Bringing Care Home

The South West CCAC Staff Bulletin | Volume 1, Issue 2 | February 2007

A Little Means a Lot

Just two hours of support help Helen Donald and her daughter Suze cope

"We're buddies. This woman has had such an interesting life. I love the time we spend together."

Gail Hamilton, a personal support worker with Canadian Red Cross, is talking about her 95-year-old client, Helen Donald. Helen ran a children's wear store in Dundas, Ontario for 25 years, but in later life moved to Owen Sound to live with her daughter Suze.

At first, Suze found her caregiving role a bit isolating, so when a friend suggested that she contact the CCAC, she called immediately. Case manager Sherry Funston met with the family, completed an assessment and with the family's input created a plan to meet their needs. They agreed that Helen have one hour of personal support each week, now increased to two hours. Sherry checks in regularly to see if Helen's needs have changed. "There is such an incredible willingness to support me to keep my mom at home," says Suze. "I always feel comfortable calling the CCAC to discuss her changing needs. And, when other members of my family cannot help out, I've been able to fill the gap with respite offered by the CCAC."

Gail helps Helen with her bath and gives Suze an opportunity to get out. Perhaps more importantly, she has established a warm friendship with Helen. "Their relationship has been very enriching both for my mom and me — and I think for Gail too," says Suze. "On the days when Gail comes, there's a buoyancy in my mom. It keeps her fresh and gives her something to look forward to." Marjorie, Helen's other daughter, adds that Gail was "sent by an angel." Gail, who has worked in community and long-term care for 17 years, enjoys her job because of the personal, one-on-one connection with clients like Helen. "You learn so much from these people. Helen was born in 1911 and she remembers the First World War and sledding down Hamilton mountain. It's hearing people's stories that I like." Gail's approach is reflective of "Client-Driven Care," an approach that is central to the ethos of the new South West CCAC. Client-Driven Care, says Donna Ladouceur, Senior Director of Client Services, is "a powerful concept" that helps build clients' self-confidence, self-esteem and sense of control and empowerment. "Client-Driven Care comes naturally to Gail," says Donna. "It's how we all practice in ideal conditions."

(left to right): Marjorie Horne, Suze Laporte, Helen Donald, Sherry Funston, Gail Hamilton

For more on Client-Driven Care, see Donna's message on page 3.

Welcome to the second edition of *Bringing Care Home*, dedicated to keeping the 500+ employees of the South West CCAC informed and involved. In this issue, we visit with a 95-year-old client in Owen Sound and her devoted PSW. We hear from Executive Director Sandra Coleman about recent accomplishments and the many tasks now underway in the South West and Senior Director, Client Services, Donna Ladouceur about Client-Driven Care. We'll also bring you up to date with local CCAC news.

South West Community Care Access Centre
CCAC
CASC Centre d'accès aux soins communautaires du Sud-Ouest

Moving Forward

A message from Sandra Coleman, Executive Director South West CCAC

It has been some six weeks since we came together to form the South West CCAC. I'm pleased to report that we are moving forward on many top priorities. Of course, I'd love everything to move faster, but I recognize that we need to take one step at a time.

Let me highlight some of what we've accomplished to date:

- Formed senior leadership team, became oriented to the South West and held a retreat on how to become a high performance team.
- Conducted an orientation session for our Board, and established the Board committees which have begun meeting to deal with ongoing board education and development, and financial oversight.
- Launched and received the results from the staff focus groups to understand what you think are the opportunities and challenges going forward.
- Met twice with the full non-union and management team to establish work plans for early 2007, share our expectations for a high performance team, and discuss how to ensure a collaborative, shared leadership model going forward.
- Developed our organizational design after input from staff and the management team.
- Completed a current state analysis of predecessor CCACs to learn about each location in detail and assess some of the key performance indicators on what's working well and where there needs to be change.
- Initiated regular Senior Leaders visits to staff at all sites on an ongoing basis.
- Met with all service providers representing the 87 contracts with the South West CCAC at a leadership summit meeting on February 15.
- Met with all the Hospital CEOs and many of the MPPs.
- Reached agreement with our 15 bargaining agents under PSLRTA that there be two bargaining units in the South West, one for professional staff and one for support staff.
- Developed our 07/08 budget and business plan to be submitted to the Ministry on March 14th.

We've also consolidated input from staff focus groups, e-mails and discussions and finalized our organizational chart. There will be a separate report to all staff on the results coming shortly. Our goal was to create as "flat" an organization as possible, with only one level between the Senior Directors and our frontline staff. This will help to keep administrative costs below 8% of budget, and more importantly, ensure that our leadership is closely attuned to the needs of clients. We believe that having regional managers focused on broad issues and sectors rather than on specific geographic locations will give us more flexibility to respond to the evolving health care agenda. Perhaps the most important thing about this org chart is who's at the top – not Directors or the ED, but clients!

