

Annual Report for Self-Directed Care Ontario

2017 | 2018



Ontario

Self-Directed Care Ontario

Soins Autogérés Ontario



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About Self-Directed Care Ontario

Self-Directed Care Ontario (SDCO) is responsible for co-designing and delivering a new optional self-directed care program for eligible patients and families.

When implemented, SDCO's program will become an option for eligible patients to self-direct the delivery of responsive personal support services with greater choice, control and confidence. Patients eligible for service are expected to have chronic and relatively stable health conditions – typically those assessed as requiring a PSW for a minimum of 14 hours a week over a period of at least six months.

In the first seven months of its mandate, SDCO's focus has been engagement and discussions with the Local Health Integration Networks (LHINs), particularly with three early adopter LHINs: Hamilton Niagara Haldimand Brant (HNHB), North East and Toronto Central. The LHINs and SDCO are co-designing a model of patient service delivery that will be offered to eligible patients in a phased-in approach over the next three years. The first service launch is projected for early 2019, and upon full implementation,

an estimated 6,000 patients will be served across the province.

The agency is now getting ready to recruit and provide ongoing training and support to PSWs who can fill the new roles required to offer this new self-care option. Patients will be assessed through the LHIN in the usual manner that is employed for traditionally-delivered home care. The LHIN Care Coordinator will discuss this option with eligible patients/families who are interested in self-directing their care. Through a process that considers patient and family choice, a consistently-available PSW or PSWs will then be assigned by the agency to provide ongoing services to each patient. The agency will further support the patient and family in developing a service schedule that meets patient needs while considering the availability of the PSW or PSWs assigned to provide care.

As SDCO moves from operational readiness to execution in the next months, we look forward to working with our stakeholders to implement a model of care that empowers patients, families and providers into the future.



Message from the Chair and CEO

Self-Directed Care Ontario is intended to give patients and families the care they need at home and with more choice, control and confidence.

Over the past few weeks, the Board and the leadership team at SDCO have discussed a future vision for SDCO that puts patients first, and meets the growing needs of the health care system. Guided by a commitment to strengthen home and community care, we asked the question “*what if ...?*”

What if ... we can pilot innovative ways to support chronically ill patients who prefer to direct and manage their own care at home? What new ideas can SDCO and our PSWs generate to help patients stay in their own homes longer? How can we work with our hospital partners to reduce unnecessary Emergency Department visits? How can our agency and PSWs better support patients to get home faster if they are admitted to hospital?

What if ... we can elevate and grow the current role of PSWs as they care for a growing and aging population? How can we leverage PSW skills and expertise as the backbone of the health care team at home? What are the best ways to enhance their chosen career in a culture that recognizes their important contributions and provides them with ongoing education and learning opportunities? How can we empower PSWs to provide the best possible care, giving them stability of employment and an environment that nurtures a passion for health care excellence?

And *what if ...* we apply new digital solutions to empower patients to self-direct their care and PSWs in their work, and improve the timely delivery of high quality patient care? How can patients and families access readily available and protected health information? How can electronic scheduling streamline the planning and delivery of services? What tools can let families know - for example - if a PSW is delayed to work, or can alert PSWs remotely about patient falls or events that impact on care?

In the past seven months, SDCO’s Board of Directors and leadership team has invested a tremendous amount of time in readiness and foundational work to explore these ‘what ifs’ for the agency’s operational future. A new patient services delivery model for SDCO’s personal support services is well underway, and is being co-designed with the Local Health Integration Networks. Frameworks and operational plans have been developed. Now ready for operations, we have an innovative Human Resources strategy for the recruitment, retention and ongoing support of local PSWs; a comprehensive approach to Patient Engagement; a Quality Management Plan; and a Digital Strategy that recommends the application of digital technology in exciting new ways.

