



# Welcome

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Working to Overcome Client Barriers: Intensive  
Support to Ontario Works Clients

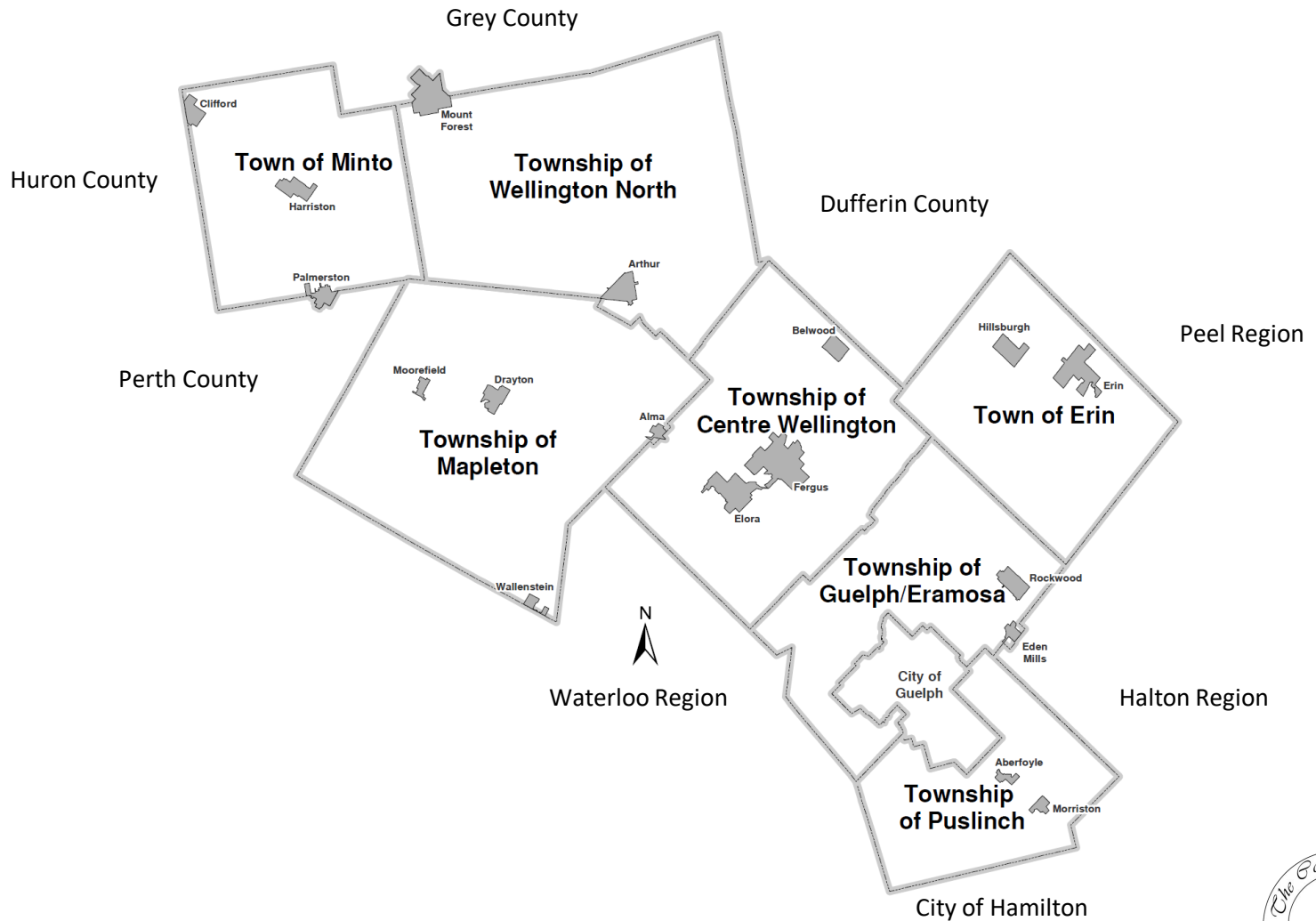
June 13, 2019



## Activity – 10 minutes

- At your tables, introduce yourselves to each other.
- We'd like to know who you are, where you're from and what agency you represent
- Identify 1 thing you'd like to take away from our presentation today
- Have 1 person report back introducing their table, where people are from and what you would like to takeaway

