Waterloo Wellington CCAC

Reach

Connecting you with care

Spring 2012

In this issue:

Doing our part to bring value to home and community care

Message from Kevin Mercer, CEO

We've come a long way… and we're far from done.

We hear time and time again from our clients and families that they truly value the care provided in their home. Whether it is the friendly visitor who drops in to say hello, a family physician making a home visit, a nurse providing teaching or a case manager who visits to make sure the care is still meeting the needs required – whatever the combination of care in the home – we hear it is valued by those we serve.

As we celebrate the 40th anniversary of publically funded home care in Ontario, it is a time to reflect on where we have come from. Years ago we worked from a single office, hand writing our orders for home care, and now we have a sophisticated assessment tool that is used internationally to assess our client needs and health status. That is amazing progress.

Over the years what hasn't changed is our commitment to provide care as close to home as possible for those we serve. We thus welcome Ontario's *Action Plan for Health Care,* which commits to ensuring that people receive timely access to the most appropriate care in the most appropriate place – as close to home as possible, underscoring that home and community care is a valuable part of our health care system.

We know this provincial commitment will continue to position home and community care for success for the next 40 years.

This spring newsletter focuses on how we're doing our part towards advancing high-quality, high-value, client-centred care in our community and beyond, along with compelling success stories from our clients. While we have come a long way, we are far from done. As our population ages more people will want to be at home as long as possible. Working together with our contracted service providers, our hospital, community and physician partners and our funder, the Waterloo Wellington Local Health Integration Network, we continue to deliver *"Outstanding Care – Every Person, Every Day."*

Quick FACTS

Over the past year, the Waterloo Wellington CCAC and hospitals worked together to reduce the number of people waiting unnecessarily in hospital for long-term care beds; more people returned home before making life changing decisions. In some cases the community care provided allowed some people to avoid going to a long-term care facility.

Last year, almost **60%** of the clients who were waiting in acute hospital beds were waiting for long-term care; this year, WWCCAC worked with our hospital partners to support clients to go home before making life changing decisions.

Now, just **18%** of clients waiting in acute hospital beds are waiting for a long-term care placement: **the lowest number in the province.**

NEWSNEWSNEWS

Earlier this month, the Health Council of Canada released a report entitled *Measuring and reporting on health system performance in Canada: Opportunities for improvement,* suggesting that there is a long road ahead for governments and their health care partners to put strategies in place that will help provide greater accountability to the public with respect to health system spending and performance:

"Real progress is made when comprehensive strategies with concrete targets are put in place," says John G. Abbott, CEO of the Health Council of Canada. The report goes on to suggest adopting leading practices from other countries in order to help us improve on successfully managing performance and accountability in Canada.

WWCCAC Annual General Meeting: **JUNE 13**

Location:
Holiday Inn Guelph
Oakwood Ballroom
601 Scottsdale Drive
Guelph, Ontario

5:45 – 6:00 pm
Registration & Networking

6:00 – 6:45 pm
Annual General Meeting

6:45 – 7:00 pm
Refreshment Break

7:00 – 8:15 pm
Dr. Wayne Taylor, Keynote Speaker, Followed by Public Discussion

At WWCCAC, we are continuing our efforts to improve health care now and in the future. Join our **Annual General Meeting** on June 13th to hear **Dr. Wayne Taylor** share highlights from his newest research, *"Finding Canada's Healthcare Equilibrium."*

Learning from Austria, he provides compelling recommendations on how Canada could restructure the health care system to better balance quality of care, innovation, and value for money.

We are pleased to facilitate this opportunity and look forward to seeing you there.

Seating is limited, so please reserve your place by calling:

1-888-883-3313 x6107

or visit our website at:

www.ww.ccac-ont.ca

A National Study: Seniors in Need, Caregivers in Distress – A welcomed report

The Health Council of Canada's Seniors in Need, Caregivers in Distress: What are the Home Care Priorities of Seniors in Canada? reminds us on the one hand how far we have advanced with home care services and on the other hand how far we have to go.

We have a long way to go and some very vulnerable people are depending on us to do it. This report puts a face to the policy issue and redefines "home care" from a "nice-to-have" substitute to acute care and long-term care to an essential prerequisite to maintaining the health of both seniors and the caregivers. We have made assumptions about the availability and the capacity of caregivers at home. The report reminds us that these are flawed assumptions and we need to recognize the caregiver burden and provide more assistance. The report tells us that the caregiver situation in terms of the ageing population is going to continue to grow. The negative effects, if remedies are not implemented, are going to be felt in the health system and in the work force. Caregivers are going to increase in numbers and so are the distress levels if action is not taken and soon.