Marsha Barnes, Chair

Kathryn Ramsay, Chief Executive Officer

Board of Directors and Governance

As set out in the current Ministry of Health and Long-Term Care/Self-Directed Care Ontario Memorandum of Understanding (MOU), the agency is governed by a Board of Directors nominated by the Lieutenant Governor in Council. The SDCO Board shall consist of a minimum of three directors and a maximum of seven directors, including the Chair. At the end of fiscal year 2017/18, SDCO had completed recruitment and appointment of six Board members, with their profiles following below.

All Board members received onboarding and orientation. Since inception, the Board has completed the following key governance activities:

- Established Board By-Laws
- Signed a Memorandum of Understanding with the Ministry of Health and Long-Term Care
- Appointed a Chief Executive Officer
- Passed a Banking Resolution
- Established a Public Communications Protocol that identifies issues management processes and to create a culture of shared understanding and transparency

Governance best practice requires that a Board of Directors have policies and procedures in place that are reflective of contemporary governance practices. A Governance and Policy Framework has been developed for the Board to reflect key accountabilities in the agency's Memorandum of Understanding and the By-laws. The Framework and an accompanying work plan became the blueprint for the sequenced review and approval of governance policies that were approved by the Board in March 2018. The final Board Policy Manual is targeted for July 2018 and will be complemented with robust operational policies and procedures developed in a parallel process.

Additionally, a comprehensive review of accreditation resources has been completed for the Board.



Operational Foundation and Readiness

Through a competitive procurement process and a Request for Services, SDCO engaged Optimus/SBR, Public Sector, Healthcare and Not-for-Profit Group to work with the agency to develop the frameworks and strategies necessary for operational readiness. The interim leadership team of SDCO partnered with industry specialists at Optimus/SBR to create the core foundational documents which can guide SDCO into the future.

Patient Services Delivery Model

Self-directed care is intended to empower patients and families to have a greater say in choosing their health care provider, and in determining how that provider delivers services.

When implemented, the self-directed care program offered by SDCO will be one of two new programs of this type introduced by the Ontario Ministry of Health and Long-Term Care.

In the SDCO program, the provincial agency will recruit, hire and train Personal Support Workers (PSWs) to provide personal support services in the home to eligible patients within the LHINs. As the employer, SDCO will relieve patients and families of the responsibilities of managing the details of employment while still empowering patients to have more choice, control and confidence in their care.

Patients eligible for SDCO services are defined as having chronic and relatively stable health conditions, needing a

minimum of 14 hours of personal support services each week and for at least six months. For these patients, the goals of SDCO are to promote greater management of care by patients and/or families to maintain or improve patient and family/caregiver satisfaction and support optimal patient outcomes. SDCO will do this by:

- Giving patients or families greater choice over who provides services in their homes, and when services are provided
- Enabling more flexibility in service delivery arrangements
- Reducing service provider turnover, thereby limiting the burden on patients or caregivers to orient and instruct new service providers; and
- Supporting long-term therapeutic relationships between patients and their chosen service providers

A core principle guiding the development of the patient services delivery model is co-design of key elements of the model with the LHINs and patients and families.



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The delivery model has made progress and will be refined based on engagement with these partners.

Initially, the development of the Patient Services Delivery Model has been defined by six key elements: patients (who); area of service (geography); services delivered (what); care setting (where); hours of operation (when); and patient journey (how). Early efforts have been focused on developing a proposed approach with the early adopter LHINs, with the service delivery model expected to change based on initial service delivery with the early adopter LHINs.

As the patient services delivery model continues to evolve, it will reflect the specific local context and system expertise of the early adopter LHINs. Good progress has been made in understanding the unique population characteristics within the early adopter LHINs and in exploring the definitions of patient eligibility.

The approach used this fiscal year can be applied in future years as other LHINs come on board with implementation.

A key priority for fiscal year 2018/19 will be to engage with the patients and families we serve early in our mandate, and later to expand the scope of these engagements by connecting with patients and families of Patient and Family Advisory Councils (PFACS) in the LHINs.