# Who do we serve: The County of Wellington



# Our Caseload Profile

Total caseload: 2012

City of Guelph: 1610

County of Wellington: 402



- April 2019 Operations Performance Report



# Life Skills Team

The Life Skills Team supports Ontario Works clients through an **intensive case management** approach to help them stabilize before exiting to employment, returning to the main caseload or transitioning to ODSP.

- Life Skills Workers (LSW) have smaller caseloads of 45-50 clients to allow for more intensive stabilization focused service
- LSW will assist clients through providing 1:1 supports, referrals to community partners, as well as guidance and support through the ODSP application process



# Life Skills Team Cont.

## Life Skills Workers:

- facilitate service connections with community agencies, including case conferences
- help develop crisis plans
- have greater flexibility around appointment times and where they meet clients
- are active members at community tables around mental health and addiction



# Referral Process

Clients are referred to the Life Skills Team when:

- The client is struggling with mental health, substance use or both
- Mental health and/or addiction are a primary barrier to moving forward
- Client is in crisis and requires intensive supports to help stabilize their current situation
- The client is open to the referral - the referral is voluntary





# Life Skills Outcomes

2018

- Number of clients added to the caseload: 140
- Total client's served: 241
- Total Closures: 101
  - Number of clients transferred to ODSP: 39
  - Number of clients terminated for employment: 11





# Wrap Around Services

## Community Connections:

- Housing First Workers
  - Work with individuals who are:
    - Homeless or at risk of housing
- SOS (Specialized Outreach Services) Workers
  - Work with individuals who are:
    - Disconnected from services
    - Street-involved, homeless or at risk of homelessness
    - CMHA – HERE 24/7
- Homewood Health Centre
- Stonehenge

## Community Involvement:

- Drug Court
- Guelph-Wellington Drug Strategy
- Community Hub Meetings





# Service Prioritization Decision Assistance Tool (SPDAT) Analysis

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TAKING A CLOSER LOOK AT CLIENT BARRIERS

June 2019

# Service Prioritization Decision Assistance Tool (SPDAT)

- The Service Prioritization Decision Assistance Tool (SPDAT) is a widely used, evidence based assessment tool that assesses an individual's acuity. The tool assists with case management planning and guidance to the right services, with functionality in prioritizing individuals towards intervention. The SPDAT assesses conditions within the following domains:
  - **Wellness**
  - **Risks**
  - **Socialization and Daily Functioning**
  - **Housing**



# SPDAT

Overview

Caseload Trends

Mental Health

Physical Health

Abuse and Trauma

Housing and Homelessness

Recommendations for Case Management



# OVERVIEW

- Full Single Adult SPDAT was administered to 92 individuals
- Objective – gain insight into client barriers and challenges to inform service delivery
- Results representative of single adult city caseload (ASI and Life Skill not included)
- Scores are self-reported
- Average length of time on assistance for the sample was 2.7 years
- Time on assistance ranged from 1 month to 13 years.



# SPDAT Participants

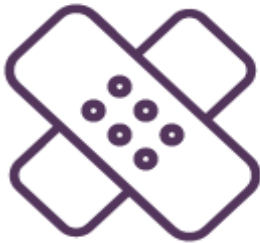
# 46%

On assistance  
for 2+ years



■ Males (42%) ■ Females (58%)

# Caseload Trends



Our clients report poor health—majority have concerns about their mental and physical health



75% have experienced some kind of abuse or trauma and 50% have challenges with daily functioning as a result



