



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

2008-2009 Annual Report

Chair:

David Lehtovaara

Executive Director:

Marina Ellinson / Mary Kardos Burton

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A Message from the Executive Directors and Chair



In 2008-2009, the Central West CCAC embarked on the development of an Accountability Framework System (AFS) to help align all staff activities and organizational initiatives in support of a common vision. The framework, which is outlined on page 6 of this report, includes five factors which define our organizational direction and drive the Central West CCAC toward success:

- Quality Client Care,
- Superior Team,
- Improvement and Innovation,
- Effective Partnerships, and
- Wise Use of Resources.

These success factors are both operational and aspirational, taking into account our tremendous accomplishments to date and providing a context for moving forward.

They are thus a logical starting point for a reflection on our activities over the past year. Indeed, this annual report has been structured to outline how our activities over the past year align with our accountability framework.

Much happened in our sector during the 2008-2009 fiscal year, and we are proud to have supported so many local and provincial initiatives. We would be remiss if we did not acknowledge the contributions of our Board of Directors, senior administrative team, service providers and partners over the past year, as the Central West CCAC continued to evolve in a dynamic, ever-changing health care environment.

It is our collective belief that once again, this organization has continued to provide excellent, compassionate care to the residents of the Central West LHIN. Our

success in this regard is a testament to the capabilities, spirit and dedication of Central West CCAC staff, and their continued commitment to the five measures that drive our success.

David Lehtovaara, Chair

Marina Ellinson
Executive Director (to October 2008)

Mary Kardos Burton
Interim Executive Director,
(October 2008 to March 2009)

Central West CCAC Leadership



Our Board of Directors

(Order-in-Council Appointment Date)

David Lehtovaara, Chair *(November 15, 2006)*

Mathew Alexander *(October 11, 2006)*

Gordon Gallagher, Treasurer *(February 21, 2007)*

Bhupinder Sharma *(October 11, 2006)*

Carmine Domanico *(March 21, 2007)*

Mary Wheelwright *(December 13, 2006)*

Central West CCAC Leadership



Our Administrative Leadership Team

Executive Director

Marina Ellinson (to October 2008)
Mary Kardos Burton (Interim: October 2008 – March 2009)

Senior Director, Client Services

Dilys Haughton

Senior Director, Corporate Services and Human Resources

Allan Madden

Senior Director, Strategic Planning & Integration

Christine Nuernberger

Director, Client Services

Leanna Ringler

Director, Contracts and Procurement

John Simpson, Director, Procurement and Facilities (to June 2008)
Suzanne Jones, Director, Contracts and Procurement (August 2008)

Director, Information Technology and Systems

Igor Orel

Director, Quality

Adil Khalfan (to October 2008)
Arvind Sharma (November 2008)

Manager, Communications

Todd Leach (to October 2008)
Laura Glynn (January 2009)



Our Vision, Mission & Values

Our Vision

To be recognized across the country as Centres of Excellence for integrative community services and health information by 2017.

Our Mission

Our passion is health; our strength is our people and our partners; and our promise is compassionate care. On a day-to-day basis, we are:

- an easy-to-use gateway to information and high quality health services;
- an innovator seeking to optimize people's health, wellbeing and autonomy;
- an integrator partnering with others to reduce the barriers to access, respect diversity and improve the care experience of people across the health care continuum;
- an employer of choice that believes in the remarkable capacity of our people to continuously learn and make a difference;
- an open communicator who promotes positive relationships; and
- a steward of public resources that is openly accountable and contributes to a sustainable health system.

Our Values

Our clients come first. We demonstrate this commitment through active listening, showing compassion, encouraging independence, acting as advocates, and facilitating access to quality care.

Respect is critical to all good relationships. It underscores all our interactions with clients, staff and community partners.

Learning environments are empowering. We explore and adopt new ideas to improve our practice.

Diversity is an asset. It creates a richness of experience and an appreciation of other possibilities.

We are accountable. We strive for consistency, fairness, and optimal outcomes through the wise use of resources and the measurement of results.



An Accountable Organization

In 2008-2009, the Central West CCAC embarked on the development of an Accountability Framework System (AFS) to help align all staff activities, as well as the direction and initiatives of the organization, in support of a common vision. The framework was completed in December 2008 and now serves as the basis for aligning our efforts with our corporate vision and identified success factors.