Another key deliverable achieved during the past fiscal year, is the development of clear values and principles that will guide the delivery of care. These values reflect the importance of patient and family-centred care, quality improvement and safety-focused cultures: Patient-Centredness and Flexibility; Choice and Responsibility; Transparency; Consistency; Accountability; and Quality and Safety.

As the patient service delivery model evolves, SDCO will work closely with the LHINs to ensure that the priority populations of Indigenous and Francophone communities are also engaged and that their needs are identified, understood and addressed prior to implementation.

Human Resources Strategy and Workforce Plan

As a provincial employer of Personal Support Workers (PSWs), SDCO has an opportunity to make a major and positive impact on this important health care role, becoming an employer of choice.

During the past six months, substantial progress has been made to develop the foundation for a successful, highly-skilled workforce within a high-performance agency. The critical and tactical aspects of start-up

have been considered and longer-range priorities have been defined for Human Resources: the preferred work culture; critical success factors; and core competencies to positively impact patient satisfaction. SDCO recognizes the importance of supporting Personal Support Workers in career growth through ongoing training and development; recognition for good work; and by providing stable employment.

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With this lens, the leadership team and the Board have approved a number of proposed key strategies to recruit and retain a highly skilled and engaged workforce. These strategies are intended to lay the groundwork for a sustainable culture of trust, openness and transparency where employees are valued and empowered to provide the best possible care to patients.

As an initial first step, SDCO defined a roadmap for its organizational structure to the third quarter of 2018/19 and identified some key positions that will be necessary to fill by the end of next fiscal year. Any future changes in the organizational structure will be dependent on service delivery implementation and subsequent increases in service volumes. The preferred model is one of decentralized management that prioritizes local oversight and management of service delivery in each LHIN. Service and human resource support functions will be centralized at the SDCO head office along with senior leadership staff.

A foundational piece for the Human Resources function is the ongoing development of strategies in four key areas which will address:

- ▶ **Workforce requirements** - how many employees will be needed; the qualifications they should have; and when they will be required.
- ▶ **Recruitment and selection** – activities for recruiting, hiring, internal staffing, human resources marketing/branding and diversity efforts to target workforce needs.
- ▶ **Learning and development** – developing people and leaders to reinforce

corporate strategy and the approach to individual performance development and planning to support overall corporate goals.

- ▶ **Reward and recognition** – systems and tools to track compensation, incentives and retention, work-life balance and engagement and motivation among employees.

These four areas will be aligned through an Integrated Talent Management Framework. The recruitment of PSWs is critical to SDCO's success and to enable patient and family choice, flexibility and continuity of services. An important and immediate step for SDCO as the fiscal year progresses will be to move forward with a Request for Services for a vendor who can act as a partner in the successful marketing and recruitment of PSWs in the early adopter LHINs. These LHINs will continue to be engaged in the implementation of recruitment plans, to ensure there is minimal disruption at the local level if existing PSW resources are scarce.

SDCO's recruitment will be bolstered by a Memorandum of Understanding with Michener Institute, an organization overseeing the Personal Support Workers Registry of Ontario. If PSWs completed their training during the time period defined by the Michener Institute, their education and competencies will be included on the Registry in the initial rollout phase.

In 2018/19, the work within each of the four areas identified above which are aligned with the Integrated Talent Management Framework, will form the basis of a Human Resources Strategic Plan and will include Leadership and Organizational Development and Occupational Health and Safety.

Patient and Family Engagement Framework

SDCO has developed a framework that will guide patient and family engagement with a goal of creating change that is meaningful to patients and families. Leading and learning from the voice and the experiences of patients and caregivers will be intrinsic to SDCO's goals of empowering patients to direct their care needs with choice, continuity and flexibility.

Patient engagement goals for short-term, medium-term and long-term timeframes have been established and a number of multiple mechanisms and channels for engagement have been identified and defined, to create maximum impact and understanding. Patients will be able to inform us on

how SDCO can best support them in self-directing their care, to provide the best possible patient and family experience. The LHIN Patient and Family Advisory Councils for example, will be a rich resource and source of information for SDCO.

