Winter 2009

CONNECTIONS

Community Care Information Management Newsletter

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Projects thank and salute CC e-Health Council

Congratulations and many thanks to the members of the Continuing Care e-Health Council. These members of the province's last remaining e-Health Council held their final meeting on November 24, 2008. The individual program projects in their present form continue, governed by Steering Committees that currently include a number of members from the Council.

This very effective Council will always be appreciated for achieving so much in partnership with clients and other stakeholders since 2005.

Some of the Council's many accomplishments are:

- establishing province-wide data, clinical and business standards
- piloting, developing and implementing FSMS as a common approach for CCACs to collect and report information for evidence-based decision making
- providing standardized and unified intake practices across CCACs using LSAS and CIAT
- implementing province-wide standards for the collection of clinical and administrative data within CMH
- completing the rollout of Ontario Healthcare Reporting Standards to all CMH&A organisations
- piloting a common assessment tool for CMH
- implementing RAI-MDS 2.0 into LTCH; and
- launch of MIS into CMH/CSS/LTCH sectors and HRIS into CSS/CMH sectors.

Participants at the luncheon after the final meeting were, (l to r): Dennis Ferenc, MOHLTC; Scott Mitchell, CMHA; Natalie Avery, CAMH; Susan Thorning, OCSA; Lewis Hooper (e-Health Lead, Central East LHIN), Laurie Hicks, SSHA; Sue VanderBent, OHHCPA; John McKinley, HSIMI, MOHLTC; Donna Rubin, OANHSS; Janet Lambert , OLTCA; Ron Rogers, SSHA. Not in the photo are Council members Kevin Arbour, OACCAC; Rodney Burns, North Simcoe Muskoka LHIN; Tim Burns, PICB, MOHLTC; David Kelly, OFCMHA; Christina Hoy, Health Data Branch, MOHLTC; and Linda Sibley, Addiction Services; Vida Vaitonis, CCAC.

RAI-MDS rolls out to all LTC homes in Ontario

On January 7, 2009, the Ministry of Health and Long-Term Care announced plans to proceed with implementing the Resident Assessment Instrument Minimum Data Set (RAI-MDS) 2.0 common assessment tool in all of Ontario's long-term care homes.

The RAI-MDS 2.0 encourages a full picture view of the resident as well as a coordinated problem solving approach. It promotes a holistic and interdisciplinary care plan by involving residents and families. It also empowers home administrators by providing the information necessary to improve care processes and evaluate quality improvement.

The consistent and comprehensive data generated by the RAI-MDS 2.0 also enables informed decision-making by LHINs for policy development and sector planning.

All homes in Ontario can now look forward to the proven benefits of using the RAI-MDS 2.0 instrument, including being able to:

- Improve the quality of resident care due to an interdisciplinary approach to resident assessments
- Identify potential care problems, monitor progress and promote rehabilitation, prevention and restoration activities over time
- Develop comprehensive, individualized plans of care through increased resident and family participation
- Standardize information about residents that can easily be interpreted and shared
- Access reports for decision support, benchmarking and service quality

These enhanced client outcomes and quality delivery improvements have already been evident in the 217 early adopter homes. Thanks to their dedication and commitment, the vision of a standardized, comprehensive and resident-focused approach to care can now be realized throughout the province.

"The main person that benefits is the resident."

"The RAI-MDS is so resident-focused, that they [residents] are at the centre of virtually all of the initiatives being worked on in our home," explains Kim McCarthy a RAI Coordinator at Saugeen Valley Nursing Center in Mount Forest. "It makes a huge impact on long-term care and the main person that benefits is the resident, which is the way it should be."

As always, LTCH CAP will provide all remaining homes with the training, education and support needed to accomplish implementation successfully. Implementation is scheduled over three phases, beginning in March 2009.

Together, residents and staff in every home across the sector will experience the benefits of common assessment practices in the near future.

If you have any questions, contact the LTCH CAP Support Centre at 1.866.909.5600 or 416.314.7365 or ltchproject.moh@ontario.ca.

Program gets new name: CCIM

CCIM Community Care Information Management
ACCESS TO INFORMATION

The Continuing Care e-Health program has been renamed Community Care Information Management (CCIM) to reflect the ongoing evolution of our health care sector. This name and tag line "Access to Information" reflect the program's vision of effectively managing access to information to achieve a continuum of care. The new name also better aligns with our sponsor, the Health System Information Management and Investment division of MOHLTC.