Central West CCAC Accountability Framework Success Factors

Quality Client Care

- We coordinate the right service, in the right place, at the right time.
- We drive the use of evidence-based leading practices & measure for quality.
- We ensure timely, compassionate & professional service.

Superior Team

- We provide the right accountability, authority, responsibility and tools to do the job.
- We support and provide opportunities to learn & grow.
- We are inspired to achieve a common goal.

Improvement & Innovation

- We build a culture of openness where people are encouraged to speak up & offer new ideas.
- We constantly strive to make things better.
- We look for new opportunities for information, education and research.

Effective Partnerships

- We link our clients to health care, community services and information.
- We fulfill our role in the continuum of care within the context of provincial & local priorities.
- We initiate creative partnerships to enhance the delivery of health care.

Wise Use Of Resources

- We mobilize the right people, doing the right thing, at the right time.
- We collaborate with our partners to efficiently deliver services.
- We use resources to get optimal outcomes.



Quality Client Care

- ***We coordinate the right service, in the right place, at the right time.***
- ***We drive the use of evidence-based leading practices & measure for quality.***
- ***We ensure timely, compassionate & professional service.***

Emergency Room—Alternate Level of Care (ER-ALC) Initiatives

The Central West CCAC is committed to reducing the number of patient days spent in alternate level of care (ALC) beds as a major priority for all health system partners, the Ministry of Health and Long-Term Care, and Local Health Integration Networks. A number of initiatives are underway that focus on either reducing ALCs and improving patient flow through the health system, or enabling our efforts to provide the right care, at the right place, at the right time, through local activities involving health system partners. In 2008-2009, we focused on the following initiatives:

Partnerships with Long-Term Care Homes

The Central West CCAC initiated Long Term Care Network meetings to build stronger linkages between long-term care (LTC) homes and local hospitals, community partners, the Central West LHIN and Ministry of Health and Long-Term Care. The meetings provide a forum to identify opportunities, to improve the quality of care residents receive and to ensure the long-term care, acute care and community care linkages are working efficiently and to the benefit of our clients. The Network provides an opportunity for open dialogue, information-sharing and collective problem-solving.

Over the past year, the Central West CCAC also worked with LTC homes to improve the response time to applications. In addition, the median time to place clients from all hospital sites to LTC homes decreased from 51 to 44 days during 2008-2009, demonstrating our commitment to providing services that are responsive to client need.

Improved Wound Care

In 2008-2009, the Central West CCAC undertook a prevalence study aimed at improving wound care for our clients. The study was a partnership with leading medical experts, nursing service providers, product manufacturers, and medical supply and equipment companies. The results were used to develop and implement an education program for nurses who provide wound care, focusing on best practices. Processes were put in place to monitor and track client outcomes and to ensure clients were benefiting from the changes. In 2009-2010, further improvements to wound care programs will be considered as part of our implementation of nursing clinics in Central West.



Quality Client Care

Emergency Room—Alternate Level of Care (ER-ALC) Initiatives — cont.

Wait at Home

Wait at Home, a new initiative in the Central West CCAC, allows patients in the hospital waiting for a long-term care bed to return home until the bed becomes available. In addition to providing more options to seniors and accommodating their preferences while they wait, the program also supports a reduction in hospital alternate level of care (ALC) days.

Wait at Home was launched in the Fall of 2008. The Central West CCAC worked with hospital discharge planners at William Osler Health Centre and Headwaters Health Care Centre to identify patients who could be discharged home if they were provided with enhanced home care services (nursing, personal support or rehabilitation services) while they waited. As a result of this program, 492 hospital days were available to patients who needed an acute care setting and 30 percent of the clients admitted into this program remained at home after four months.

Palliative Care Case Management Implemented

In 2008-2009, palliative care case management was implemented at the Central West CCAC. Three case managers with specialized knowledge and expertise in palliative care now act as a resource to clients, family members and other case management staff to meet the needs of palliative and end-of-life clients.