In many respects, the Health Council report provides a picture that many of us have understood intuitively for many years. Our front line staff, the advocates for seniors and caregivers, have articulated very well the caregiver burden they witness as they try to assist home care clients and families. However, the empirical evidence has never been as clearly demonstrated as it has in this report. Thanks to Dr. John Hirdes and his team of researchers, the RAI-HC data has been assessed and a scientific validation of the caregiver burden is provided. The value of the RAI assessment data in this report is instructive in helping us appreciate the needs of home care clients. Governments have

NATIONAL, page 5

> "I wanted to be able to stay in my home, but after experiencing a fall, I didn't know if that would be possible. The CCAC helped by linking me with services in the community that I didn't even know existed."
>
> – CCAC Client

Ontario's 2012 Action Plan for Health Care

Recently, the Ministry of Health and Long-term Care announced Ontario's Action Plan for Health Care.

Ontario

LET'S MAKE HEALTHY CHANGE HAPPEN

ontario.ca/health

For more information visit the Ministry of Health and Long-term Care website: **http://news.ontario.ca/mohltc/en/2012/05/ontario-helping-more-seniors-live-at-home-longer.html**

The plan is "obsessively patient-centred," concentrating on providing high-quality, high-value, patient centred care. "Good health care is about timely access to the most appropriate care in the most appropriate place. It's about getting the greatest value for patients from the system, allowing evidence to inform how our scarce health care dollars are best invested and ensuring seniors receive the care they need as close to home as possible." – *Ontario's 2012 Action Plan for Health Care*

"Ontario Helping More Seniors at Home"

Ontario is moving forward with the next step in developing its Seniors Care Strategy, which will help seniors stay healthy and live at home longer. The strategy will include:

- Expansion of doctor's house calls
- Increase in access to home care for seniors in need
- Establishing care co-ordinators to work with health care providers so seniors receive the right care, particularly as they recover from a hospital stay
- Allowing seniors to adapt their home to meet their needs as they age with the assistance of the Healthy Homes Renovation Tax Credit
- Helping seniors stay healthy by eating well and exercising regularly so they can manage their own care and stay mobile

Strength in Numbers:
The Success of Palliative Home Care

Living with a life threatening illness is a life changing event. While coping with health and emotional issues can be difficult, with the support of family, friends and care providers, those challenges can be overcome. For Bob and Delene Somerville, a network of home support made all the difference. Delene was diagnosed with ovarian cancer 6 years ago. After a major operation, she seemed to be in remission, but after a year and a half things started to deteriorate again, and she ended up having three operations. Initially, both she and Bob were able to manage quite well. However, when her health declined a few years later, she needed more support. That's when the CCAC case manager stepped in to a greater degree. "They were very thorough and considered our entire situation. Not

STRENGTH, page 8

The Road Toward Excellence in Palliative Care:

Doing our Part

In Ontario's **Action Plan**, the province calls for heightened accountability for the money invested in the care delivered to Ontarians.

One way to demonstrate this accountability is to move towards paying for defined results. An example of this includes payment for care that results in a quicker wound healing time. No longer will payment be based on number of visits but rather the effectiveness of these visits to improve the health of the person.

CCACs are exploring outcome based payment models for various populations. As part of this transformational work, WWCCAC has a pilot project for palliative care that is exploring ways to tie funding to patient care outcomes.

Going far beyond delivering value through outcome-based payment models, the Palliative Integrated Client Care Project (ICCP) targets and organizes resources around specific populations to drive more integrated care and improve the client and caregiver experience. Alongside the efforts of other CCACs where the Integrated Client Care approach is being explored, WWCCAC's efforts in palliative care can help build and strengthen integrated community-based palliative care, serving to help improve integration at a system-wide level too (e.g. acute care, long-term care, residential hospice, primary care). Improvements being explored include early identification of clients regardless of disease, a single point of access for palliative care, enhanced care coordination and system navigation (e.g. specialized case managers following clients across settings), and mechanisms to effectively share clinical information and improve coordination and integration of the entire circle of care. •

For more information about ICCP, please visit **http://www.ccac-ont.ca/icc**

Making health care more sustainable

"While the demographic shift compels us to reform health care, today's fiscal reality requires that we act now to make Ontario's health care system sustainable."