Our plans for the end of March include:

- Development of our Performance Measurement Framework (PMF) to establish our goals for 07/08.
- Selection of our new management team.
- Development of a plan for implementing an equitable service delivery model.
- Establishment of an ongoing staff consultation mechanism and regular staff meetings at each site.

Another big step: we received our funding for 2007-08. Our budget is $137 million, a 5.5% increase from the 2006-07 base. That's an encouraging reflection of the government's ongoing commitment to community care. We have been given a challenging role, but we are being supported to succeed at it. We are forecasting a balanced budget for next year without the need for cost containment.

On March 5, the 14 CCAC EDs will meet to develop a province-wide mission and vision for our organization. I feel that over the course of the last 50 days, we at the South West CCAC have put in place a realistic regional framework to support the provincial mandate. Many thanks for your hard work and patience. We're off to a great start.

We are currently putting the final touches on our Business Plan for 2007-2008. We will be focusing our activities in four areas:

1. Continuing to forge a strong and integrated organization, based on the twin pillars of Client-Driven Care and accountability.
2. Working with our health system partners to help our clients move smoothly through the system.
3. Supporting the development of Family Health Teams in our area.
4. Supporting South West LHIN priorities.

The Power of Stories

A message from Donna Ladouceur, Senior Director, Client Services

As I read about Helen and her caregivers (page 1), I was struck by the thought that there is nothing more powerful than a story. Stories are an important way to express the concept of Client-Driven Care – an approach to care that lies at the heart of the South West CCAC.

We will be sharing stories about interactions between clients and care providers at the South West CCAC Workshop on February 27, along with other information about Client-Driven Care. Given our different experiences, histories and communities, Client-Driven Care provides us with a common starting point – a way to begin sharing best practices and reaching for new and better ways to deliver services.

I urge you all to read the introduction to *Client-Driven Care in the South West CCAC - Partnering for Better Health* (available on the intranet) prior to attending the workshop. It is a concise explanation of this style of service delivery and offers evidence that this approach leads to improved quality of life for our clients. My hope is that many of us who leave the workshop will become champions for Client-Driven Care at each South West CCAC site and inspire and direct change at the local level.

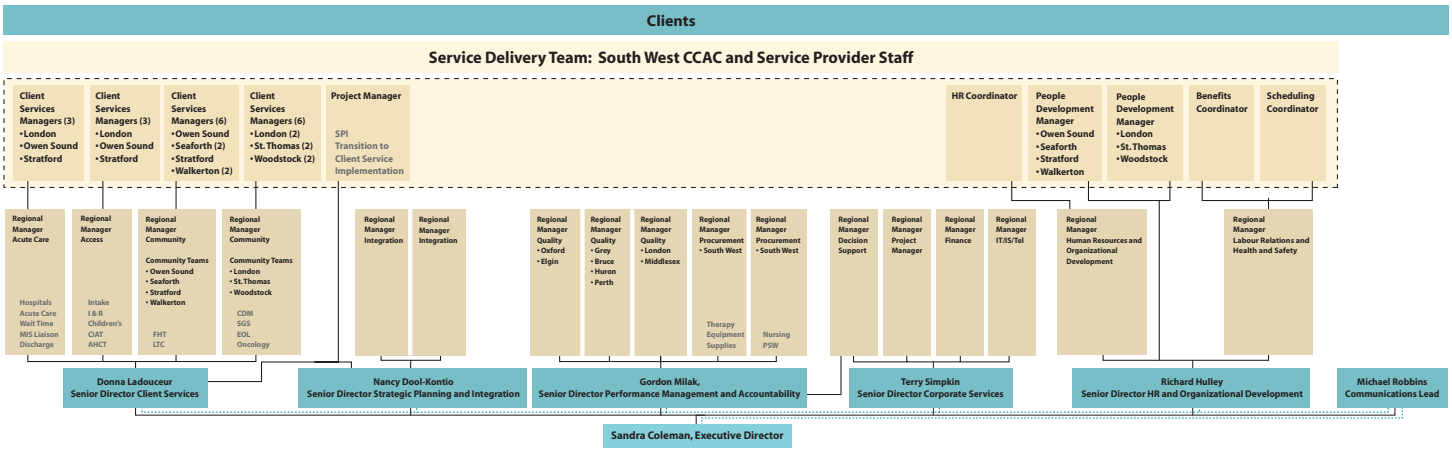
Other items to report on include our first South West Client Services Management team meeting on February 13. It was an enthusiastic group and energizing meeting. While acknowledging the need for frontline management and IT support, the team has developed an action plan for the Client Services Team. The plan includes:

- Implementation of the use of a resource allocation tool to assist frontline staff in the monitoring of their caseloads. The tool to be used is the OBRA, a tool which is in use in a number of CCACs provincially.
- Development of a consistent equipment policy for implementation March 31.
- Putting systems in place to accomplish the Ministry expectation of clarity on the breakdown of personal support hours and to track it accurately. Work will continue with PMA to educate our service providers.
- Development of a consensus to pursue increased Care Pathways and achieve consistent Nursing Delivery models. The First model to be reviewed will be for the "Hips and Knees Framework."
- Beginning work to develop a common Wound Care Framework across the South West.
- Creating a commitment to co-create with frontline staff outcome-based goals to give clarity about "What is expected of me?"

