



Connecting you with care
Votre lien aux soins

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

BUILDING COMMUNITY
AND CAPACITY
with Our Partners in
Long-Term Care

**ALL-STAFF
EVENT**
WEDNESDAY,
JUNE 1, 2011
9:30 am to
1:30 pm

STAFF BULLETIN

Volume 5 Issue 4 May 2011

Learning from our Communities

This year, community engagement is focused on the transition to long-term care

How do we know whether the care we provide meets the needs of our clients and their caregivers? Simply by asking.

That's the concept behind community engagement. Each year, the South West CCAC Board engages with clients, caregivers and system partners to gather information about what we're doing well and identify areas for improvement.

This year, the focus for community engagement is on the transition to long-term care. Nancy Dool-Kontio, Senior Director, Strategic Planning & Integration South West CCAC, and Shirley Koch, Regional Manager, Strategic Planning and Integration, worked closely with long-term care partners to implement an engagement with clients and caregivers who have recently moved from hospital or home into a long-term care home.

"The transition isn't just a physical move: it's a major life decision, for the client and the caregiver."

The project included journals that caregivers were encouraged to keep as they moved through their journey, and interviews, in person or by telephone. The interview questions probed how people made the decision to move to long-term care, how they chose their homes, whether they felt supported and had the right information, and what could be done to improve the experience. Says Dool-Kontio: "We asked everyone to tell us their stories, and then asked questions to delve into specific areas." A total of 24 residents were interviewed, 19 moving from hospital, and five moving from home or a retirement home.

"One of the things we were reminded of was the huge emotional impact of making this type of decision," says Dool-Kontio. "The transition isn't just a physical move: it's a major life decision, for the client and the caregiver.

They experience grief, loss and other powerful emotions that reflect the significance of the transition." The emotional impact is especially heavy, she says, when clients are moving from hospital following a sudden change in their health.

A related finding is that the family's relationship with the case manager was critical in easing the transition. Clients and caregivers were generally positive about the support they received from the CCAC, and many praised the case managers they had contact with.

For Dool-Kontio, the community engagement project affirms the importance of Home First, a philosophy of care that supports clients to make life-changing decisions at home whenever possible. The project also suggests the need for more support and referral to help clients and caregivers deal with emotional support needs, both during and after the placement process.

A report summarizing the findings and recommendations will be reviewed by the senior team and the Board, and action plans will be developed to implement improvements. The results will also be shared with CCAC staff and long-term care home staff, and will be discussed at the June 1 all-staff meeting, which long-term care partners will be attending. The results will be shared with system partners, the participants, and the community.

Dool-Kontio believes the project will be the catalyst for positive change. "I'm hopeful that in the future more of these major decisions will be made from home. Even when that doesn't happen, we must explore how we can do an even better job at supporting the emotional needs of clients and caregivers and build strong relationships with them in the spirit of Client-Driven Care."



A Message from Sandra Coleman, CEO South West CCAC

Taking our MPP to Work

May 13 was a very special day in the life of the South West CCAC. I hope it was also a special day in the life of Deb Matthews, Minister of Health and Long-Term Care.

As part of “Take your MPP to Work Day” celebrating Nursing Week, Minister Matthews spent the morning with the CCAC and South West home care team. We visited the home of Ernesto and Clarabelle McLaughlin, both in their late 80s and clients of the High Risk Seniors/Home First program. Ernesto has some serious health issues, and Clarabelle is in the final stages of Alzheimer disease. Married for more than 65 years, they are able to stay in their own home because of intensive case management, and a care team that includes a Nurse Practitioner, a consulting pharmacy, a visiting nursing, a personal support worker, and Supports for Daily Living through Cheshire London.

The next stop was the VON FlexClinic and Seniors Drop-in Centre at Cherryhill. There the Minister met with clients and even participated in a Healthy Ageing Program exercise class! We also discussed the eShift program. The morning was a glimpse into all aspects of home care nursing including the nurse as a case manager, Nurse Practitioner, visiting nurse, clinic nurse, and tele-homecare nurse.

It was a great privilege and pleasure to host the Minister. Her down-to-earth, open manner and infectious smile brightened the day for clients and staff alike. I was thrilled

to be able to highlight some of the many innovations we have introduced. It was great to see CCAC team members sharing their passion for great care, and being recognized for the wonderful work they do. Ms. Matthews was clearly impressed by what she saw.