50% have experienced homelessness and have challenges maintaining housing



OUR  
CASELOAD  
IS NOT  
UNIQUE



## ACROSS CANADA AND ONTARIO:

The poorest people in Ontario are more likely to have health risks, less access to important health services, multiple chronic conditions, and shorter life expectancy<sup>1</sup>



Low income persons are 4x more likely to report poor or fair health status than are high-income persons<sup>2</sup>



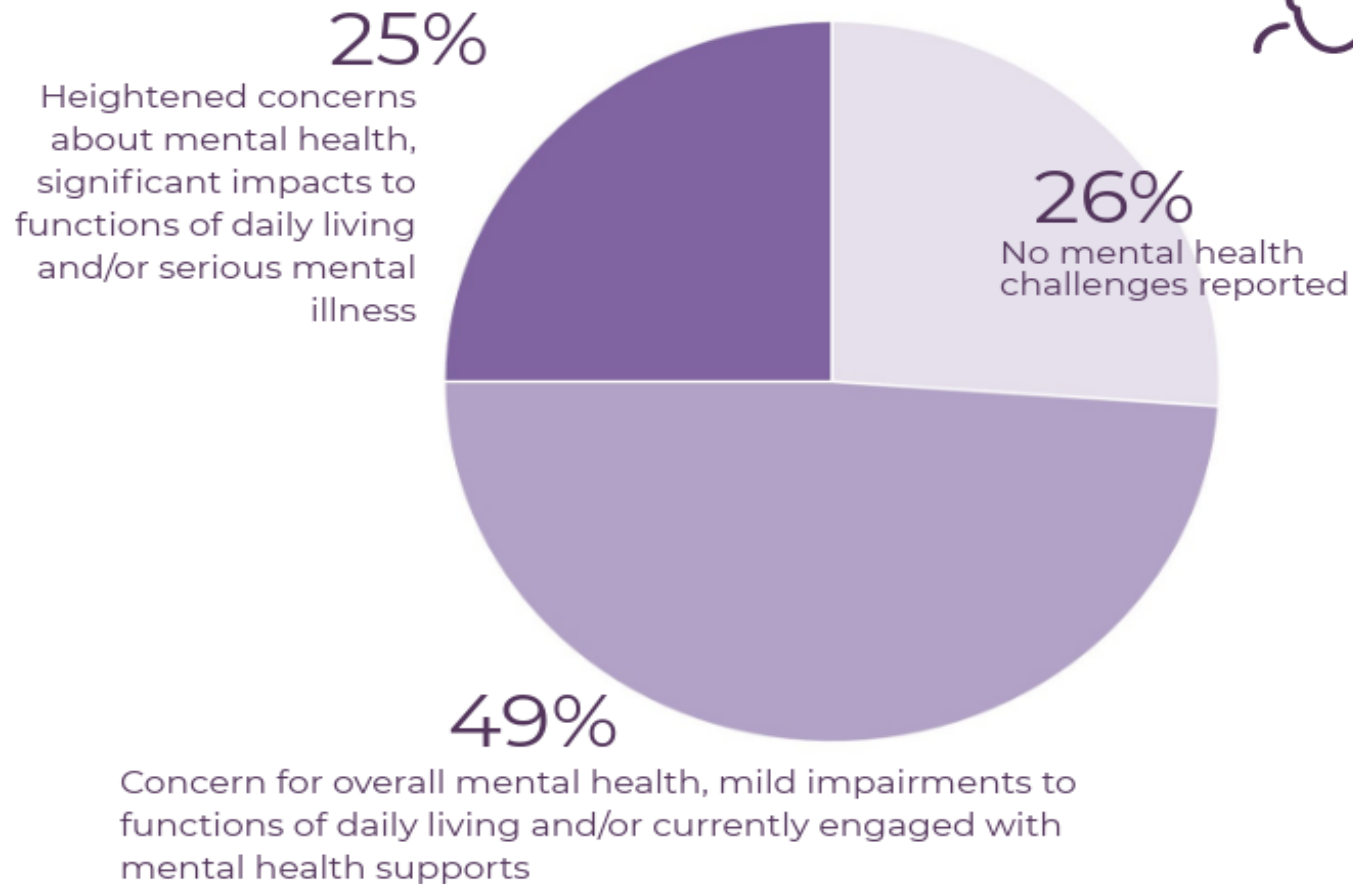
Living in poverty can quadruple a child's risk of being exposed to trauma<sup>3</sup>



