

Bringing Care Home

The South West CCAC Staff Bulletin

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IN THIS ISSUE ONCOLOGY SUPPORT PROGRAM + ONTARIO'S VISION FOR COMMUNITY CARE + MEET TWO SOUTH WEST CCAC TEAMS + SW CCAC TIDBITS

Support for People Living with Cancer



“Jeff is a person who won’t let anything stand in his way,” says ParaMed Home Health Care visiting nurse Bette Kline. Her client, Jeff Karp, has relied on the CCAC over the past year and a half to support his journey through aggressive treatment for colon cancer. And he’s had many questions along the way. Throughout his treatment Jeff says he’s been able to count on his CCAC team for positive answers plus dependable care and emotional support.

Kline and Jeff’s Case Managers Peggy Gillespie and Anna Ackland, are part of the South West CCAC’s Supportive Care Team. The London Regional Cancer Program (LRCP) refers cancer clients who need support navigating the system or need medical care at home to cope with cancer treatments.

Peggy Gillespie, the Oncology Care Co-ordinator for Elgin, says Jeff showed up at her office armed with piles of information about his disease and treatment options. When it came to making decisions, Jeff wanted to be in the driver’s seat, but he needed help navigating the system. “We ex-

plained how the LRCP works, what the referrals meant, what the oncologists do and what the radiologists do,” recalls

Gillespie. “This gave him an idea of how he could be involved in decisions about his treatment.”

Jeff works in St. Thomas but lives in London. He wanted support in both locations. So Gillespie arranged for an inter-program transfer to the care of Ackland who is a Case Manager in the CCAC’s London office. Gillespie continued her involvement because Jeff planned to stay on the job in St. Thomas during his nine months of treatment. She was available to help him understand his treatments and test results and prepare for meetings with his oncologist.

Back in London, Ackland continued with service planning, providing emotional support and organizing Kline’s visits. Says Ackland: “You work with the client to provide the

services needed to help them get through their journey and that’s that.”

Once every two weeks for nine months, Kline would disconnect Jeff’s chemo fanny pack after a 72-hour course of treatment. The dressing for the PICC (peripherally inserted central catheter) line, which stayed in his arm the whole nine months, required weekly changing. “I am an early bird and so is Jeff,” says Kline, “so I would arrive at about 7:00 in the morning.”

The Supportive Care Team helps patients better understand the care they’re getting from the LRCP and how they can best advocate for their personal goals. “We help clients navigate through different parts of the health care system,” says Gillespie, adding that the LRCP makes patients’ progress notes available to South West CCAC Oncology Care Co-ordinators.

Recently, Jeff learned that he will need further treatment. Says Gillespie, “The cancer journey often involves twists and turns and Jeff has had to take an unexpected turn. However, he will be able to count on his South West CCAC support team every step of the way.”



Jeff Karp’s South West CCAC Supportive Care Team (left to right): Case Manager Anna Ackland, Nurse Bette Kline, Terri Karp, Jeff and Case Manager Peggy Gillespie.

South West
Community Care Access Centre

CCAC

CASC

Centre d'accès aux soins communautaires
du Sud-Ouest



Care Close to Home is Best

A message from Sandra Coleman,
Executive Director South West CCAC

Recently, The Honourable George Smitherman, Minister of Health and Long-Term Care for Ontario, made a rousing speech to a group of community care professionals near Toronto. His message is one that we all should hear, as it reflects an exciting future for Community Care Access Centres across the province.

"The best health care you can find," Mr. Smitherman began by saying, "is the care you find as close to home as possible." He explained that his government is committed to developing and expanding the capacity of the health system across the province, not simply in big Toronto teaching hospitals. CCACs, he said, have a key role to play in supporting this goal through coordination and provision of care at home.

"Seniors want to stay at home, where the heart is," he went on to say. "It is our obligation to do our utmost to provide access to good quality care at home." He noted the success of CCACs in providing complex palliative home care as an example of our ability to coordinate care between various providers and professionals.

Mr. Smitherman also noted the huge potential inherent in the alignment of CCACs and LHINs. "I feel so excited about the powerful symmetry that is being created," he said. "We must enhance the profile of CCACs in the community and give them an even more powerful role as wayfinders or system navigators." He told the gathering that they are working in an area that will be "at the heart of the action" in the future.

The Ministry is deeply committed to the cause of community care, and sees

CCACs as important allies in the achievement of key health system goals. The Ministry is currently working on a 10-year Strategic Plan that will capture some of these ideas. Although the Plan is not complete, I believe one of its three strategic directions will focus on equitable access to care with a focus on increasing the capacity for home and community care.