Case Managers Support Hospital Emergency Departments

To assist in improving patient flow throughout the emergency departments at Brampton Civic and Etobicoke General Hospitals, Central West CCAC case managers were located in the emergency departments (EDs) at both sites from 8:30 am to 6:00 pm, 6 days a week. Their presence in this specific area of the hospitals resulted in a more responsive service to clients. Working closely with the staff of the emergency department, case managers can quickly step in and assess how the clients can most easily be transitioned back home with the community supports they require. The partnership between the emergency and CCAC resulted in a 30 percent increase in referrals to the CCAC, a figure which indicates a concerted effort to see patients receive the right service, in the right place at the right time.



Quality Client Care

Emergency Room—Alternate Level of Care (ER-ALC) Initiatives — cont.

Short-term Emergency Crisis Care

The Short term Extraordinary Circumstances program was also implemented in 2008-2009. This program enables clients to stay at home with additional services to support them when unexpected events result in changes to their needs. By proactively addressing these needs, the CCAC has helped clients avoid unnecessary trips to the emergency department or admission to the hospital.

Extended Length of Stay Rounds

Weekly rounds were implemented at the Brampton Civic and Etobicoke General Hospitals. Chaired jointly by CW CCAC and hospital staff, clients experiencing an extended length of stay or facing unique challenges to their discharge were reviewed. With focused and collaborative thinking between hospital and CCAC staff, solutions were developed to make it possible for 43 clients to transition to a more appropriate setting that could better meet their needs and personal preferences.

Enhanced End-of-Life Care

This program provided additional services to enable clients to stay at home when possible for their end-of-life care.

Case Management Model

- We continued to improve the client services model to improve quality of client care, align with health system partner needs and improve efficiency. Elements focused on an improved client experience include:
 - Specialized, dedicated case management for palliative, end-of-life and short stay/acute clients has increased our ability to focus on the unique needs of these clients when coordinating their care.
 - Placement coordinators were hired and the placement team processes revised resulting in improved customer service and more efficient placement practices.
 - Work processes were redesigned in the Access team resulting in reduced time to process referrals and improved telephone responsiveness to client calls. A 'back-line' telephone number was implemented to improve access for service providers, resulting in significantly reduced call-drop rates.



Quality Client Care

Emergency Room—Alternate Level of Care (ER-ALC) Initiatives — cont.

Business Process Improvement Project

A significant project was undertaken to standardize business practices across the entire Central West geography. All policies and procedures were reviewed and forms updated. The project is a key part of preparation for implementation of the a Electronic Health Record.

Health Care Connect

In February 2009, the Ministry of Health and Long-Term Care launched *Health Care Connect*, a program to help Ontarians without a family health care provider find a physician or nurse practitioner who is accepting new patients in their community. At the Central West CCAC, the program is managed by two nurses (called *Care Connectors*) who have significant experience and an interest in working with primary health care providers. To date, our Care Connectors have been working with local physicians to connect unattached patients in the Central West LHIN with a primary care provider and look forward to making more connections in the coming year.



Quality Client Care

Aging at Home

Balance of Care Research

This year, the Central West CCAC received funding through the Aging at Home strategy to conduct a Balance of Care research project in partnership with Dr. Paul Williams of the University of Toronto. The research identified “at risk” seniors on the long-term care home placement list and classified them into multiple and relatively homogeneous groups using available assessment data.

Researchers then selected groups with greater than 5% of the “at risk” seniors and created typical vignettes for each based on actual clients and their care characteristics. An expert panel of case managers and colleagues from community support agencies were tasked with constructing appropriate care bundles for each vignette and estimating the related costs.

Based on this data, the research team was able to determine the total number of seniors who could “age at home” (rather than in a long-term care facility) with less or comparable costs to the system, and comparable or better outcomes for seniors and their care partners. The Balance of Care project has become an excellent planning tool, as it allows the CW CCAC to better understand which services are required to best care for our population.

An Expanded Information and Referral (I+R) Function

The Central West CCAC also received funding to support the promotion of a “seniors’ hotline” in Central West, a priority identified by our LHIN as a key deliverable for the Central West CCAC.

The funding was particularly timely given that 310-CCAC, a provincial initiative, was in development to provide accessible information to all Ontarians through a single, toll-free telephone number. Certified information and referral specialists were trained to support our local implementation of 310-CCAC, helping to meet the needs of the Central West population while supporting the LHIN priority of providing a single phone number for all residents, and particularly for seniors.