235,000 Canadians experience homelessness in a year and 35,000 are homeless on any given night<sup>4</sup>

# 1

## MENTAL HEALTH



# 1 MENTAL HEALTH



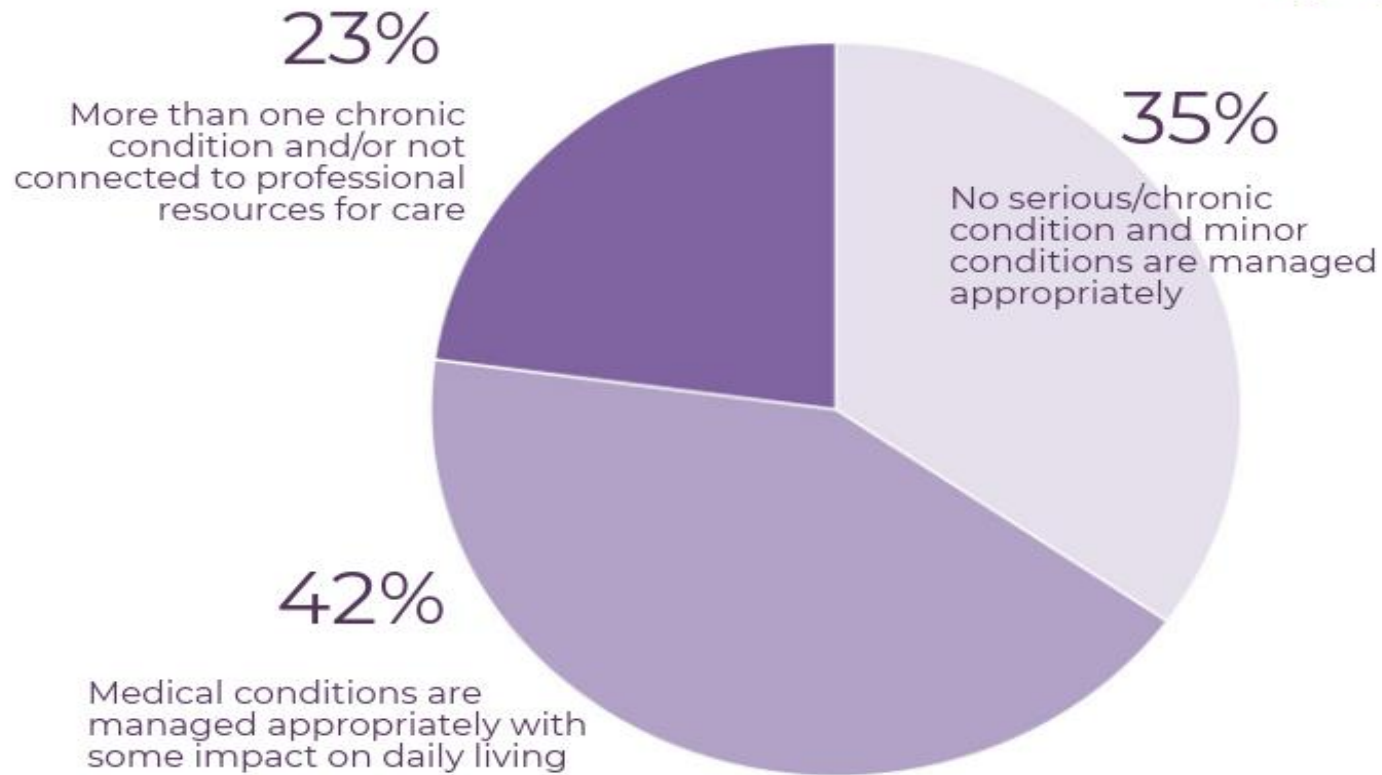
- **74%** of individuals indicated some concern with their mental health or reported that they were engaged with mental health supports
- **25%** reported acute mental health challenges
- About **2/3** report that they consistently have planned, legal activities in their lives that provide fulfillment or happiness