With such a bold and exciting vision developing at the provincial level, the South West CCAC is moving ahead to refine our local vision. It will reflect provincial priorities and the unique needs and strengths of our region. It will also align with the strategic directions of the South West LHIN.

A key step is the community engagement process under the leadership of Nancy Dool-Kontio. Community engagement is the process of working collaboratively with and through groups of people to address issues affecting the well-being of their communities. The process will help us build positive relationships, create transparency, and obtain immediate

information about community needs and perspectives. The first step will be to begin holding board meetings at various office locations throughout the South West (see chart), starting with Seaforth in June. We will be seeking your input through team meetings starting in August and September. Then in September and October we will host a series of focus groups across the region, fostering dialogue with clients, caregivers, service providers, other partners, hard-to-reach groups and the community at large. What we hear during this process will be analyzed and summarized and then reported to the Board early in 2008. It will inform our strategic directions and objectives as we move forward.

Mr. Smitherman's comments leave no doubt that CCACs have a critical and growing role to play in our health care system. With your help, the South West CCAC will realize this exciting opportunity and make a real and lasting contribution to the future of health care in this region.

Board Meeting Dates (11:00 am - 3:00 pm)

June 27, 2007	Seaforth
July 25, 2007	Owen Sound
August 22, 2007	Walkerton
September 26, 2007	St. Thomas
October 24, 2007	Stratford
November 28, 2007	Woodstock
December 19, 2007	London

Like "Extended Family" – South West CCAC and South West LHIN Affirm Leadership Partnership

South West LHIN CEO Tony Woolgar (far left) and Board Chair Norm Gamble (second from left) recently met with the South West CCAC board and senior management to discuss the opportunities and challenges facing both organizations. Both groups agreed that by working together and learning from each other, success will be achieved. "We have a lot in common," said Woolgar, "We're like an extended family." Woolgar praised the CCAC team for its innovations and invited us to focus on individualized client solutions and take the lead role developing care closer to home.



We're a People Business – Through and Through

We're a client-driven organization dedicated to helping our staff achieve standards of excellence.

We're also a big employer determined to make the South West CCAC a great place to work.

In other words, we're all about people.

Meet two South West CCAC teams who facilitate the business of people ... helping people.

PMA Team: The Best in People Means the Best in Service

For the South West's Performance Management and Accountability team (PMA), bringing out the best in people is a top priority. Why? As the team with responsibility for procurement and contract management with our service providers, their work translates into top-notch care for clients.

Senior Director Gord Milak and his managers are committed to consistently improving performance measurement and accountability practices for South West CCAC staff and contracted service providers. This means building effective relationships, developing a shared understanding of goals and co-creating strategies to achieve them.

"Seventy per cent of our organization's budget is directed to contracted services," says Milak who uses the analogy of a suspension bridge to explain the work of his team. They carefully balance the weight of three major functions: contracts, information and quality management. Adds Shirley Koch, Regional Manager, Procurement (Nursing and Personal Support), "Maintaining a strong and healthy partnership between service providers, staff and clients is a big part of our job."

That's why Kim White, Regional Manager, Quality, Elgin, Norfolk and Oxford, often turns to CCAC staff members for great ideas to improve PMA partnerships and practices. "They're the ones with the expertise," she explains.

Like the rest of the team, Regional Manager, Quality, Grey Bruce, Huron and Perth, Darlene Bogie's goal is to build the South West CCAC into a recognized centre of excellence. She says, "It's all about our people taking things from better to best."



The PMA Team (left to right): Darlene Bogie, Regional Manager Quality (Grey Bruce, Huron and Perth); Kim White, Regional Manager Quality (Elgin, Norfolk, Oxford); Gord Milak, Senior Director, Performance Management and Accountability; Shirley Koch, Regional Manager Procurement (Nursing and Personal Support) and Rachel LaBonté, Regional Manager Quality (London and Middlesex). Absent: Kimberley LeMare-Matthews, Regional Manager Procurement (Supplies, Equipment, Therapy) and Hilary Anderson-Halliday, Regional Manager, Decision Support.

South West CCAC Human Resources Team Working for You

The South West CCAC wants to be an employer of choice in the eyes of its 575-member staff. Helping us reach this goal is the new Human Resources team.



The HR Team (l to r): Joanna Makinson, North, People Development Manager; Sylvia Hunniford, Benefits and Wellness Co-ordinator; Jason Spalding, Regional Manager, Labour Relations and Health and Safety; Mary Haynes, Administrative Assistant; Susan Johnson, Human Resources Co-ordinator; Jan Sewell, Executive Assistant; Richard Hulley, Senior Director, Human Resources and Organizational Development; Michelle McKellar, South, People Development Manager; Judy Loblaw, Regional Manager, Human Resources and Organizational Development.

