

## Ontario Association of Community Care Access Centres 2013/2014 in review

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The home and community care sector is evolving and growing in order to better meet the needs of an ever-changing population and its expectations. Given these realities, many people – patients, family caregivers, governments, health-care providers and citizens at large – are concerned about how we will provide high-quality, affordable health care in the future. These questions present very real challenges, but also offer important opportunities.

As champions of the home and community care sector, the OACCAC and CCACs work together developing provincial innovations in care and approaches to their implementation with a commitment to continuous quality improvement. These ongoing efforts ensure people receive timely, high-quality care and help us support our members and partners to work together more effectively and efficiently.

### Championing health system transformation

#### ***Starting a conversation about the future of care***

All sectors must come together: health, social, educational, among others, to share information, empower families and build on current approaches to care and technologies for our health-care system to evolve. The OACCAC has produced a four-part discussion paper *Health Comes Home* that looks at the questions that must be asked and discussed if Ontario is to serve the growing needs of our population.

To help spark these conversations and address these questions with our partners, stakeholders and the general public, the OACCAC launched a new digital engagement tool. The website [www.moreandless.ca](http://www.moreandless.ca) uses a social media approach to bring together online conversations about the future of care.

216 social media conversations have been launched with more than 2,693 visits and more than 21,377 page views since January 2014 #moreandless

#### ***Supporting increased transparency***

Public expectations of our health-care system and other public services are changing. The seniors of today are increasingly technology-savvy. They are empowered with greater access to information about their health conditions and health-care options, and have higher expectations for meaningful engagement.

The CCAC websites provide valuable information about person and family-centred home and community care. The websites also facilitate information sharing to ensure ongoing transparency and accountability to the public by reporting on key measurements of performance.

More than 442,523 visits to the CCAC websites at <http://healthcareathome.ca> since December 2013

More than 44,247 visits to the OACCAC website at <http://oaccac.com> since October 2013

In keeping with this commitment, all 14 CCACs have developed Quality Improvement Plans (QIPs) that are aligned with the key principles found in the [Excellent Care for All Act](#). QIPs help define organizational

priorities to ensure the best care possible through quality initiatives and continuous quality improvement. CCACs made their inaugural QIPs public through their websites on April 1, 2014.

### ***Supporting Ontario's most vulnerable populations***

CCACs are caring for more and more people with multiple chronic and complex health issues. To help address these increasing care needs, the OACCAC supports CCACs to develop provincial approaches to the implementation of care innovations. Three new nursing programs have been implemented to provide frontline care to the most vulnerable patients. These programs include:

- *Rapid Response Nursing* – Registered nurses support patients with high care needs as they transition home from hospital safely, resulting in decreased visits to the emergency department and hospital readmission.
- *Palliative Care Nurse Practitioners* – Nurse practitioners help ensure earlier identification of palliative patients and support even the most complex palliative patients through their end-of-life experience, along with their care team, as comfortable as possible at home.
- *Mental Health and Addictions Nurses* – These nurses partner with school boards to recognize and respond to student mental health and addictions issues. CCAC nurse leaders support community nurses, the development of school board strategies and collaboration with community health partners to ensure consistent support for children and youth across the province.

## **Partnering to improve care**

### ***Working with our primary care partners***

#### **CCACs are:**

- Working directly with nearly 10,000 primary care providers, and growing
- Already working in approximately 75 per cent of Ontario's 184 Family Health Teams
- Working in every hospital across the province to bring approximately 200,000 people home from hospital with CCAC care each year

With a strong focus on technology innovation, CCACs are the only part of Ontario's health system that has a fully operational e-health platform that gives all CCACs access to common information. CCAC Care Coordinators are able to use technology to support strong connections and effective communication between home care, hospitals and primary care. To facilitate communication with primary care, the OACCAC is developing enhancements to the e-health platform, including the ability to identify primary points of contact for both care coordinators and primary care providers, as well as a notification system for primary care providers for key events such as CCAC admission/discharge, hospital admission, etc. This flow of information will foster a more coordinated and smooth care experience for patients.

### ***Supporting Ontario's Health Links***

CCACs are actively engaged in all community Health Links – contributing care coordination expertise, and technology enablers that are improving the quality of care for the highest need patients. CCACs rapidly responded to the call to participate in Health Links because of the work they had done previously to help identify patients with the highest needs by implementing a population-based care model.

