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Community Care Access Centre
Centre d'accès aux soins communautaires du Sud-Ouest

Connecting with Care through Partnership

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Health Links Rev Up

The CCAC looks forward to being part of an exciting transformation in health care

On December 6, Minister of Health and Long-Term Care Deb Matthews publicly announced 19 Health Links partnerships, designed to improve the patient experience and outcomes and reduce costs. One will be led by the North Perth Family Health Team, and will engage the South West Community Care Access Centre (CCAC) and many of our partners in the region.

> "The goal is clear – it's about delivering the right care at the right time and place by the right provider, in a simpler, more streamlined way."

Recently a spate of different models for health system transformation have been proposed by political parties and professional organizations, says Nancy Dool-Kontio, the CCAC's Senior Director of Strategic Planning and Integration. Health Links is the Ontario government's vision. "The goal is clear – it's about delivering the right care at the right time and place by the right provider, in a simpler, more streamlined way," she says. "The expectation is that the system can work together to provide better care by putting the patient at the centre. In the process Health Links will improve access and reduce inappropriate use of health resources."

Among the highlights of the plan:

- Health Links will focus on the so-called "High Five" – the estimated 685,000 people, five percent of Ontario's population, who use approximately two-thirds of Ontario's health care dollars.
- Family doctors, specialists, hospitals, the CCAC, long-term care, community support agencies and others will work together to develop personalized care plans for each patient and ensure that they receive the support they need.
- Health Links partnerships will ensure that these complex patients have regular and timely access to primary care, get specialist appointments quickly, and are less likely to visit the emergency department or be hospitalized.
- Ultimately, Health Links will reduce the cost of delivering care, while keeping quality high.
- The model assumes that partners will work together to find efficiencies and reduce duplication.
- The Ontario government has pledged to support the partnerships by eliminating barriers and providing modest one-time funding for start-up costs.

Across Ontario, CCACs are committed to having care coordinators on site with every Health Link partnership within three months of announcement. In the South West, the CCAC's experience with Partnerships for Health and Partnering for Quality positions it well for the future. Both projects have successfully engaged primary care in partnerships with other care providers and improved the ability of partners to use Electronic Medical Records to exchange information.

The South West CCAC already has care coordinators on site with all family health teams in Perth County, and with more than 116 physicians in total across the South West. The CCAC will connect care coordinators with other Health Links as they come on stream. Care coordinators will:

- Provide intensive case management support to the High Five
- Be on site on a regular basis
- Review common patients
- Work on screening and early identification
- Support increased use of practice guidelines and tracking of clinical indicators

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A Message from
CEO Sandra Coleman

Strong Platform, Commitment to Change

These days it sometimes seems as if health system reform is a political football, rather than the urgent necessity it should be.

CCACs have certainly been kicked around quite a bit lately! Some have proposed eliminating CCACs and folding all home care into hospitals. Some have proposed eliminating CCACs and making home care the responsibility of primary care. Some have simply identified home care as "broken" and in need of wholesale reform.

Not surprisingly, Ontario's CCACs don't see it that way. We believe that CCACs provide high quality care and good value for money.

- Ontario's 14 CCACs provide 24/7 access to home care, community care and long-term care services.
- Our care coordinators are dedicated professionals who help people get the care they need in their homes and communities, so they can heal at home, stay in their homes longer, and when home is no longer possible, find long-term care or other options.
- Last year alone, CCACs supported more than 600,000 Ontarians with coordinated home and community service – one in every 22 people in this province.
- More than 90% of CCAC patients rated their services as good or excellent. (In the South West, the figure is 92%.)
- CCACs have reduced administrative spending to 4.6%. (In South West the figure is 3.9%.)
- CCACs' Home First initiative has resulted in a 21% increase in the number of patients who returned home after hospitalization in the last two years. (In the South West the figure is 56%.)