The CCIM program continues to deliver Common Assessments and Business Systems projects across the LTCH, CMH&A, CCAC and CSS sectors by leveraging the leadership role of LHINs. The changing community care landscape reinforces the importance of our focus on providing community care solutions for accessing and reporting timely, standard, secure and comprehensive information.

Our new name does not impact the high quality of service our team is committed to delivering. Rest assured that if you are currently involved in a CCIM project pilot or implementation, you will work with the same familiar faces. If you are not yet involved, please contact us for more details about how you can engage with our Common Assessments projects (CAPs), Management Information Systems (MIS), and Human Resource Information System (HRIS) projects!

CCIM helps LHINs improve care delivery quality

This issue of CONNECTIONS highlights the quality delivery benefits that LHINs can expect from implementing CCIM common assessment tools and business systems solutions. CCIM's systems and processes lead to implementing best practices for care delivery, which:

- enable individualized, client-focused and consistent health practitioner decisions to enhance client outcomes
- reduce time required for administration so more time is available for service delivery to help Ontarians move smoothly through the health care system
- manage information to support funding being allocated according to greatest need for quality delivery improvements

You'll see these benefits illustrated in the accompanying articles. Please contact us for further details.

CCIM announces Human Resources Information System (HRIS) software vendor

CCIM is pleased to announce that QHR Software will provide HR and payroll software solutions to organizations across the Community Support Services (CSS) and Community Mental Health & Addictions (CMH&A) sectors in Ontario.

QHR is the successful vendor that responded to a Request for Proposal by CCIM identifying specific requirements necessary to support human resources and payroll software solution requirements for the two sectors. The selected software solutions will interface with integrated Community Care sector business systems to streamline processes and increase organisational effectiveness.

The software has been specifically designed to cater to the needs of the Canadian health care environment, which includes specific provincial reporting and standards requirements. The HR module of the software will provide organisations with a comprehensive solution that has the ability to improve back office efficiencies plus provide access to timely information and reports that will assist CSS and CMH&A organisations in their planning and decision-making. The payroll software will streamline payroll processes and will assist in reducing the number of errors and repetitive entries organisations have to make – this will assist in achieving and implementing best practices in both sectors.

Currently, the HRIS team is working with the first group of participating CMH&A and CSS organisations that will be implementing the HR and payroll software modules. Hands-on training has now begun on both the HR and payroll software modules and will continue through 2009, as other CSS and CMH&A organisations agree to participate in the project.

To be part of this exciting project or if you need more information about the HRIS project, please contact the CCIM HRIS project team through the Support centre. CSS organisations contact CSS.HRIS.MOH@ontario.ca. CMH&A organisations to contact CMH_A.HRIS.MOH@ontario.ca

For further information on the above mentioned software solutions as they relate to the HRIS project please access the CMH&A and CSS websites located at www.QHRsoftware.com/cmha and www.QHRsoftware.com/css.

MIS software rollout saves trial balance time

The CMH&A Management Information Systems (MIS) project and the CSS MIS project continue to roll out the financial and statistical management software solution, Microsoft Dynamics GP, to their sectors.

This software ensures that there are reliable processes and systems in place within CMH&A and CSS organisations for full Ontario Healthcare Reporting Standards/MIS integration and accurate reporting. The software solutions meet the financial and accounting needs within CMH&A and CSS organisations by providing reports for internal decision making and planning, as well as improving back office efficiencies.

More than 140 CMH&A organisations and over 110 CSS organisations have been trained on the software solution as of January 2009 and more training will be offered throughout 2009/10 across the province.

"The software is alleviating the work of creating a trial balance because it creates it for you," says Stacy Hahkala, Finance Manager, CMHA-Fort Francis. "Once the information is entered, it takes two minutes to submit the trial balance, whereas before it would take us two weeks to map and calculate the information. This is going to save us so much time each quarter."

CSS MIS begins final training

The Community Support Services Management Information Systems (CSS MIS) project has begun rolling out the Ontario Healthcare Reporting Standards (OHRS) training to the final (Phase 3) group of organisations. Training schedules and registration information for sessions on OHRS and Chart of Accounts Mapping have been sent to all Phase 3 organisations. If you are a CSS organisation and have not received the information or have not yet registered, please contact the CSS MIS Project team at 1-866-909-5600 or OHRSCSS.moh@ontario.ca to reserve your place.