Ms. Matthews was also with us two weeks earlier at the South West LHIN’s Quality Congress. At that time she talked about the importance of universal health care as a legacy for future generations.



Minister of Health and Long-Term Care Deb Matthews visiting the VON FlexClinic at Cherryhill on Take Your MPP to Work Day, May 13, 2011.

It is through programs like Home First and FlexClinics that we continue to improve the quality of care while making the best possible use of resources. If our health system, the envy of the world, is to survive, we must continue to embrace change and practice continuous improvement. We must do things differently, as a system and as individual practitioners. We must work with our partners to break down silos and provide holistic, seamless care. We must make care better, every day.

After all, our children and grandchildren are counting on us.

Link to a video on High Risk Seniors at
http://www.youtube.com/watch?v=8z_ICULX3KI



WHAT’S THE BUZZ?



Change Foundation Facts

In April the Change Foundation released fact sheets and powerpoint friendly chart packs based on recent data on home care use in Ontario. The resources focus on the needs of seniors living with the fourth most common chronic disease, Congestive Heart Failure (CHF), the critical stress points for caregivers of palliative home care clients, and the composition and service needs of Ontario’s

ALC population, pegged at 16% in 2010.

- The percentage of ALC patients with moderate care needs waiting for long-term care varied by as much as 20% across Ontario’s LHINs
- Caregivers of palliative home care clients report most distress after 18-35 hours of weekly care
- Seniors with CHF are heavy users of medications, but only 29% are on the right drug regimen

New Hollander Study Released

“An Evidence-Based Policy Prescription for an Aging Population” was recently released online by authors Neena L. Campbell and Marcus J. Hollander [www.longwoods.com/content/22246]. Recommendations include:

- Develop an anti-ageism media campaign or include older adults in public messaging against discrimination
- Take action to implement recommendations related to age-friendly cities
- Establish targeted funding mechanisms to evaluate promising preventive initiatives, particularly for tertiary prevention
- Provide support for respite care
- Provide information, resources and counselling for caregivers
- Adjust labour and tax policies to support caregivers
- Recognize and re-validate integrated continuing care systems at all levels of government
- Ensure that future health accords or other agreements focus on integrated care, not just home care

Client-Driven Care Awards of Distinction Nominees

Each year the CCAC recognizes staff members nominated by their peers for their dedication to living the principles of Client-Driven Care with the *Client-Driven Care Awards of Distinction*.

There are four categories of Awards: three to Individuals and one to a Team of Staff Members. These Awards are in recognition of outstanding commitment to the development of health promoting relationships and empowered people and will be presented at the June 1 All-Staff Meeting.

Members of the Selection Committee: Dr. Carol McWilliam, Don Keillor – Board Member, Donna Ladouceur, Sandra Lawler, Sue Petit, Mary Sickinger, Karen Chatfield, and Cate Patchett. Congratulations to the following nominees and a big thanks to all nominators.

Individual Client Services

Bev Lecomte is always adaptable to the changing needs of the case managers she supports and the organization. She is a friendly team player prepared to learn and share her knowledge.

Denise Squires demonstrates a very warm and caring attitude. Being the first line of communication at the hospital she always makes clients and families her first priority and her calm, gentle approach is appreciated.

Marilyn Zehr is committed to making a difference in her clients' lives and society in general through her active participation in social change. She always focuses on the positives.

Individual Other

Carol Barr exceeds all expectations in creating trusting relationships by ensuring staff have the right information to make decisions and always trying to achieve a high level of satisfaction.

Iolanda Locker goes about her duties with a calm, positive disposition. No matter what she is asked to do, she is always willing to tackle the task.

Joanne Teutloff displays great diligence and determination and while clients may not directly see her efforts, they are nonetheless the beneficiary.

Leadership

Marilee Garner encourages staff to engage with each other, clients, families and service providers and she promotes cooperation and creativity to provide the best care possible.

Sherri McRobert works tirelessly with all her teams to create helpful connections for people. Her positive attitude is inspiring to her staff. She works to improve the client experience each day.

Barb Modesto demonstrates commitment and compassion in all she does. She has a way about her that brings out the best in the teams she leads.