Ontario's Action Plan for Health Care

Making health care more sustainable is not an easy task, but through our participation in the Integrated Client Care – Palliative project, WWCCAC is taking steps forward by exploring patient-based models of delivering and paying for better palliative care.

Individual Home and Community Care – One size doesn't fit all

Waterloo Wellington CCAC takes responding to our clients' individual needs to a new level beginning June 2012 by implementing a new service delivery model.

As identified by Ontario's 2012 Action Plan for Health Care, in order that "patients are receiving care in the most appropriate setting, wherever possible, at home instead of in hospital or long-term care, [we need to] structure the system to meet the needs of today's population, with more focus on seniors and chronic disease management."

According to Kevin Mercer, WWCCAC CEO: "We needed a model for delivery of case management that would be nimble in response to evolving health system needs. One size simply doesn't fit all, and it's time to think of care delivery with the specific needs of our clients in mind, delivering the right kind of intensity of service at the right time." With the new service delivery approach, case management is customized to keep the needs of our most vulnerable clients in mind, delivering required health care and support services for the growing number of high need clients. This includes the frail elderly, children who are medically fragile, and people managing complex, often chronic conditions. Each of these populations will receive care planning and case management specific to their unique needs. •

Background

The **Client Care Model** of service delivery was initially developed in 2009, with all CCACs expected to be on board with caseload reassignments by March 2013.

WWCCAC implementation is August 24th. We will be 6th in the province to fully implement this model.

NATIONAL, continued from page 3

often challenged the field to provide the data that supports claims of increased acuity demands in the community. This report provides the evidence as illustrated in this quote:

"About one-third of the seniors, in our analysis of home care recipients, have high needs often involving both physical disability and cognitive impairment such as dementia. Despite this, they may receive only a few hours more of publicly funded home care each week than seniors assessed with moderate needs."

The challenge for all of us now is to translate the findings in this report into real solutions for vulnerable home care clients and their caregivers. At least in Ontario a commitment to home care of a 4 percent per year budget increase for the next three years is a step in the right direction.

This is positive news and if there was any question as to the need, one should read *Seniors in Need, Caregivers in Distress: What are the Home Care Priorities of Seniors in Canada?*

A very timely report. •

– Commentary by Kevin Mercer, WWCCAC CEO. An expert panel advisor for this National Report.

Mental Health and Addiction Nurses in the School System

On May 18th Liz Sandal, MPP Guelph held a press conference at the Guelph WWCCAC office to announce more nursing positions for Waterloo Wellington.

Liz Sandals, MPP Guelph talking with WWCCAC Board members and CEO. Left to right: Marshall Draper, Board Chair, Brian Cowan, Board member, Liz Sandals, Kevin Mercer, CEO.

This announcement filled the boardroom and drew people from across health care. WWCCAC is pleased to be selected to receive 9 new nursing positions for Mental Health and Addictions in the School System.

These positions will support children and teens within the school system. The WWCCAC has begun meeting with the local school systems. We have heard from the staff at the schools that they welcome these

positions to help them better support the needs of their students who are dealing with Mental Health and Addiction challenges. These nursing positions aim to help students succeed at school.

Waterloo Wellington will receive an additional 55.6 nursing positions which aims to strengthen the health care system. These new positions are created to help people in hospitals, long-term care homes, in primary care, in home care and community care. •

Quick FACTS

5,800 Over the past year, WWCCAC found family physicians or nurse practitioners for more than **3,000** people who did not have a primary care provider. Since the inception of the Health Care Connect program in 2009, we have connected over **5,800** people with a primary care provider.

12,986 WWCCAC worked in hospital inpatient and emergency departments across Waterloo Wellington to help **12,986** people return home from hospital.

It Takes a Village of Community Services to Raise a Child

Raising a child is no easy task. When Joy and Paul Barker learned their twins were arriving months before their due date they put their faith in the health care system.

Joy gave birth to twins, Amanda, now 6 years old and Veronica. Veronica died a month after birth due to premature complications.

At birth Amanda weighed one pound, six ounces. Joy recalls how her daughter fought for her life. "Our daughter's strong will helped her through. The McMaster Children's Hospital staff became our family for the first year of her life and through their care and Amanda's determination we made it home" says Joy.

Amanda came home with a feeding tube, a tracheostomy for breathing, medications and medical treatments. Paul recalls the community help that was put in place for their family, "It took a village of community services to help us bring our daughter home."

Amanda is legally blind and has many health challenges including cerebral palsy and a chronic lung condition.