Sixty LTC homes set to gain OHRS/MIS benefits

Work is well underway in preparation for the pilot of the Long-Term Care Homes Ontario Healthcare Reporting Standards / Management Information Systems (LTCH OHRS/MIS) project with 60 homes selected in early December to implement the new financial and statistical reporting standards.

Selected homes have already received a welcome and information pack as part of their orientation on the project, including pre-training checklists, question and answer document and training schedules. This initial preparatory assistance will allow each home sufficient time to prepare their first data submission at the end of the pilot on May 29, 2009.

"It is a very exciting time for all involved."

CCIM in partnership with MOHLTC is committed to the implementation of the Ontario Healthcare Reporting Standards (OHRS), also known as Management Information Systems (MIS), for standardized financial and statistical reporting requirements across all health sectors. Much success has already been achieved across the hospitals, CCACs, CMH&A and CSS sectors.

"Over the next six months of the pilot, we aim to offer support and advice to ensure a smooth transition to the new financial and statistical reporting standards," comments Yen Daniel, OHRS/MIS Standards Lead. "The data we receive from the homes will be used to benchmark and develop performance indicators. We will apply the lessons learned from the pilot for the provincial rollout. It is a very exciting time for all involved."

The overriding objective of the project is to enable a streamlined, effective and efficient financial and statistical reporting mechanism that will help improve accountability, consistency, accuracy and relevance of data reporting. It will also facilitate easier decision-making and performance measurement within each home and across the LTCH sector.

The homes selected as part of the pilot are:

- Algonquin Nursing Home
- Arbour Creek Long-Term Care Centre
- Bella Senior Care Residence
- Belmont House
- Belvedere Heights
- Bethany Lodge
- Copernicus Lodge
- Drs Paul and John Rekai Centre
- Elliot Community
- Erin Mills Lodge Nursing Home
- Extendicare Falconbridge
- Extendicare Rouge Valley
- Fairhaven
- Fairmount Home for the Aged
- Faith Manor Nursing Home
- Fordwich Village Nursing Home (The)
- Grace Manor
- Hastings Centennial
- Hastings Manor
- Heritage Nursing Home (The)
- Huron Lodge Long Term Care
- I.O.O.F. HOME
- Ina Grafton Gage Village – Niagara
- John Noble Home
- Kensington Gardens (The)
- King City Lodge Nursing Home
- Knollcrest Lodge
- Lakeshore Lodge
- Leisureworld Caregiving Ctr – Etobicoke
- Manitoulin Lodge
- Marian Hill Nursing Home and Home for the Aged (Marian Hill Inc.)
- Markhaven Inc.
- Meaford Long Term Care Centre
- O'Neill Centre (The)
- Parkview Homes
- Parkview Manor Health Care Centre
- Peoplecare Tavistock
- Perley and Rideau Veterans Health Centre
- Perth Community Care Centre
- Pioneer Ridge
- Rainycrest LTC
- Royal Ottawa Place
- Salvation Army Ottawa Grace Manor
- Sarsfield Colonial Home
- Saugeen Valley Nursing Center
- Shalom Village Nursing Home
- St. Andrew's Terrace Long Term Care Community
- St. Joseph's at Fleming
- St. Joseph's Lifecare Centre
- St. Joseph's Villa, Cornwall
- St. Joseph's Villa, Dundas
- St Joseph's Villa, Sudbury
- Sunset Manor
- Thompson House
- Tufford Nursing Home
- Unionville Home Society
- Valleyview Home
- Villa Care Centre (The)
- Yee Hong Centre for Geriatric Care – Finch
- Yee Hong Centre for Geriatric Care – Scarborough McNicoll

For more information on this partnership, please contact us at OHRSLTCH.moh@ontario.ca.

Common assessment helps deliver services to better meet consumers' needs

Fourteen initial pilot organisations continue to use Ontario Common Assessment of Need (OCAN) and validate this holistic, consumer-led approach for connecting consumers to the right services.

"I like OCAN as a tool and most of the staff we have trained also value its simplicity and thoroughness," comments Jennifer Payne-Oddie, M.S.W., Coordinator of the Common Assessment Pilot at Frontenac Community Mental Health Services in Kingston, Ontario.

Since the spring of 2008, more than 100 of the organisation's service providers have been learning how OCAN helps deliver quality services to better meet consumers' needs. Frontenac CMHS, located in the South East LHIN, has not only tested OCAN in the initial three-month pilot of the tool; it is also part of a number of initiatives to identify the best ways to use the information to provide a higher quality of service.

