten CHS organizations
- Board member** from one of the ten CHS organizations
- Health service /community service provider** in the **Durham Region cluster** of the Central East LHIN
- Health service/community service provider** in the **North East** (Northumberland County, Peterborough City and County, City of Kawartha Lakes and/or Haliburton County) and/or **Scarborough** clusters of the Central East LHIN
- Health service/community service provider** across **all clusters** of the Central East LHIN
- Health service/community service provider** outside of the Central East LHIN
- Local community resident** not currently receiving CHS services



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## Part 2 – DRAFT Service Delivery Model

The Integration Planning Team has developed a DRAFT Service Delivery Model that **streamlines many of the services delivered by multiple organizations by creating designated service centres within the Durham Cluster through the merger of appropriate agencies, the transfer of some services between like agencies and strengthened partnerships and strategic alliances between community-based providers particularly in the Durham North Zone.**

As you review the proposed DRAFT Service Delivery Model and based on your experience (as indicated above):

2. Do you feel that clients' will have improved ACCESS to Community Health Services if this new model for Community Health Services is implemented?

- Yes
- No
- No opinion

Please use this space for any additional comments.



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**3. Do you feel the ability to DELIVER Community Health Services to clients will be improved by this new model?**

- Yes
- No
- No opinion

Please use this space for any additional comments.

**Part 3 – IMPLEMENTATION**

**4. The Integration Planning Team has identified a number of benefits for clients, their caregivers, agency staff and other stakeholders for each of the service delivery areas in the proposed DRAFT Service Delivery Model. As you review the model, and based on your experience, are there additional benefits that could be realized this model is implemented?**

Please use this space to identify any additional benefits.



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**Part 4 – Additional Comments**

- 5. Do you have any additional comments, concerns or challenges that should be considered as the Integration Planning Team and the Boards of the respective organizations finalize a new Service Delivery Model for Community Health Services in the Durham Cluster?

**Part 5 – Contact Information**

Please note that your submission must include your name and municipal location in order to be considered valid. Data related to the questions asked and answers provided will be collated and shared with the ten organizations to support their work.

**Please be assured that we will NOT be publishing your name, organization, municipality or email address in any record of input/advice collected through this Stakeholder Survey.**

The collection of names and municipalities is for LHIN records only in order to validate any responses and **will not be shared** with any other organization.

Name: \_\_\_\_\_ (required)    Municipality: \_\_\_\_\_ (required)  
 Organization: \_\_\_\_\_ (optional)    Title: \_\_\_\_\_ (optional)  
 Email: \_\_\_\_\_ (optional)    Phone: \_\_\_\_\_ (optional)

**Please return completed surveys to the Central East LHIN by January 31, 2013**

**314 Harwood Avenue South, Suite 204A, Ajax, Ontario L1S 2J1**

**Fax: 905-427-9659    Email: [centraleast@lhins.on.ca](mailto:centraleast@lhins.on.ca)**

**Thank you for your participation. For ongoing updates, please visit the Central East LHIN website [www.centraleastlhin.on.ca](http://www.centraleastlhin.on.ca) and click on “Resource Documents – Integration”**