Dianne Collyer's presence is refreshing and reassuring to staff. She is supportive of co-workers and her quiet nature and active listening skills help to create positive, trusting relationship with clients and families.

Client Services Managers, Children's Team – Marilee Garner and Maeve Armstrong make up the mighty team that leads Children's Services with the singular aim of developing shared understanding around best practices.

Team

Grey-Bruce Access Team helps to foster strong working relationships through a collaborative approach to everything they do. They lead by example and work collaboratively with system partners and teams in other sites fostering positive working relationships across the South West.

Carla Crowther, Lorna O'Neill, Diane Eastwood, Darlene Turner, Sally McGill, Jennifer Ottewell, Cindy Weber, Jennifer Lobban, Alison Blackwell, Susan St. Pierre, Gina Stroud, Marcy Clouatre, Kimberley Green, Jean Wilson, Helen Gasidlo, Janice Fisher, Sarah Sadikian, Kathy Weir

Woodstock Community Client Services Assistants work with community partners in a collaborative approach with respect and dignity. They work to identify gaps in processes and ensure new learnings are shared with other CSAs.

Arlene Clemence, Angela McCann, Brianna MacKinnon, Candice Beselaere, Diane Simas, Krista Doan, Lisa Mears, Lois Langohr, Myrna Powell, Sharon Broadhurst, Susan Legacy, Shirley Middleton, Vicky Kielesinski, Julie Harde

Seaforth Client Services Assistants Team have adapted and embraced significant changes in their work. With the increase in client contact, there is an enhanced passion for their work.

Laura Johnston, Jenna Prouse, Eleanor Devereaux, Mary Ann Hathaway, Bev Lecomte, Marg Anderson, Merrilyn McBurney, Shelley Bryson, Krystle Jantzi, Lisa Blake, Betty MacDonald

Data Warehouse IT and Facilities Team works quietly to the develop, maintain and warehouse the vast amount of data to ensure that the end product result is user friendly for the staff.

Steve White, Jim McNair, Simon Zhao, Stephanie Brett, Andrew Henry, Richa Dhungel

Tier 2 IT and Facilities Team strives to ensure the CCAC's IT needs are met. Their professional manner and collaborative relationship with their clients ensures a positive end user outcome.

Andrew Henry, Andrew Larson, Blake Kennedy, Dennis Sweet, Terry McKerral

Stratford Access/Placement Team is a team of dedicated individuals who possess a wealth of knowledge from a variety of backgrounds and no matter how busy they are, they always take the time to assist others.

Janet Hook, Karen Gibb, Kathy Nafziger, Janetta Weaver, Cheryle Harris, Angela Muir-Hughes

Finance and Business Intelligence Team is a caring group that work not only with all areas of the CCAC but also with system partners to create, train and provide a level of reporting not previously available.

Gert Crighton, Lisa Depencier, Hilary Di Crescenzo, Cynthia Fodor, Sandy Glanville, Cindy Le, Rebecca Margeson, Candy Mitchell, Jenny Saucier, Wendy Smith, Sharon Stanley, Dwayne Weaver, Jamy Brodt, Ron Hoogkamp, Martin Bauwens, Chris Hepple, Rob Ikeda, Kim Irwin, Krista McMullen, Jim McNair, Darko Pecanac, Sini Raulic, Danielle Tanguay, Steve White, Diana D'Avirro

Partnerships for Health (PFH) Case Management Team has built a mutual understanding of what they are trying to accomplish in their work with Primary Care. As quoted by multiple Primary Care teams, "The best thing that has come out of PFH is our relationship with CCAC."

Karin Burrows, Jacquie McGregor, Tracy Hartley, Jane McNalty, Leigh Anne Boese, Bonnie Salomons, Heather McCallum, Sherrie Rastel, Diane Dodge, Christy Winegarden, Joanne De Brabandere, Connie Vandersleen, Melody Williams, Janette Diebel, Micah McArthur, Sandra De Corte, Jean Fitzmaurice, Nancy Walker, Janette McClean, Sandy Coulter, Caroline McWhinney, Nancy McCartney, Mary Ducharme, Margareth Richards, Joyce Edwards, Sherri Zavitz, Deborah Zirk, Suzana Krstic, Kelly Lewis, Carolyn Coqu, Leah Fink, Krista Doan

Central Provider Support Team deal with urgent deadlines and phone calls daily with a professionalism, kindness and understanding approach.