As a result of this funding, promotional materials specifically targeting the senior population were developed and will be used to coincide with the provincial launch of 310-CCAC.

Superior Team



- ***We provide the right accountability, authority, responsibility and tools to do the job.***
- ***We support and provide opportunities to learn & grow.***
- ***We are inspired to achieve a common goal.***

Internal Communication Strategies Better Connect Staff

In 2008-2009, improved internal communications facilitated a heightened awareness of the many new programs being introduced to meet client needs. Internal communication tools such as newsletters, bulletins, town halls and all-staff forums strengthened morale and supported employees by sharing news and information across the organization.

Successful Contract Negotiations

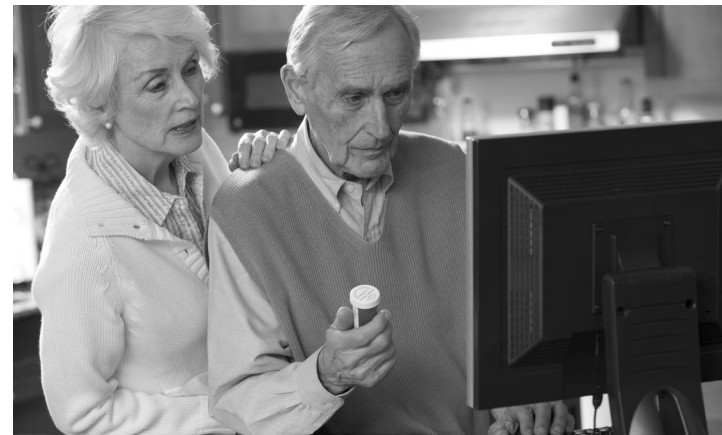
The Central West CCAC collaborated effectively in negotiating a new Collective Agreement with CUPE Local 966 for the term April 1, 2008 to March 31, 2011. The contract was ratified by CUPE members on June 24, 2008. This resulted in the harmonization of five collective agreements and one non-union group into the newly negotiated contract. The CW CCAC was mindful of provincial negotiation goals and was very successful in observing full alignment with the provincial bargaining mandate.

Job Evaluation Project Complete

As part of our efforts to build a superior team, the Central West CCAC recently adopted the provincial Job Evaluation System and customized it to reflect our organizational make-up. The Job Evaluation System has been designed to measure the nature of work undertaken by non-unionized positions within the Community Care Access Centres of Ontario, and is comprised of eight distinct factors which assess the skill, effort, responsibility and working conditions associated with all positions. Use of this system has resulted in the development of an equitable pay structure that aligns with the labour market conditions.

Central West CCAC Award Nominees Proceed to Provincial Level

The Central West CCAC was pleased to submit three nominees to the Ontario Association of Community Care Access Centres (OACCAC) awards program in June 2008. Nominees represented Central West at the provincial award ceremony in three categories: the Staff Award of Excellence, Team Award of Excellence, System Partnership Award of Excellence. In addition to their outstanding work, the nominated individuals were also noted as having demonstrated their commitment to living the Central West CCAC values.



Improvement & Innovation

- ***We build a culture of openness where people are encouraged to speak up & offer new ideas***
- ***We constantly strive to make things better***
- ***We look for new opportunities for information, education and research***

Establishing a Quality Framework

Significant progress has been made in establishing a Quality Framework for the CW CCAC, with a focus on the following in 2008-2009:

- A vision for a Quality Council was approved by the CW CCAC Board of Directors. This council will support the Board of Directors' Client Services and Quality Committee, and assist the organization in establishing quality goals and priorities and in monitoring key performance targets.
- The provincial Client Experience Survey tool was finalized in keeping with the vision of the Ontario Health Quality Council. The actual field work for the surveys will commence in June 2009.
- The existing Significant Event Reporting System was reviewed and an improved tool was selected to more efficiently monitor and manage the safety of client care and the quality of the service delivery environment.

