



Complex care, Simple comforts

# COMMUNITY care connection

## Collaboration and Innovation Out Of Core Strength

### VHA's 2008 - 2010 Strategic Plan

A message from Vikas Sharma, Board Chair and Carol Annett, CEO/President

In the spirit of collaboration fostered by VHA's Vision, Mission and Values as well as by the Local Health Integration Networks, we are pleased to share VHA's new three year Strategic Plan with our partners and the public.

Planning is an essential component of success in these complex times. Over many months in late 2007, VHA's Board of Directors consulted with various stakeholders — staff, clients, partners and funders — to better understand the external environment, the opportunities and

threats outside our four walls, as well as our internal strengths and challenges. (Many thanks to all those who helped with this research.) Both Board and management knew that creative thinking was needed, and even some well-considered risk taking, to meet the many challenges facing VHA over the next three years, and to make a tangible difference in the communities we serve.

Here are just some of the opportunities and challenges that informed our thinking:

- Supporting the transformation agenda and priorities of the LHINs;
- Competing successfully for Community Care Access Centre contracts and other potential sources of funding for needed services;

- Recruiting and retaining the best talent despite the shortage of health human resources;
- Responding to the needs of a growing senior population as well as "at risk"/marginalized populations (such as newcomers, those with mental health issues, persons who are homeless or at risk of homelessness, and others);
- Meeting increased demands for greater accountability and evidence of high quality service provision and improved client outcomes;
- Harnessing new technologies to advance care delivery and operations; and
- Forming strategic partnerships/alliances across the health sector to ensure that the system best serves our communities.

*continued inside on page 2*



**Vikas Sharma**  
Board Chair

**Carol Annett**  
CEO/President

### in this issue

**VHA's 2008 - 2010  
Strategic Plan**



**Home At Last  
in Scarborough**

**Transforming  
Practice**



# Four Strategic Directions



# 1

## Collaborating to Respond to Community Needs

We will pursue new and strengthen existing strategic alliances and partnerships to better respond to the home and community care needs of the diverse populations we serve. Working together we will build on each others' strengths to ensure individuals and families will have access to high quality, integrated and effective service where and when needed.

# 2

## Fostering Innovation and Excellence

We are committed to ensuring quality and excellence in all our work. We will create and embrace new ideas and best practices to ensure better outcomes for the clients we serve. We will gain recognition for being innovative and nimble in our responses. Smart clinical practitioners will be at the front lines and at every level in the organization using the best knowledge and technology available. We will be known for our ability to enable clients to care for themselves, for providing extra help when needed, for maximizing patient safety and for supporting the "real" home care providers – family/friends.

# 3

## Strengthening Organizational Capacity

We will be a "workplace of choice" and attract and retain a healthy and productive workforce that has the skills, knowledge and competencies to support current operations and the flexibility and creativity to support growth and change. We will invest in people development and training, and utilize technology to maximize organizational effectiveness and enhance communications and teamwork. We will make optimal use of our information systems to support effective decision-making and reporting.

# 4

## Ensuring Organizational Sustainability, Growth and Development

We will ensure the future viability of our organization by maintaining current contracts and winning new business. We will maintain adequate reserves to allow for continued investment into operational and service improvements, as well as to fund new initiatives. We will explore diversifying our revenue sources and will raise our profile throughout the province.

### Collaboration *continued from page 1*

The Board developed four strategic directions or pillars (described above) to guide the organization over the next three years. For each pillar, high level goals were identified along with key performance indicators to measure our success.

The Strategic Plan is a living document that will be evaluated and updated every year as the health and home care environment evolves, new opportunities emerge and adjustments are needed to meet our objectives. There is an exciting future ahead for VHA. As we move forward, we will take risks — we will be innovative — and we will be leaders in home care.

# Home At Last

**S**carborough now has a Home At Last (“HAL”)\* program! Scarborough seniors can get transportation home from hospital and help getting settled in safely at home.

Here’s how it works. The Hospital, through its discharge planners, social workers or nurses, or the CCAC will call VHA to arrange for services for seniors being discharged from hospital who do not have family or other supports available at the time they are discharged.

VHA will dispatch the case to one of four well-respected community support agencies (or help the senior ourselves). A PSW will meet the senior at the hospital, accompany the senior home from the hospital in an agency vehicle or a taxi, and help the senior get settled in at home. The PSW might pick up a few groceries or the prescribed medications; or the PSW might clean out the refrigerator and make some tea; or help the senior get cleaned up, comfortable and ready for bed. The PSW’s services depend on each client’s needs.

There are two essential, standard services. The PSW will always check on safety issues in the home — is there a grab bar in the shower if the client needs it; is there enough food in the house; does the senior have the walking aids he or she needs; is there working heat and water; etc.

Second, the Agency will follow-up with the senior at least twice after the senior is home to see if the senior needs further supports (like Meals on Wheels; friendly visiting; home support services). All of this will be coordinated with the Central East CCAC.