Also our organizational structure has now been established. As you can see in the chart, Client Services is somewhat different from other portfolios because so many people are involved in this area.

We have created four regional manager positions. One will focus on the acute care sector, with another assigned to access (intake, information and referral, etc.). Two regional managers will be responsible for community care, one in the north and one in the south. At the same time, we have created 18 frontline managers who will have specific geographical responsibilities. We believe this structure will help us achieve consistently high quality service across the South West, while allowing us to respond to local needs and support our staff and care providers on the ground.

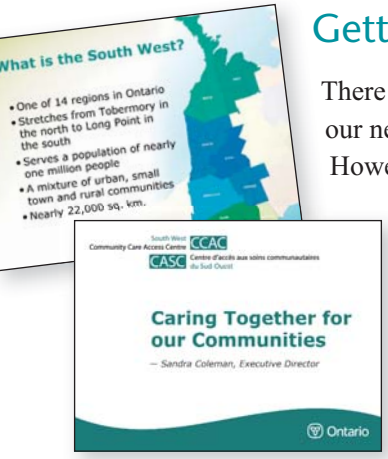
Our new org chart is more than a pretty picture. It's like the frame of a house – the right structure will make us stronger and more resilient. Ultimately, it will give us a structure on which to build exceptional Client-Driven Care.



Let's Stay In Touch

In the last issue of Bringing Care Home, we invited CCAC staff to be part of a newsletter support team helping to map out this monthly newsletter. This issue, we are happy to introduce the new team: Janice Gibbs and Michele Dalton, **Seaforth**; Delphine Staley and Shirley Smith, **Stratford**; Judy Turnbull, **Walkerton**; Jennifer Lobban, **Owen Sound**; Marilyn Pearson, **Woodstock**; Tabitha Carey, Lee-Anne Hofland and Nancy Tolman, **Elgin**; Leanne MacKenzie and Ingrid Hicks, **London**.

Of course, we welcome suggestions and/or contributions from everyone involved with the South West CCAC. So bring it on. Contact an editorial team member, Michael Robbins at michael@segue.ca or Cate Patchett at cate.patchett@sw.ccac-ont.ca.



Getting It Straight

There are many positive changes within our new South West CCAC structure. However, it can be a challenge to explain them simply and accurately to our clients. For this reason, we've developed a simple power-point presentation for staff to take on the road when speaking to individuals or groups about the role of the community care access centre in the South West area. If you would like to use this powerpoint it's available on the Intranet under the 'Communicate' tab in the Communications Library folder. If you have other ideas or questions about keeping the lines of communication open, contact cate.patchett@sw.ccac-ont.ca.

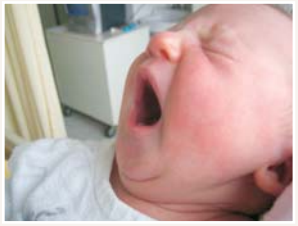
Memorable Walk

South West CCAC Woodstock's office created memories of their own by raising over $2,500 for the Alzheimer's Society of Oxford County in January's Walk for Memories. In fact, the team narrowly missed claiming top money-raising honours, coming in just 43 cents behind Tavistock's Bonnie Brae Health Care Centre! Proceeds from the indoor event at the Woodstock Oxford Auditorium totaled $42,000. Congratulations to Sharon Broadhurst, Angela McCann, Mary Joan Kivell, Lee MacDonald, Jacquie McLeod, Brenda Duncan and Gwen Vaughan. The team reports the event — which also included music, contests, clowns, face-painting, draws and great food — was a wonderful way to have fun and raise money for a special community partner, the Alzheimer's Society of Oxford County.

COMMUNITY TIDBITS

From Queenston to Tobermory – Virtually!
Staff from the South West CCAC Owen Sound and Walkerton offices are setting out on a long, long walk – without really going anywhere! They are part of teams participating in the Bruce Trail Virtual Walking Challenge. Over three to four weeks, they'll keep track of their steps using a pedometer until they reach a total of 840 km. The challenge is an initiative of the Grey Bruce Public Health Unit to encourage year-round activity.

Congratulations
Ruth Ann Steckle, a case manager in the Seaforth Office is a first-time grandmother. Her daughter gave birth on February 16 to a healthy 8 lbs. 11oz. baby boy. They have named him Alexander Hans.



More Than One Thing In Common
They both work for the same office, South West CCAC London – and they're both grandmothers to the same babies! Kathy Faulds, Case Manager, and Gwen Vanderheyden, Client Services Manager, proudly announce the births of Kaedra August Lily Faulds, 6 lbs. 12 oz. and Lorelei Rose Faulds, 5 lbs. 9 oz. The twins were born January 23 to Heather and Brian Faulds and little brother Bryce. Congratulations to all.