The OACCAC worked with the Health Links teams to develop technology to allow CCACs to receive notifications from hospitals when a patient presents and is admitted to an emergency department (ED) and also if that patient is admitted to and discharged from hospital. This sharing of information is key to ensuring that patients with the highest care needs receive the right service at the right time in the right place; reducing 911 crisis calls, emergency department visits and hospital admissions, which are disruptive to patients' lives and costly to the health-care system.

## Driving efficiencies to deliver high-quality care

### *Using technology to empower patients and drive efficiency*

More than ever before, technology has the potential to transform the delivery of health care and improve health outcomes. CCAC technology innovations are supporting the implementation and standardization of leading care practices, helping reduce duplication and enhance quality of care and patient safety. This technology is being harnessed to empower patients and effectively manage their own care, for example, thehealthline.ca, now implemented across all CCACs, is a one-stop-shop to help patients navigate the health services they need in their communities.

[thehealthline.ca](http://thehealthline.ca):  
14 websites with  
4,915 average daily  
visits and 40,000  
service profiles

In addition, eReferral to Long-Term Care (LTC) is a new automated process now being implemented provincially that simplifies and speeds up the processes for getting people who can no longer live independently in their own home, to LTC homes. eReferral provides a consistent process that provides LTC homes with all relevant information and reduces the time from application to acceptance and from vacant bed notification to admission. Based on the success of eReferral to LTC in the Champlain and Central East CCACs, CCACs are working with LTC to spread eReferral across the province.

### *Improving access to physiotherapy services*

Over 3.5 months, CCACs assessed and navigated over 32,000 patients in over 1,050 retirement homes and congregate settings across Ontario

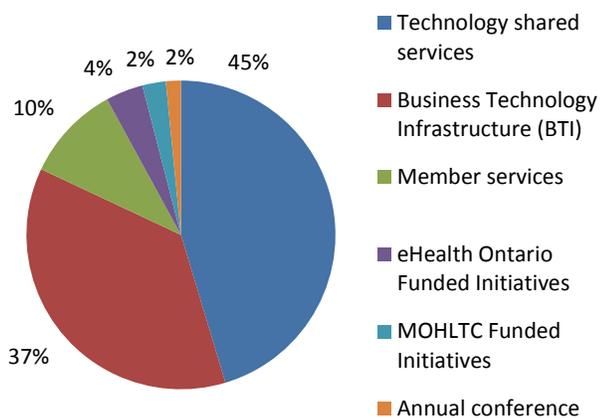
In April 2013, the Minister of Health and Long-Term Care announced a new strategy to improve access to physiotherapy services, making CCACs the single-point of access for in-home physiotherapy services. Following the announcement, the OACCAC and CCACs immediately began working with the Ministry, LHINs, service providers, retirement homes, designated physiotherapy clinics and other partners to organize and coordinate implementation of this province-wide initiative and ensure that patients experienced a safe and smooth transition to appropriate models of care based on their needs and goals.

Streamlining access to physiotherapy services through CCACs ensures that Ontarians have access to an integrated, coordinated basket of services based on their needs, with assessment for physiotherapy being part of a more comprehensive assessment of supports. Additionally, an expert physiotherapy advisory panel was established to review the literature and recommend evidence-informed practices to support the development of new, patient-centred models of care. These recommendations included expanding the scope of practice of physiotherapy in-home care, integrating physiotherapist support personnel, focusing on outcomes to meet the needs of more diverse in-home physiotherapy patients, and increased self-management with monitoring and booster sessions.

## OACCAC Funding and Services

To meet our mandate of providing leadership, innovative programs, solutions and services to continue advancing excellence in integrated care and deliver enhanced quality, accountability and health outcomes for Ontarians, the OACCAC receives approximately 57 per cent of its budget from members' contributions and the remaining 43 per cent from government funding. Of the 57 per cent funded by members, 45 per cent is spent on technology shared services, 10 per cent on member fees and 2 per cent on conference and interest. Total OACCAC member contributions for fees and technology shared services have held flat since 2008/2009 at approximately \$21 million and are therefore declining as a percentage of total provincial funding, which has increased. Government funding supports base technology infrastructure and special projects implemented in collaboration with the Ministry of Health and Long-Term Care (MOLTC).

### 2013/14 Total Revenues



### 2013/2014 Total Expenditures