■ Have planned activities (62%) ■ Struggling to find/commit (38%)

## 2

## PHYSICAL HEALTH



## 2 PHYSICAL HEALTH



Nearly **50%** report challenges managing their medications appropriately in the last year



- **20%** report experiencing serious health impacts as a result of their substance use
- Males and females were equally represented in this category
- Females with high acuity scores for substance use also had high acuity scores for mental health and abuse/trauma

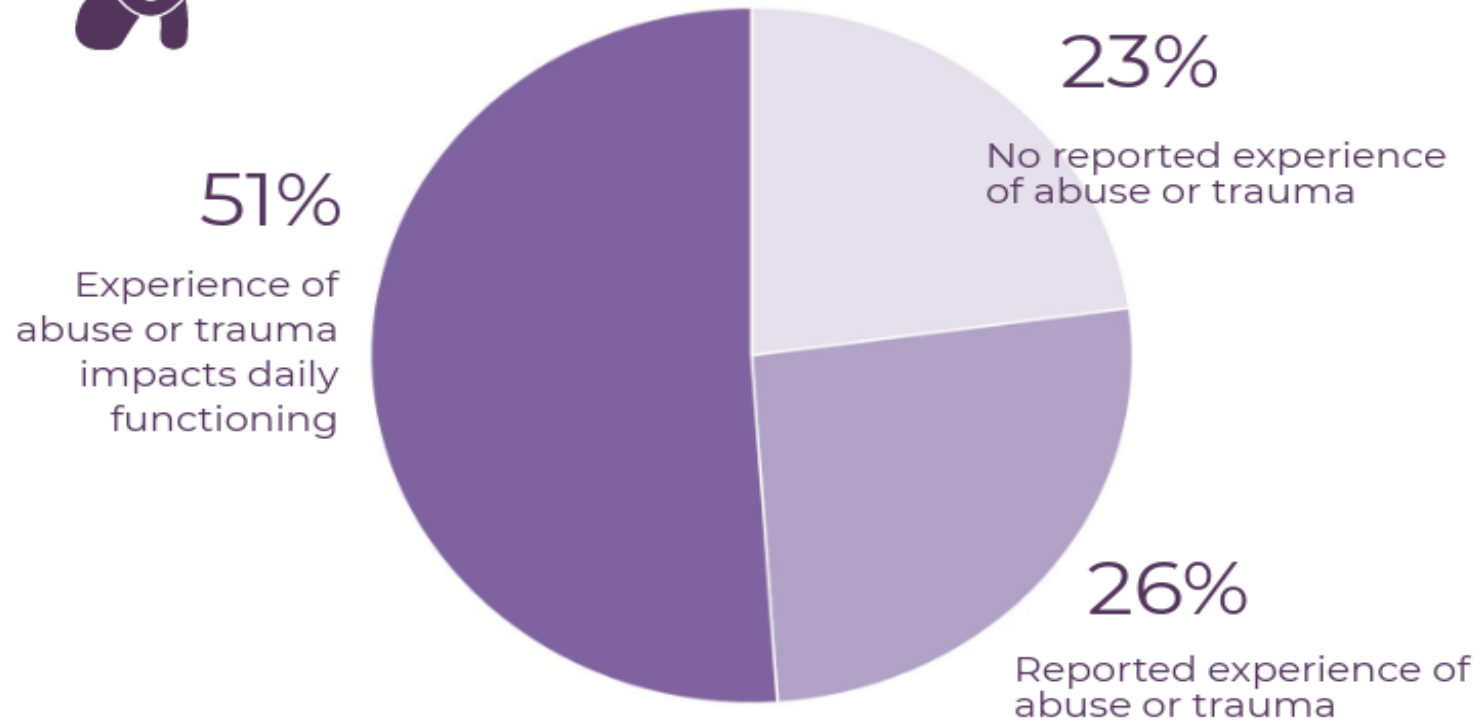


**12%** reported 4+ interactions with Emergency Services in the last 6 months – this is at least one interaction every 6 weeks