The Scarborough HAL program is funded by the Central East LHIN. It is a collaborative effort of: VHA Home HealthCare; Carefirst Seniors and Community Services; St. Paul’s L’Amoreaux Centre; Scarborough Support Services; West Hill Community Services; and the referring parties, the Central East CCAC and the two local hospitals, The Scarborough Hospital and the Rouge Valley Health System, Centenary Site.

Our successful collaboration is leading to other joint efforts and partnerships within this Scarborough group. There is more to come — stay tuned!

---

\* The program is modeled on one developed by Downsview Services for Seniors and further developed by the Ontario Community Support Association.

## We Welcome Your Support

### MEMBERSHIP

VHA welcomes new members.

Consistent with our not-for-profit tradition and to help us be the best we can be, we encourage members of the communities we serve to participate in VHA’s governance. There is a nominal membership fee of \$25.00 (which can be waived in special circumstances). For more information, we invite you to contact Patricia Triantafyllou at 416-482-4617 or [patricia@vha.ca](mailto:patricia@vha.ca)

### DONATIONS

Charitable donations to VHA Home HealthCare increase the quality of life of vulnerable people in your community. Donations are welcome, and can be mailed, made by phone (credit card contribution) or in person at our 477 Mt. Pleasant Road office. You may also want to consider making a “tribute gift” in honour of a loved one or special friend. To all of our donors, our sincere thanks for your generosity.





## Nominate Your 2008 “Hero in the Home”

VHA’s annual Heroes in the Home award symbolically recognizes the extraordinary sacrifices and devotion of the family members and friends who provide most of the in-home care for their loved ones. In 2007, VHA Home HealthCare recognized Madeline Calaminici, who cared for both her husband and her mother for many years, and Zena Spurney, who has cared for her friend, Barry, who became a quadriplegic in an accident. Read their stories in Community Care Connection Issue 12 at [www.vha.ca](http://www.vha.ca).

In 2008, VHA will again award \$1,000 to a nonprofessional caregiver who exemplifies the compassion demonstrated by these heroes. Nominations are welcome until May 9, 2008 for the 2008 award. Caregivers must reside in Ontario. To nominate a caregiver you know, please go to our website at [www.vha.ca](http://www.vha.ca) (click on Heroes in the Home on VHA’s home page), or send your nomination to Joy Klopp at ([jklopp@vha.ca](mailto:jklopp@vha.ca)). Call Joy for more information 416-482-8782.

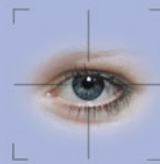
*If you*

have any comments or suggestions regarding our newsletter, please feel free to contact the editor of

COMMUNITY  
**care**  
connection

Joy Klopp

at 416-482-8782 or 1-888-314-6622  
or visit our web site at [www.vha.ca](http://www.vha.ca)



## Eye On QUALITY

### • Quality Improvement Plan and Achievements

VHA is improving our quality improvement planning. That’s a mouthful but what it means is that we are using better measures to determine our success and we are better at focusing our efforts on what is achievable. In our recent review of our 2007 Quality Improvement Plan and its outcomes, we found that we had achieved 100% of the objectives.

2007 Quality Improvement achievements include, among others:

- a statistically significant increase in knowledge and understanding of quality improvement processes by office staff between 2006 and 2007 rated levels;
- a reduction in medication errors compared with 2006, due in part to the new medication reconciliation process implemented in early 2007 and the accompanying higher level of awareness of safety issues among our staff teams and their clients/families; and
- an increase in staff reports of harassment by clients/family members which we consider to be a positive result of the Ethics Program at VHA (VHA can better support staff in the field if issues are reported by staff).

The 2008 Quality Improvement Plan was approved by our Board QI and Risk Management Committee. One of our goals in 2008 is to improve quality literacy at VHA. We first need to define the level of quality literacy required by different roles across the organization along with learning objectives and strategies. The new Plan reflects a more concrete approach for building CQI capacity at VHA and we are looking forward to its implementation.

### • Patient Safety Improvement Plan and Patient Safety Work Group

Although VHA met all 21 of the ‘required organizational practices’ or ROPs set by the Canadian Council on Health Services Accreditation (CCHSA) in our 2006 accreditation survey, VHA identified opportunities for improvement that we wanted to act on. Because of the importance of patient safety and the focus we want to give it, VHA split Patient Safety planning from all other quality planning. We developed a focused Patient Safety Improvement Plan and a Patient Safety Work Group, with representatives from all areas of VHA, responsible for implementing that Plan. The 2008 Plan also includes measurable objectives for success. Among other things, the 2008 Plan calls for structured messages, standard meeting agenda items on client safety, and staff training to promote a non-punitive safety culture and a ‘systems’ approach to improving client safety. VHA is confident that implementation of the Plan will result in overall system improvements leading to fewer and fewer preventable safety incidents.