Enhanced Decision Support

The Central West CCAC has enhanced its decision support capacity to carry out the work of verifying data and ensuring that data is accurate, useful, and meaningful to the service planning process. A comprehensive set of monthly Operational Indicators Reports assists managers in tracking progress and assessing trends. Data analysis support was provided to a number of initiatives such as ER/ALC, Case Load Work Balancing and LHIN Performance Reporting. Extensive analytical support is also regularly provided to assess service provider performance. In addition, a number of client care statistics and service utilization reports are generated to support financial reporting.

Performance Indicators Aligned with Provincial Strategy

In keeping with the provincial service performance strategy, the CW CCAC has improved its monitoring of service performance indicators in an effort to better support quality client care. Staff and service providers worked together to ensure that service provider reporting templates were implemented to reflect the provincial requirements. The CW CCAC has also established a scorecard to help measure quality in service, and will develop further quality initiatives in the coming fiscal year.



Effective Partnerships

- ***We link our clients to health care, community services and information.***
- ***We fulfill our role in the continuum of care within the context of provincial & local priorities.***
- ***We initiate creative partnerships to enhance the delivery of health care.***

Connecting with our Community

Nurturing connections with the communities we serve is of keen interest to the Central West CCAC. In 2008-2009, staff participated in health fairs, open houses, school information sessions and community events to raise awareness of CCAC services and answer questions related to services provided.

Emergency Department (ED) Notification System

In partnership with the Central West Local Health Integration Network (LHIN), William Osler Health Centre and Headwaters Health Care Centre, the CW CCAC implemented an Emergency Department Notification System. This system was developed to help hospital partners identify CCAC clients who present in their emergency departments, allowing CCAC staff to become involved early in the planning for care coordination to support the client. Individuals over the age of 85 who present in the emergency department also trigger a notification, putting CCAC in contact with clients who may very well benefit from some assistance navigating the spectrum of community services and supports available in the Central West.

Total Hips and Knees Wait Time Strategy

The CW CCAC exceeded our Hips and Knees targets (455) for 2008-2009. This success was due to increased collaboration with William Osler Hospital, resulting in service being provided to 477 clients who have undergone total hip or total knee replacements.

Central West Palliative Care Network (CW PCN)

The CW PCN held its inaugural event in Orangeville on March 25, 2009. The event was well attended by health service providers from all sectors, and showcased the palliative care programs offered by different sectors within Central West's health care system, including the CCAC, hospitals, long-term care homes, Pain and Symptom Management consultants and hospices. Evaluations from participants were highly favourable.



Effective Partnerships

Information and Referral Consultation

In February 2009, twenty-two organizations participated in CW CCAC consultations on information and referral for seniors, an initiative supported by the Central West LHIN's Aging at Home - Year One Strategy. The consultations invited contracted services providers and community service agencies to assist us in the planning of the service, which builds upon the provincial 310-CCAC strategy and responds directly to what seniors told the Central West LHIN they wanted to support their ability to understand options and access community services. A broad range of themes emerged from the consultation, many of which clearly underscore the need for an integrated approach to providing information and referral services to the community. A marketing and communications plan has been developed based on the consultations and many tactics will be employed by the CCAC as it publicly launches 310-CCAC in Central West.

Partnership Results in Decreased Paediatric Wait Lists

By working with our service providers to develop and implement a best practices model for speech language therapy services, the Central West CCAC significantly decreased wait times for paediatric speech language pathology (SLP). The median wait time was also reduced from 112 days in May 2008 to 24 days in November 2008, marking a significant improvement in our ability to respond in a more timely fashion to clients.

Meetings Facilitate Dialogue Between Central West Service Providers and CCAC

In the fall of 2008, members of the senior team held 46 face-to-face meetings in with all CW CCAC service providers and vendors to encourage open dialogue and information-sharing between our various organizations. Central West CCAC staff asked these key partners for their feedback and provided operational information and updates on upcoming CCAC initiatives. Service providers now meet with CW CCAC staff a minimum of eight times annually, with quarterly meetings hosted by the Client Services department and separate, quarterly meetings hosted by the Director of Contracts and Procurement.

Procurement Project Strengthens Partnerships with Service Providers

Working with our service provider organizations, CW CCAC staff undertook a procurement project to identify a standard list of medical supplies and equipment that is available to CCAC clients. While merging and consolidating the lists created by our four legacy CCACs resulted in greater efficiencies for our organization, equally valuable was the strengthened partnerships with our service providers, who provided helpful insight into the project.

