

Western Champlain Health Link Communiqué

Patient Story

“Anne” is a 69 year old woman living in a large town in a rural area. She is on a fixed income, which does include private health insurance, but money is very tight. When she became involved with Health Links she was extremely isolated due to anxiety, depression and her declining physical condition. Her isolation was compounded due to her poor mobility and unsuitable rental housing.

Anne’s engagement with her care team was pivotal to this story. She was willing to listen to the team’s suggestions. Even if she would raise concerns, she would consider options and take the supports available.



Anne has Charcot-Marie-Tooth (CMT) disease. CMT is an inherited, degenerative nerve disorder that causes muscle weakness and atrophy in the feet, legs, hands, and forearms. CMT disease is characterized by progressive loss of use and sensation in the limbs. Anne requires a wheelchair to be mobile.

Anne was receiving personal care through LHIN contracted Personal Support Workers. It was her District Care Coordinator at the LHIN Home & Community Care who identified her as a possible Health Link patient. A LHIN Occupational Therapist was already part of her care team. She had a family physician, but lost access to him when he downsized his medical practice.

When “Janet”, the Health Link care coordinator, got involved, the patient immediately identified her goal to be accessible housing. Anne was living in a split level apartment. The entrance was a narrow landing in which stairs went to a first floor with a bathroom and bedroom. Her wheelchair could not fit through the doors on the first level, so she was living full-time in the open concept basement where the cooking facilities were. She referred to herself as being “trapped” in her apartment.

Janet helped Anne with her housing application. Anne knew that she would not be able to take her dog with her when she found suitable housing. She accepted this loss as part of meeting her overall goal of leaving substandard housing. She was very aware of her declining health. Janet referred her to the LHIN Social Worker, who was able to provide therapeutic support during this time of change.

While clinicians suggested that she consider replacing her wheelchair, Anne stated that she was doing the best she could with the money she had. It took some time for Anne to warm up to the idea of getting a new wheelchair, primarily because she was financially unable to wait for the insurance company to reimburse her for the costly purchase.

Janet took time to explain the process in which the wheelchair would be sourced by a local vendor and the criteria the insurance company would use for approval.

The Health Link Care Coordinator ended up calling several management levels in the insurance company, asking if the vendor could bill the insurance company directly. The insurance company accepted a letter of support from the Occupational Therapist arguing for special circumstances. The wheelchair was obtained without Anne paying up front.



A new accessible, subsidized housing complex was opened in a nearby municipality and Anne's application was accepted. She was very excited. The Health Link Care Coordinator and other members of her care team got her moving boxes. She packed what she could, as her independence is very important to her. Janet and some care team members also pitched in.

Janet secured funding to help pay Anne's moving expenses and booked the moving company. This meant that Anne could leave the apartment quickly, without incurring another month's rent. Her new apartment is on the ground floor, with fully accessible bathroom and shower. Her personal care hours are augmented because the program is served by an Assisted Living Service program. She remains without a primary care doctor, but is registered with Health Care Connect.

New Health Links On-Line Learning Modules

We are pleased to announce that the Health Links online learning modules are now available for everyone who currently provides care coordination using the Health Links approach in Champlain.

The content of these modules has been informed by Health Link experience in Champlain. The proposed strategies and actions in each module are meant to address the "how to" questions that arise for providers who are coordinating care using the Health Links approach. Care coordinators and their managers will be contacted directly on how to access these modules.

We believe this training will help care coordinators continue to develop their skills in order to help complex patients such as Anne.

Reach Out to the Western Champlain Health Link Team

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