Case managers coordinated the home care. "The care required coming from hospital was quite involved but now as Amanda continues to courageously battle for independence her care needs are changing." Amanda's case manager and service providers have watched her face challenges and progress along the way. On a regular basis they follow up with the family. Amanda recently made the successful transition to school which took a collaborative effort between the CCAC case manager, school, and community agencies.

Maggie Lui, a Registered Nursing Practitioner with Saint Elizabeth has provided nursing care for the past 3 years. Coming 3 times a week to work with Amanda in the home and school, Maggie saw musical talent. Over the past year Maggie incorporated music therapy into her daily nursing care, helping Amanda learn to play the piano and sing. Amanda recently shared her piano skills at the school talent show where she played "When I wish upon a star."

Maggie shares how much Amanda is loved at school. "The school children look out for Maggie. They made sure they didn't step on her oxygen tubing and some of them even bring in textured story books from home to share at reading time." Monica Bruster, an Occupational Therapist from Therapy Partners has been helping Amanda learn to talk and feed herself. Now that Amanda's breathing tube is removed and she is on home oxygen, Amanda is learning to feed herself. Monica also helps ensure the appropriate school accommodations are in place to support Amanda's learning.

Paul, a published author, says music is a large part of their lives. "I see Amanda's spirit come alive in front of the piano." While Paul doesn't have as much time these days to write, he does have many stories to tell of his daughter's spirit and the home support they have received to support their family independence.

Because of the "village of community support" received, Joy is able to pursue some of her own personal goals. She is enrolled in the RPN program at Conestoga College. Caring for her daughter has helped her realize her passion to help others. Amanda's younger sister Natalie pitches in to help with Amanda's care.

The village of community care providers include WWCCAC, the Wellington District Catholic School Board, Therapy Partners, CNIB, Saint Elizabeth, Trellis Infant Development, KidsAbility and Wee Talk PreSchool Services, as well as a medical team of various specialties.

Amanda's needs will continue to evolve as she grows, and the WWCCAC will be with her along the way. •

STRENGTH, continued from page 4

just for Delene, but also my needs and ability to look after her," says Bob. "The case manager arranged for a nurse to come in to take care of her medical needs and a personal support worker to bathe her and help with other things. They also regularly monitored her condition. It was a great relief, knowing that if things changed, our case manager would know right away and could adjust the care we need."

Bob and Delene have known each other since they were in elementary school. They both eventually became teachers and married in their early 20s. They were married for 47 years and for 45 of those years, they lived in the same house. Being able to stay home, despite her illness, was vitally important to both of them. "In the beginning, I could look after Delene's basic needs," says Bob. "But as things went on, we needed more assistance. For us, leaving home was a final resort. The nurses and other support workers who visited were so helpful and took the time to teach me how to do certain things which allowed us to stay home. The nurses went above and beyond to make sure we could cope. One of the nurses even took the time to offer me advice on how to sort the laundry!"

"When we first assessed the situation, we realized that Bob and Delene were both very independent and for the most part could manage quite well. However there were certain things that needed specialized care," says Lorrie Shantz, Case Manager. "Our role is to provide advice, give them information and ensure they can make informed decisions about the many support options that may be available to them. Those supports include CCAC contracted services as well as assistance provided by community support organizations."

"We didn't really know much about the CCAC or the other supports available in the community until we were faced with it," says Bob. "I am so amazed at what wonderful service is out there. The case manager, the nurses, our palliative physicians and hospice services made sure that our needs and wishes were the first consideration. This model of care is truly going to be the way of the future for health care." The success of home-based health care depends on a broad network of supports. Bob and Delene's experience has shown that there truly is strength in numbers. •

> "The nurses and other support workers who visited were so helpful and took the time to teach me how to do certain things which allowed us to stay home."
>
> – Bob Somerville

Have you reserved your place yet?

WWCCAC Annual General Meeting

Wednesday, June 13, 2012

For details, see the AGM information on page 2, or visit our website at:

www.ww.ccac-ont.ca

Waterloo Wellington
Connecting you with care
Votre lien aux soins
CCAC Community Care Access Centre
CASC Centre d'accès aux soins communautaires

Reach is published quarterly by the WATERLOO WELLINGTON CCAC

For article contributions or for more information please contact: newsletter@ww.ccac-ont.ca

Sign up for your digital edition at www.ww.ccac-ont.ca and go to the News and Events tab

ACCREDITATION CANADA
AGRÉMENT CANADA

Now it's your turn to reach out!

Email us your questions, comments and story ideas to **newsletter@ww.ccac-ont.ca**