Effective Partnerships



Partner Newsletter Launched

The Central West CCAC's evolving and growing role in an integrated health system is now being highlighted to external partners and stakeholders through a new publication called *Community Care Currents*. The newsletter focuses on timely and relevant topics that reflect our contribution to helping address system-related issues through our community-based and long-term care activities. *Currents* is published three times annually and feedback from partners and stakeholders to date has been extremely positive.

A Sector-Wide Partnership: Developing New Brand for all CCACs

During 2008-2009, CCACs across the province worked together to develop a new brand for our sector. This inter-sectoral partnership resulted in not only a new visual identity for CCACs, but also a renewed business strategy, focused on providing outstanding client care to every person, every day. Throughout the process, the Central West CCAC contributed ideas and worked with our sister organizations to produce a brand that reflects the important work taking place in our sector across Ontario. CCACs will launch our new brand in April 2009.



Wise Use of Resources

- ***We mobilize the right people, doing the right thing, at the right time***
- ***We collaborate with our partners to efficiently deliver services***
- ***We use resources to get optimal outcomes***

Breakdown of Service Types & Expenditures

	BUDGET \$'s	ACTUAL \$'s
CONTRACTED OUT EXPENSES		
Personal Support and Respite	18,742,945	19,450,658
Nursing Visits	12,766,798	11,752,551
Nursing Shifts	2,962,529	2,893,586
Occupational Therapy	3,396,356	3,093,093
Physiotherapy	3,058,309	2,485,175
Speech Language	2,780,067	2,672,989
Social Work	422,942	319,298
Nutrition	278,329	247,285
Total contracted out expenses	44,408,276	42,914,635

Number of Unique Clients Served by Discipline

	# of Unique
Personal Support/Homemaking	5,901
Nursing Visits	8,998
Nursing Shifts	80
Occupational Therapy	6,911
Physiotherapy	4,381
Speech Therapy	3,003
Nutritional Counselling	611
Social Work	590
Respite (Hours)	84
Total Number of Unique Individuals	20,118



Future Directions

The following initiatives have been identified as priorities for 2009-2010:

A Continued Commitment to Being Part of the Emergency Room / Alternate Level of Care (ER/ALC) Solution

Central West CCAC will continue to refine our ER/ALC strategies as part of our contribution to the Central West's ER/ALC solution. We look forward to working with our system partners as we collectively pursue initiatives and develop strategies that meet the needs of clients.

A New Brand for CCACs

In April 2009, CCACs across the province will roll out a refreshed brand, including common mission and vision statements and a new visual identity for all CCACs. Work to develop the new brand has been underway since the Spring of 2008 and has included input from all 14 CCACs and their key stakeholders. This forward looking business strategy will ensure CCACs are devoting their energies to implementing the best solutions and programs for clients.

310-CCAC

A new, provincial, toll-free telephone number (310-CCAC) has been developed to assist Ontarians in accessing the health care services they need. When launched early in 2008-2009, this number will give residents across the province access to skilled health care professionals who will provide comprehensive, up-to-date information on home and community-based health services.

In addition to calling 310-CCAC, Ontarians will also be able to visit a related website to search for health care services in their area. This robust site will be backed by a comprehensive database that allows users to search for health information and resources, as well as locate their nearest CCAC, hospitals, long-term care homes, pharmacies, etc. on a map.

A Refreshed Intranet for the Central West CCAC

In the first quarter of 2009-2010, the Central West CCAC will launch an improved intranet to assist staff in their day-to-day work to service client needs. Representatives from each department will be involved in the development process to ensure the resulting site is as user-friendly, intuitive and efficient as possible. The new intranet will also reflect the CW CCAC's work to harmonize the policies, procedures and processes of our four legacy organizations, creating in a truly supportive tool for all staff.

Provincial Client Experience Survey

Beginning in June of 2009, the Central West CCAC will participate in the first wave of surveying for its annual client experience survey. When complete, this work will allow CW CCAC to measure client satisfaction, enabling us to better understand our strengths and areas for improvement.



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