Mary McIntyre, Gail MacDougall, Michelle Silverthorn, Alison Stoner, Tracy Loewen, Angela Howlett, June Seymour, Tracey Ouellette, Betty Radincovich, Dawn Wood



Honouring Nurses

Seaforth CMs Patty Little, Dianne Collyer and Keltie MacNeill-Keller enjoy treats in celebration of National Nurses Week (May 9 to 15).

Ice Cream, Ice Cream, we all scream for...

On May 6 the Seaforth Social Committee hosted a Mother's Day "Make your own Ice Cream Sundae" event in honour of all mothers and soon to be mothers in the office.

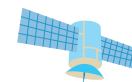


Left to right: Administrative Assistant Kaylene Rundle and CSA Lisa Blake help themselves to the treats!

IT Update

Wireless in the Hospitals

Where available, hospitals have allowed South West CCAC users to access their wireless network. Hospital wireless is currently available at most sites in Grey/Bruce, Huron/Perth, London and Elgin. The Oxford hospitals will be completed before December 31, 2011. Although wireless is available at most hospitals it may not be available throughout the entire hospital; the wireless network we are using is provided and supported by the hospitals and deployed based on the hospital IT requirements of each individual site. If you are working in a hospital site and not currently using the hospital wireless please contact the Service Desk for availability and setup instructions.



Equipped for Success

Changes to nursing trunk kits result in better care and more efficiency



No nurse leaves home without it: a "trunk kit" of medical supplies for clients who haven't yet started to pick their own supplies up at a depot. Thanks to a recent quality improvement project, the trunk kit has been standardized, the process has been streamlined, and care has been enhanced. The project was led by staff members in Performance Management and Accountability, who worked closely with care partners and vendors.

"We took a really thorough look at what nurses had in their trunks," says Gwen Vanderheyden, Regional Manager Client Service, "and then aligned it with RNAO best practice guidelines." As a result, nurses across the South West now have advanced wound care products at hand when they visit a client for the first time.

The project team also standardized the process of handing out supplies. In the past, if a CCAC case manager met with a wound care client in the hospital, the case manager would provide the client with the appropriate supplies to take home. If a client was discharged on a weekend or evening, or without the CCAC being notified, he or she would arrive home without supplies. Now all clients leave the hospital without medical supplies, and nurses are responsible for managing supplies needed for the

first week. "It used to be frustrating for nurses," says Vanderheyden. "They never knew what they would need. Now there are no surprises."

The process of re-ordering supplies for the trunk kits was also made simpler. Nurses now use a special order form and their trunk kit supplies are delivered to the most convenient depot, labelled with their name. Nurses sign an accountability agreement to ensure that they understand the whole process.

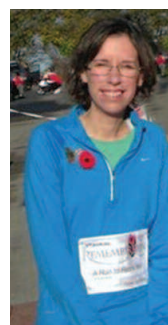
The change was introduced slowly, beginning with a team in Perth in August and moving gradually to full roll-out by the end of November. Weekly teleconferences were held with all partners to monitor progress and check on how clients were reacting.

The results are very positive. Hospital case managers estimate that not having to hand out wound care supplies saves them an average of four hours a month. The number of urgent orders is also down dramatically. Although advanced wound care products cost more than traditional ones, they reduce the number of dressing changes, and therefore the number of nursing visits needed. Says Vanderheyden: "People heal more quickly with the new products, so they're on service for weeks, rather than months."



Perfect in Pink

Meet Naleigha Jodie Grace Zehr, born March 8, 2011. Naleigha is the newest granddaughter for Grandma Marilyn Zehr (left), Paediatric CM in Stratford.



Awesome Marathon Runner

Keena Dorion, CM at the Stratford site, ran a chilly half marathon in Burlington on March 6, 2011 with a time of **2 hours and 13 minutes**. "It was an exhausting but fun day!" said Keena.

Welcome New Staff

London Jennifer Jackson, Client Services Manager and Anthony Koncan, Facilities Supervisor



This product is made from 100% recycled fiber.