# Transforming Practice:

## “Walking the Talk” on Client Centred Care



**T**he value and effectiveness of client centred care (i.e., client-led care or care that consciously adopts the client/family’s perspective about what matters) has long been established. Adopted as a best practice guideline by the RNAO, all nurses are expected to provide care focused on client and family. However, recent studies have looked at competing demands on home care nurses that may detract from providing client centred care, such as the requirements of their professional training (the “expert model of service delivery”) and the demands of employers and funders for “efficient” care provision.<sup>1</sup> Individual nurses may balance competing responsibilities through a variety of strategies (outlined in the articles cited below), but employers can also support nurses in balancing competing priorities and successfully providing client centred care.

VHA Home HealthCare supports and encourages our nurses (and PSWs) in providing client/family-centred care in two critical ways. We are evaluating the impact of that support on an on-going basis.

### Client Centred Care Course

First, VHA developed an intensive outcome oriented Client Centred Care course based on the work of Parse Scholars on which the RNAO Best Practice is also based. The six-week multimedia course includes required readings, analysis of dialogues with clients, guided discussion and reflection on practice. The classroom sessions include opportunities to practice, develop skills, and analyze competing responsibilities in the home care environment. A maximum of 12 nurses, supervisors or personal support workers can participate at one time to allow for extensive practice and discussion of their experience applying the course concepts and skills with clients.

VHA’s nurses have been the first to complete the course. Our highly experienced and compassionate nurses consistently report that this program has transformed their practice. They tell us they are amazed at how the course has helped to enhance their sensitivity and responsiveness to their clients.

VHA is evaluating the impact of the course on an on-going basis. Participants provide their feedback anonymously after each session, at

course completion and approximately six months later. To date, the large majority of our nurses/staff report applying the concepts from the course in their practice. Client satisfaction survey results from areas where the course has been presented have seen increased excellent and positive percent scores on many care dimensions such as satisfaction with ‘involvement in care planning’, ‘being well prepared for discharge’ and ‘overall quality of services’.

We are pleased to be sharing our course content and evaluation data at the Community Health Nurses’ Initiatives Group’s Home Health Conference in May 2008.

### Ethics Training

Second, VHA is a core member of (and co-Chairs) the Community Ethics Network begun by the former Toronto Community Care Access Centre. The Ethics Framework and the training module developed by the Network have been provided to all VHA field staff, including nurses. This framework assists VHA staff in balancing the competing demands of their clients, their professional expertise/rigour and the home care system. Ethical issues related to client centred care (e.g., client choices involving inherent risk; lack of client motivation toward self-care; funding issues) are analyzed. VHA staff have access to bioethical consultation through VHA’s internal Ethics Committee and our Bioethics Consultant, Dr. Kerry Bowman. We continue to analyze the ethical issues that arise in the field in order to be able to address them most effectively and support our staff in providing client/family-led care.

---

<sup>1</sup> Schoot T., Proot I., Leguis M., ter Meulen R., de Witte, L., *Client-centred home care: balancing between competing responsibilities*, *Clinical Nursing Research*, 2006 Nov; 15(4): 231-254.; Brown, D., McWilliam, C., Ward-Griffin, C., *Client-centred empowering partnering in nursing*, *Journal of Advanced Nursing*, 2006 Jan; 53(2):160-168.

## Offering complex care and simple comforts since 1925

### VHA SERVICES

- ✓ Adult and Elder Care
- ✓ Child and Family Care
- ✓ Respite or Caregiver/Family Relief
- ✓ Palliative Care
- ✓ Mental Health Support
- ✓ Foot Care
- ✓ Attendant Care
- ✓ Extreme Cleaning
- ✓ Information and Referral Services
- ✓ Supplementary Staffing in Care Facilities
- ✓ Supportive Housing

### VHA PROFESSIONAL STAFF

- ✓ Registered nurses/registered practical nurses
- ✓ Personal support workers/homemakers
- ✓ Client service coordinators/supervisors
- ✓ Other skilled professionals as required

VHA Home HealthCare is a member agency of the United Way of Greater Toronto and a contracted provider with Toronto Central, Central, Central East, Central West, and Erie St. Clair CCACs, the City of Toronto's Homemakers and Nurses Services program and the Regional Municipality of Durham.

*All services can be made available in your own home, in hospital or in a long-term care facility.*



For more information, please call us at

**416-489-2500**

or **1-888-314-6622**

or visit our web site at [www.vha.ca](http://www.vha.ca)



**United Way**  
of Greater Toronto

Community Care Connection is available electronically. If you'd like to cut down on the paper landing on your desk and be able to share the newsletter with your colleagues by a click of the mouse, just send your email address to [jklopp@vha.ca](mailto:jklopp@vha.ca).



VHA HOME HEALTHCARE  
477 Mt. Pleasant Rd.  
Toronto, Ontario M4S 2L9