Emergency Services includes police, fire, ER, ambulance, hospitalization, crisis services, distress centres and suicide prevention services



### 3 ABUSE AND TRAUMA



### 3 ABUSE AND TRAUMA



**77%** report an experience of abuse or trauma

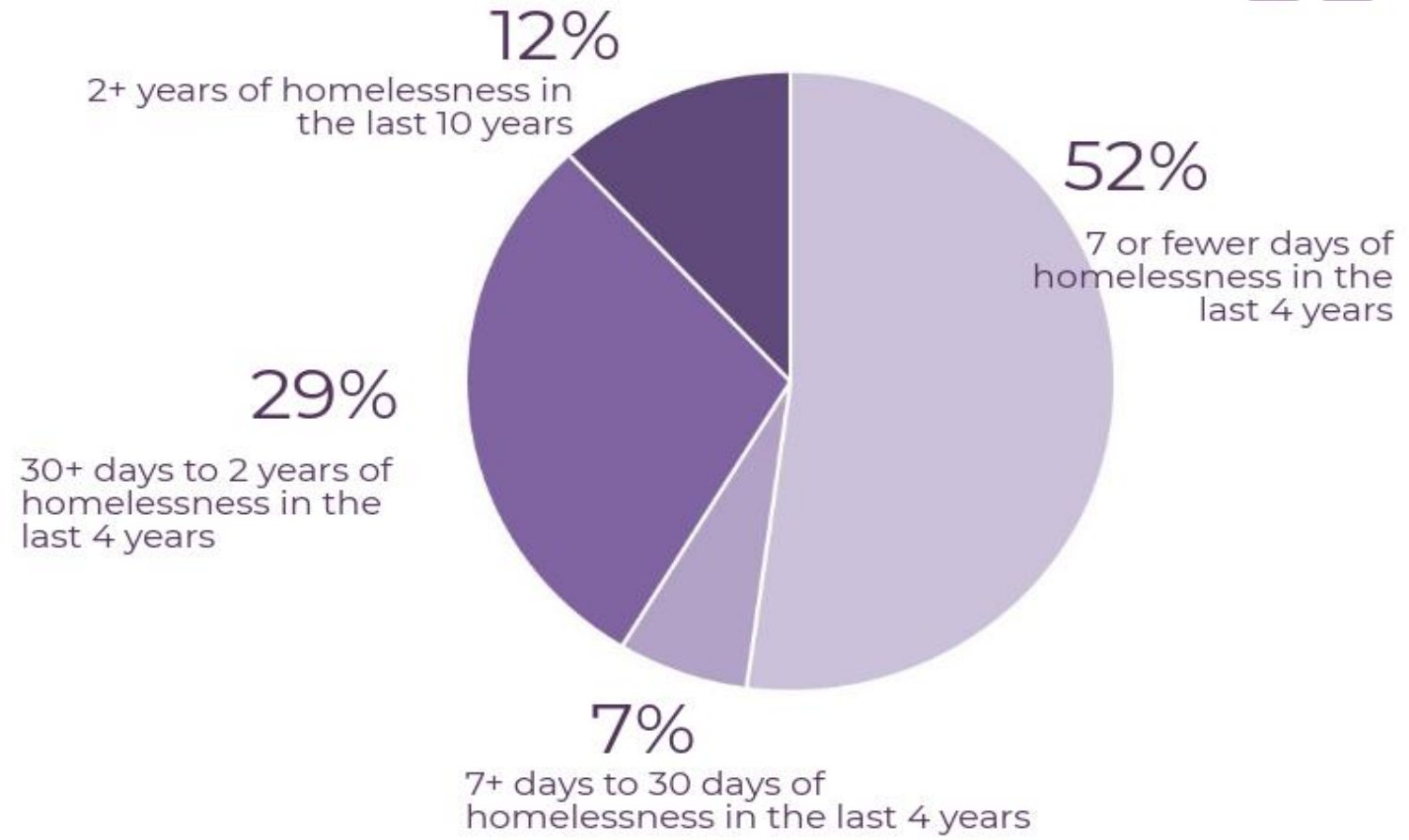
**More than half** report that this impacts their daily functioning, including ability to hold down a job, maintain housing or engage in meaningful relationships with others