With many years of HR experience under his belt in both labour relations and organizational development, Richard Hulley, Senior Director of Human Resources and Organizational Development, says he's committed to providing "a positive, consistent approach to employee relations emphasizing organizational development, health and safety, staff development and education."

New Regional Manager for Health and Safety and Labour relations Jason Spalding is planning a joint employee health and safety committee to ensure uniform practices across the South West. Consistency is also at the top of the list for Judy Loblaw, new Regional Manager for Human Resources and Organizational Development, as she rolls out a realistic change management process, one that works in all corners of the region.

By supporting our professional needs, this HR team will build the kind of employee satisfaction that leads to exemplary client care. It's just common sense: satisfied employees mean satisfied customers. There's a long way to go because there are so many differences in HR practices across the South West. But as of May 28, the final manager, Michelle McKellar, started. This means staff should start to see steady progress in June.

Why We Do What We Do

A needy family in the little town of Otterville, Oxford County recently got a great big hug from the South West CCAC's Woodstock office. **Case Manager Nancy Cheevers arranged for the family, whose paraplegic son is in her care, to receive a ramp donated by the United Way.** She contacted occupational therapist Andrea Hecker to measure the space where the ramp would be placed at the house, then asked Home Depot for a voluntary delivery. In fact, Home Depot went above and beyond, providing three volunteers who installed it – in the pouring rain! "I really wanted to share this story," says Cheevers, remembering how she smiled all the way home the day the ramp was finally installed. "In our work we deal with many problems and complaints. But every once in a while, something like this happens. It makes us realize *why we do what we do.*"



We Think You're **GRRREAT!**

COMMUNITY TIDBITS

WELCOME to Holden Mattias Senuita, 6 lbs. 10 oz., born May 7, 2007 to Anna Nikitina, former French Language Receptionist for the CCAC office in London, and her husband.

Also beaming is Grandma Julie Senuita, London office Team Assistant.

Seaforth Case Manager Laurie Henderson keeps busy both on, and off the job. As the number one fan of her horse-riding daughter, Olivia, Laurie enjoys traveling to horse shows to watch her compete. Recently Olivia won reserve champion at a schooling show in the intermediate class for Hunter over Fences and Hunter under Saddle at Edenridge in London. *Way to go, Olivia ... and Laurie!*



BRIGHT IDEAS South West CCAC strongly Represented at Health Care Expo

Four team projects represented the South West CCAC at the *Celebrating Innovations in Health Care Expo 2007*, May 23-24 in Toronto. The annual expo is a one-of-a-kind opportunity to showcase innovative solutions to health care challenges. Our team projects presented ideas for decreasing the length of hospital stays, enhancing community client care following hip and knee surgery, moving from paper to automated documenting, and partnering to support choice in end-of-life care.

Standing (left to right): Mary Jane Dandeno (A CCAC/Hospital Integrated Navigation Framework), Hilary Anderson-Halliday (No Stone Unturned: Overhauling Work Processes), Gwen Vanderheyden (No Stone Unturned: Overhauling Work Processes), Joanne Hardy (No Pain, Lots of Gain – Reducing Hospital Length of Stay), Frank Filice (No Pain, Lots of Gain – Reducing Hospital Length of Stay) and Lisa Misurak (Partnership to Support Choice in End-of-Life Care). Seated, left to right: Carol Merton (A CCAC/Hospital Integrated Navigation Framework), Dr. Sugantha Ganapathy (No Pain, Lots of Gain – Reducing Hospital Length of Stay).



COMING SOON Client Newsletter

Watch for *Community Care News*, our new client newsletter, due to hit the stands of the South West this summer. **WE NEED YOUR IDEAS** for client-oriented stories about our programs and services. The newsletter, published twice a year, will be designed to engage clients as active members of the South West CCAC family. Don't forget to contact us at newsletter@sw.ccac-ont.ca.

Handy New Tool

Client Brochure Keeps Everyone in the Know

Help your clients gain a thorough understanding of the CCAC with a copy of our new brochure. The easy-to-read format in *Bringing Health Care Home* explains:

- how to make contact with the South West CCAC
- the role of the Case Manager
- a complete list of South West CCAC services and office locations
- housing options
- advice for working with your South West CCAC team

And when it comes to getting reliable and quick information about health and related services and information, don't forget about thehealthline.ca.