Ontario's CCACs take health system reform very seriously. We understand that the status quo is not an option. At the same time, we don't think a massive disruption in home and community care is the way to go, nor the creation of a "new and improved" system that is less integrated, more siloed and less cost-effective.

We have a strong platform that provides a single point of access to high quality care from Tobermory to Lake Erie. As you will read on page one, we are enthusiastic participants in the new Health Links partnerships. We are also undertaking our own internal improvement initiative called Transformation Begins at Home.

We look forward to working with you, our system partners, to integrate, improve and streamline care, making a better experience and better outcomes for our shared patients. We have the experience, expertise, knowledge, creativity, and compassion to make it happen.

Health Links Rev Up *continued from page 1*

- Connect patients with all appropriate home and community services
- Provide updates when patients are admitted to the CCAC, when there are significant changes, and when they are discharged from hospital

The next step for the North Perth FHT and its partners is to develop a business case and submit it to the government by late February. Other Health Links in the South West and elsewhere will be approved on an ongoing basis, when they meet readiness criteria.

"We look forward to coming to the table and working with our fellow health system partners in the best interests of patients," says Dool-Kontio. "This is an opportunity for real change."

Seniors Strategy Welcomed

The South West CAC enthusiastically supports the recommendations released recently in Ontario's seniors strategy prepared by Dr. Samir Sinha.

The report calls for increased funding for home and community care, to help more seniors stay at home safely. It also suggests that community support service agencies and the CCAC work together to ensure that CCACs are caring for higher needs clients and community agencies are supporting others. This fits well with the CCAC's commitment to provide care based on the needs of patient populations and focusing more resources on complex and chronic clients. Says CEO Sandra Coleman: "We look forward to working with our system partners to implement the strategy and provide more coordinated and effective care to Ontario's seniors."

Model, Model, Who's got the (Right) Model?

Two recent opinion polls suggest that Ontarians aren't in any hurry to turn community health care upside down.

Ted Ball is an experienced health care consultant who has worked as a speech writer, policy advisor and Chief of Staff to several Ontario Ministers of Health and consulted with CEOs of hospitals, CCACs, community services and think tanks across the province. Recently he sent out a survey on health system reform to some 800 people who subscribe to his blog (@tedball.com) and Linkedin page, and received 137 responses. Most of the respondents are senior leaders in hospitals, LHINs and CCACs, and some are government policy experts.

"…only 8% of respondents agreed that CCACs should be shut down, with 61% opposed and 31% uncertain."

Here's what the survey found.

- 75% of respondents believe Conservative leader Tim Hudak's suggestion to get rid of LHINs and CCACs and replace them with hospital "hubs" is "not at all" or "to a little extent" likely to lead to a system that will meet the health needs of Ontario's population.
- 85% believe that Minister Matthews' focus on functional reform of primary and community care as the hub of the system is likely to create a system to meet the needs of Ontarians to "some", "a good" or "a great extent."
- 79% believe the NDP's emphasis on health promotion, illness prevention and community care will contribute to meeting the needs of Ontarians to "some", "a good" or "a great extent."

In late December, a political poll was released by the *Toronto Star*, based on interviews with 1,000 people. It found that only 8% of respondents agreed that CCACs should be shut down, with 61% opposed and 31% uncertain.

"Community care got picked on this fall," says Ball, "People were saying that CCACs were a bunch of bureaucrats who hadn't accomplished much. That's just not true."

How to Ace Accreditation!

In November the South West CCAC underwent accreditation, achieving "Accreditation with Exemplary Standing."

How did the CCAC achieve such an outstanding result on its first ever accreditation? Accreditation Lead Nupee Hardeep Sadra says an important success factor was the involvement of every part of the CCAC in the preparations. "It wasn't just each portfolio, but every member of the organization, from the CEO to the front lines," she says.