**38%** report being involved in at least one potentially harmful, high-risk, or exploitative situation in the last year, including

- leaving an abusive situation
- physical altercations and violence
- being harmed or threatening, attempting or actually harming self or others
- injection substance use
- unprotected casual sex
- sleeping outside



# 4 HOUSING AND HOMELESSNESS



## 4 HOUSING AND HOMELESSNESS

- Individuals were asked about their cumulative total days of homelessness
- Nearly half have experienced homelessness at some point in the last 4 - 10 years



**40%** report challenges with daily living skills and taking care of self and surroundings



**50%** report challenges with managing tenancy and maintaining housing



**Majority** report no difficulty managing financial resources independently and **32%** report challenges managing finances, administrative tasks, difficulty budgeting and frequent changes to their source of income

# 5

## CASE MANAGEMENT RECOMMENDATIONS

- Awareness that most clients coming in may have mental health challenges, experiences of abuse and trauma and challenges with housing
- Importance of motivational interviewing
- Critical to build rapport and assess for most urgent needs
- Once immediate priorities are identified, use that as a starting point for building a plan with the client to most effectively meet their needs going forward
- Awareness of crisis intervention strategies



## REFERENCES

- [1] Health Quality Ontario, Income and Health, 2016  
<http://www.hqontario.ca/Portals/0/documents/system-performance/health-equity-report-en.pdf>
- [2] Association of Ontario Health Centres, A Journey through poverty, 2009  
<https://www.aohc.org/sites/default/files/documents/Journey%20Through%20Poverty.pdf>
- [3] Children's Health Policy Centre, Simon Fraser University, 2011  
<http://childhealthpolicy.ca/wp-content/uploads/2012/12/RQ-3-11-Summer.pdf>
- [4] Canadian Homelessness Research Network, The State of Homelessness in Canada 2016  
<http://homelesshub.ca/SOHC2016>



# So What Now...

## **Staff Training:**

- Motivational Interviewing
- SAIL Training
- Mental Health First Aid
- ASIST Training
- De-escalation training



# So What Now...

## **Client Programming and Service Delivery :**

- Connection with Conestoga College to deliver their Personal Tools for Success course in house
- Connection with Family and Counselling Services to provide counselling at a reduced cost
- Getting Ahead
- Triage approach with clients when a referral is sent to the Life Skills Team



## Table Activity – 15 minutes

At your tables discuss best practices you may have regarding:

- Addiction
- Mental health
- Community Connections
- Case Management
- Other

Write on the stickie's at your table and place on the flip chart paper under the appropriate headings.

Have 1 person report back on 1 or 2 of the best practices that have been identified at your table.





# Contact Information and Links

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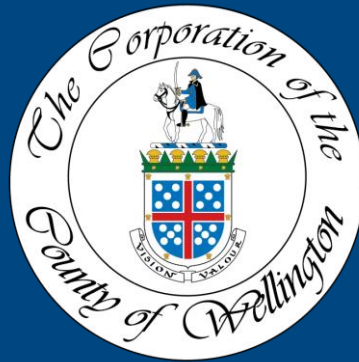
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Taking a Closer Look at Client Barriers: Ontario Works SPDAT Report

<https://www.wellington.ca/en/social-services/publicationsandresources.aspx>





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