The patient mechanisms and approaches were developed to align with the frameworks of Health Quality Ontario relative to patient engagement domains and the spectrum of engagement. There will be an emphasis on communication and feedback loops to help patients and families understand how the engagement process has informed the future delivery of care.

Quality Management Plan

Quality management is a critical activity in health care organizations to ensure patients routinely receive high-quality care. A Quality Management Plan promotes accountability and identifies how the organization will achieve and sustain high-quality care.

As an important first step, SDCO has developed and approved a Quality Management Plan that includes the critical elements for fostering a culture of patient safety, continuous improvement, and patient and family centred care.

The Plan encompasses quality, safety and clinical risk management and focuses on the things the organization needs to have in place to enable the desired culture and the delivery of safe, high quality, patient and family centred care. Considered in the Plan are the start-up realities of SDCO and a focus on the key elements and actions required to develop and maintain quality care at SDCO.

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The key elements included in the Plan are:

- Defined Quality Management objectives for the organization
- Consideration of Health Quality Ontario's dimensions of quality as a framework
- Definitions for the elements in the Quality Management Framework
- Defined Quality Management accountabilities for the Board; the CEO and Executive Directors; Managers and Patient Services Lead; Patients and Families
- A Quality Management Action Plan for Year 1 and Year 2, with detailed identification of the required tools that will need to be developed and key policies and procedures.

Additionally, as part of the Quality Management Plan, frameworks have been developed for Incident Management and for receiving and responding to Complaints and Concerns. These frameworks will be further expanded to align with the Patient Services Delivery Model.

As the Quality Management Plan is implemented, it will be critical for SDCO to incorporate Accreditation Canada's Required Organizational Practices and high priority standards. The agency is building awareness and understanding of Accreditation Canada, with an eye on future readiness and certification.



Digital Strategy

A key enabler for SDCO's success is the application of digital technology in new and innovative ways that respond to home care challenges. Some of these are: lack of access to provincial patient information software and assessment tools; lack of connectivity to health care information system-wide; and systems that are disconnected and incompatible.

With an awareness of these and other issues, an SDCO visioning session identified a number of goals and needs that could be met through a Digital Vision for the future.

The goals of the Vision are built on four key pillars:

- **Empowering patients and families** to support patient and family selection and choice in the PSWs who will provide care to them and support the self-scheduling of appointment times and services
- **Enabling efficient service delivery** through systems that reduce manual work and can interface with provincial patient information systems
- **Improving patient and PSW safety** to support the delivery of patient services of the highest quality and safety
- **Improving the PSW working experience** through mobile-point-of-care applications to provide PSWs with accurate and up-to-date care information and instructions and leverage technology to support PSW training and education

The Digital Strategy was developed to support these key pillars and includes:

- A Digital Strategy Map
- A Digital Hierarchy of Needs Framework to illustrate the key IT desired components
- An Implementation Roadmap to instruct and guide SDCO's digital implementation efforts
- An Environmental Scan of digital provider solutions to provide a better understanding of available solutions and vendors

As SDCO builds its Digital Strategy for the future, it will be important to align with and support current provincial digital priorities and ensure future alignment with provincially planned home care digital improvements and innovations that are currently being defined.



Looking Forward

With solid frameworks and strategies in place, **SDCO is ready to move from operational readiness to implementation.** We look forward to advancing a number of priorities in the months ahead by:



- Defining a Vision, Mission and Values that will drive the development of strategic priorities for the future
- Engaging with patients and families to learn how we can support them to self-direct their own care, while providing the best possible patient and family experience
- Completing the outsourcing of essential back office functions and moving into longer-term temporary accommodation
- Beginning the recruitment of local PSWs in partnership with the LHINs
- Engaging with other LHINs to expand on the patient services delivery model
- Building on the critical success factors identified in our Annual Business Plan
- Creating a leadership team for the future





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