Cathy Kelly, the Client Services Manager who led accreditation preparations in her portfolio, says that an overall lens of patient safety, quality and risk mitigation drove the work done by her colleagues. "We wanted to implement whatever strategies we could to ensure that patients have the best quality of service and care," she says. A series of "mock surveys" were completed by all teams and Professional Development (PD) sessions were held to review survey results and introduce new processes.

Like Kelly, Sadra believes it was important to embed accreditation preparations in a broader context. "When we made changes, we knew we weren't just doing it to tick off boxes," she says. "We were doing it because our focus is on safe, high quality Client-Driven Care." All 14 CCACs have now been accredited.

Minister Announces Additional $9 Million in Funding for CCAC

On November 22, Deb Matthews, Minister of Health and Long-Term Care, announced additional funding of $14.3 million to help the South West LHIN and many of its funded organizations support care at home and in the community across the region. The South West CCAC received approximately $9 million of the total. "We've made the right choice to invest our precious health care dollars where they are most needed," said Matthews. "This will allow more Ontarians to live independently at home, and reduce pressure on hospitals and long-term care homes."

Ensuring the Safety of Patients with Complex Needs

New tools help ensure that patients can get home from hospital safely

In 2004, a research report found that half of all adverse events in Canadian hospitals happen during or after surgery. To make surgery safer, a series of three safety checklists were developed. "When the checklists were first developed," says Donna Ladouceur, CCAC Senior Director Client Services, "surgeons and hospitals were concerned that the new procedures would slow things down. But now they wouldn't think of doing surgery without completing the checklists."

Ladouceur says there's a parallel with the CCAC's new tools and procedures for care planning with complex patients about to leave hospital.

Over the past 18 months, with funding from the South West LHIN, the CCAC and its hospital and community partners have implemented the Home First approach in London, St. Thomas, Ingersoll, Tillsonburg, Owen Sound and Woodstock. Home First enables more complex patients to get home after a hospital stay by providing intensive CCAC care coordination and home care, including in some cases 24/7 personal support, and other community supports. More than 300 patients have now come home from the hospitals on Home First, and two-thirds have been able to remain at home.

But not every patient is right for the Home First approach, Ladouceur says. The CCAC has developed a care conference template with a checklist to ensure that patients and families can be supported safely at home. Going forward, care conferences will be held for all patients whose care needs exceed existing service maximums.

Ladouceur says that good care coordination is about the right care in the right place. "Sometimes that means deciding a patient can't be safely discharged home from hospital."

Gord Milak, Senior Director, Performance Management and Accountability notes that safety at home is a responsibility shared by the CCAC, care partners and providers, and patients and caregivers. Patients must have a back-up plan for times when a service provider can't get to them, such as during a snow storm.

Milak says that the new tools and procedures are all about meeting the CCAC's commitment to the patient experience. "We've been making big improvements in patient transitions. Now we're refining the process to ensure safety is considered at every step of every process."

CCAC Launches Long-Term Care Home Waitlist

The Auditor General's report issue in December took a close look at long-term care (LTC) homes in Ontario. The report noted that CCACs were managing the placement process well, and made some suggestions for changes, all of which are supported by CCACs. "We appreciated the Auditor-General's comments on the positive impact of investments in home and community care in enabling people to remain in their homes," says CEO Sandra Coleman.

Beginning in January, the CCAC will publish monthly reports on waiting lists at all 77 long-term care homes in the South West on its public website. Says Coleman: "We're hoping this information will help patients and their families better understand the system and make the right choice for them."

Waiting list information for LTCs and information about the LTC care process can be found on the South West CCAC web site. Descriptions and short video tours of each home are available on the www.thehealthline.ca.

South West CCAC office contact Information:

London	519 473 2222	Owen Sound	519 371 2112	Seaforth	519 527 0000
St. Thomas	519 631 9907	Strathroy	519 245 3233	Stratford	519 273 2222
Walkerton	519 881 1181	Woodstock	519 539 1284	www.sw.ccac-ont.ca	

www.thehealthline.ca

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