Initial concerns about the amount of time it would take have been dispelled with the positive reaction from both consumers and workers when questions were being asked that had never previously been raised.

"It provides a true partnering with the consumer in directing their attention to those aspects of their lives exemplified in the domains, assessing with them what they discover as strengths, and also the areas in which they will benefit from assistance and at what levels," Jennifer continues. "We have never officially asked the consumer to contribute opinions on their care planning to this extent before."

> *"We have never officially asked the consumer to contribute opinions on their care planning to this extent before."*

The discussion between the consumer and their worker is at the heart of the OCAN tool which was developed by the sector for the sector.

OCAN will soon be used by service providers across the NE LHIN in a LHIN-wide implementation pilot targeted to be launched this spring. This initiative will identify key learnings for future use of the tool across a wider geographic spectrum. Key LHIN level benefits of the tool are anticipated to reveal themselves when organisations across LHINs and the province begin to demonstrate the increased quality of service delivered to consumers within the sector.

More information is available from the Project Support Centre at 416.314.7365 / 1.866.909.5600 or cmhcap@ontario.ca.

Common Assessment is named OCAN

With extensive brainstorming discussions, building on input from the project's Working Group and new input from consumer and CMH organisation secondees, the name **Ontario Common Assessment of Need (OCAN)** was chosen to replace the initials CMHCA. Discussions revealed that it was important to include the words common, assessment and need. OCAN also fits the criteria of being easy to remember, not confusing, easy to say, is positive and captures the essence of what the common assessment is.

Support Centre keeps focus on quality service

Do you have a question? Do you want to register for a course? The CCIM Support Centre has been committed to providing quality support to organisations/homes involved with the Community Care Information Management (CCIM) projects.

As the first point of contact between Project teams and these organisations or homes within the various sectors across Ontario, the Support Centre contributes to the success of the project implementation process by ensuring that every question and every concern gets a timely response.

The centre began in June 2005 as one person providing answers to homes involved in the Long-Term Care Homes Common Assessment Project (LTCH CAP). Due to the overwhelming positive response of having a single point of contact for the various projects, the Support Centre has evolved into a solid team that provides its services to organisations participating in nine projects. This support helps ensure that these organisations/homes will gain the information management benefits that will help them and their LHIN achieve best practices for care delivery.

Under the careful guidance of Support Centre Team Lead Jameela Amarshi, the Support Centre now consists of nine Client Information Specialists (CISs), coding data submission and project subject matter experts and a scheduling team of three who are always ready to provide accurate information in a timely manner. The scope of the centre's service has also expanded beyond handling inquiries to include scheduling and bookings of in-person and WebEx project training sessions, travel and accommodation arrangements, course registration and other training session support, managed by Education Centre Coordinator Mary Chiovitti.

> *The centre has already handled an impressive 40,000 inquiries since July 2005*

The key to the Support Centre's success in maintaining quality service and response time is its client-focused work practice. The centre facilitates an efficient communication channel with subject matter experts for questions that require more detailed responses. CISs also undergo in-depth training and even organisation training to gain a thorough understanding of participating organisations' experience. This allows them to foresee questions and concerns.

The beginning of 2009 marks new processes within the Support Centre. Upgrades will result in a designated phone system and making the ticketing process more automated. Primary and secondary CISs are being established to maximize knowledge of their assigned projects.

With all the current and upcoming activity around the CCIM projects, the centre will certainly be putting those upgrades and expertise to full use. The centre has already handled an impressive 40,000 inquiries since July 2005, and has already registered more than 3100 participants for training in the first six weeks of this year.

The Support Centre can be reached at 1-416-314-7365/1-866-909-5600 on Monday to Friday between 8:30 a.m. and 4:30 p.m.

The Support Centre team members providing accurate, timely information include: (front, left to right) Mary, Jameela, Aliya, Natalie, Noreen (seated), Samantha (seated in front) and (back) Vanessa, Lindsay, Michelle, Stephen, Doug, Pat, Nicole, Mario, Lisa and Cathy. Jennifer is absent from the photo.

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This newsletter for Community Care stakeholders is a quarterly update on the Community Care Information Management project activities. We welcome your comments and inquiries at 1-416-314-7365 / 1-866-909-5600 or by email to CCIMSupport.moh@ontario.ca.