

## **GOOD NEWS FOR HOME AND COMMUNITY HEALTH CARE**

### ***A Home and Community Health Care Update from Your Continuing Care e-Health Council***

#### **TIME FOR TRANSFORMATION THROUGH E-HEALTH**

Times are changing for home and community health care in Ontario. The important role that community-based providers (long term care facilities, home care agencies, mental health services, and community care access centres) can play not only in helping clients, but also in relieving cost pressures within the system, is being recognized now more than ever. *At a time when people and governments are looking for greater accountability from all health care providers – and want to understand the value they are getting for every tax dollar spent – home and community organizations have the opportunity to do more than ever before.*

The challenge before home and community health care organizations is to link more closely with other parts of the health care system, while simultaneously creating better mechanisms to measure our success and demonstrate how efficient we can be.

To make sure that we succeed, an exciting transformation project has begun.

One of the most important tools that we have to help us with the transformation of Ontario's healthcare system is e-Health. It will dramatically help us in the way we provide care to our clients, and work with our staff. It will impact health care substantially, and for the better.

The purpose of this newsletter is to keep key leaders within the home and community health care sector up to date on the e-Health strategy, and to build awareness of what e-Health can do for our organizations. The Continuing Care e-Health Council was created to ensure that our sector is fully integrated with the government's e-Health strategy.

Comprised of representatives from the Ontario Ministry of Health and Long Term Care, home care agencies, community support service agencies, long term care facilities, and mental health agencies, the Council works closely with the Ontario e-Health Council, which leads the full range of e-Health projects across Ontario.

Since starting our work, we have made important progress on priorities that will improve outcomes for health care clients, and improve the efficiency and effectiveness of staff.

## WHAT'S HAPPENING FIRST: OUR PRIORITIES

E-Health is exciting because it offers such tremendous benefits within all aspects of home and community health care. Among other things, e-Health will:

- make administration smoother;
- provide caregivers with decision support tools; and
- promote a more consistent and equitable way of helping Ontarians to be more healthy.

With so many opportunities to improve the ways we help our patients and clients, the Council has had to be especially disciplined and focused in setting priorities.

### ***All About Better Client Care***

At this relatively early stage, our top priorities are:

- to ensure that organizations can connect with one another electronically, to allow people to be referred to home and community health organizations over email;
- to develop and implement common assessment tools for the evaluation of client needs; and
- to make sure that electronic messages sent among home and health care organizations are secure.

But we always remember that these priorities are but a means to a very important end: better client care.

### ***Common Assessment***

For too long, best practices in assessing clients have not been adequately shared or standardized across the province. The introduction of 20,000 new long-term care beds highlighted the need for a standardized, consistent assessment process to help people in need get admitted on a timely basis to long-term care facilities.

An electronic method of conducting adult long-term stay assessments has already been developed. Called the ***Resident Assessment Instrument - Home Care***, *this tool will enable Community Care Access Centre (CCAC) case managers to conduct in-person assessments for adult long-stay clients at people's homes and in hospitals.* An enhanced version of this assessment tool – with more advanced software – is currently being developed.

The next phase of the common assessment project will focus on developing an electronic tool for triage and short-stay assessments by CCACs. This will provide a standardized way of assessing people who are being discharged from hospitals or requiring community services.

Overall, the development of these electronic, standardized common assessment tools will help provide equitable access to home and community health care, and help us to be more accountable as a result of clearer performance standards and benchmarks. In all, common assessment tools will help improve our ability to allocate our staff and resources in ways that help our patients, residents and clients even more effectively than we are able to today.

### ***Electronic Referral of Patients, Residents, and Clients***

Just as a city needs roads before people can travel to visit one another, Ontario's e-Health system needs to connect health care providers electronically. *For the first time ever in Ontario, a single electronic network will link all health care professionals.* Like roads and bridges transporting health care information, our network will allow health care professionals to securely share residents' and client information.

What will this allow us to do? Save time, money, and re-work that come from the existing ways in which clients are referred or transferred from one provider to the next. However, even if we have a world-class system connecting health care providers across the province, it will only be a success if health care professionals *trust* the system. Which is why our third priority is making sure that the messages we send electronically are secure and respect client confidentiality.

### ***Making Sure the Messages We Send Electronically are Secure***

For the e-Health strategy to be an overall success, health care providers need to be able to send emails and attachments to one another with confidence. We need to know that our messages cannot be tampered with. We also need to be certain about which people sent the messages we receive, and which specific individuals can open the messages we send. That's why a key priority is the development of what's called *Secure Messaging Infrastructure*, or SMI.

Today, inefficient phone calls, printing, and faxing are required to transfer client information from one health care provider to another. The main idea behind creating a Secure Messaging Infrastructure is to reduce these time-consuming methods of transferring information with email. *If health care providers feel confident that they can share a client's health information through secure email, we can all significantly reduce the amount of phoning and faxing required today.*

Ontario's Secure Messaging Infrastructure (or secure email), provided by Smart Systems for Health Agency, will provide multiple layers of security to help us transfer information knowing that the information is protected. Virus detection software, content scanning and intrusion detection systems will safeguard emails, while firewalls are going to provide further security.

## **IF YOU READ ONE THING IN THIS COMMUNIQUÉ, READ THIS!**

To develop a secure email system that will work across the health care system, we need to better understand the capabilities and existing electronic infrastructure of community care organizations.

That's why we are gathering information and conducting an analysis to understand the existing technological capabilities of organizations within the community health care sector. To do so, the Continuing Care e-Health Council has approved what's called a "gap analysis" of the current technical capacities of organizations within our sector. In the weeks to come, you will receive more detailed information about this gap analysis – including details on how you can help.

The results of this analysis will be used to create a project to help us implement secure email and a Secure Messaging Infrastructure across Ontario's community health care sector.

Stay tuned in the weeks and months ahead regarding the work of the Continuing Care e-Health Council. This is an exciting time within the community health care sector, and we want to keep you informed about all of the opportunities that will be coming your way.

## **WHAT E-HEALTH IS, AND WHY IT IS SUCH AN IMPORTANT GOVERNMENT PRIORITY**

Information technology has vastly improved and simplified our lives when it comes to everything from keeping in touch with friends to ordering airline tickets. But until now, the power of information technology has *not* been applied to our health care system in a strategic, comprehensive way.

That's why the Ontario government is implementing its e-Health strategy.

The e-Health strategy is bold, comprehensive, and exciting. It will mean:

- Better public access to information on how to stay healthy and prevent disease;
- Improved diagnostic and treatment capabilities;
- Electronic health records for each person in Ontario;
- Decision support tools to reduce the risk of error and improve the quality of care;
- Improved management of the health care system overall;
- More efficient and accountable use of health care dollars; and
- People will move through the health care system more smoothly and with improved management of their care from practitioner to practitioner.

The Ontario government confirmed its belief in e-Health in the recent provincial budget, and given the government's commitments to a healthier Ontario and creating greater accountability in all government-funded areas, e-Health will be implemented expeditiously. All that you can do to learn about it, and to prepare for the new world of e-Health in Ontario will pay long-term dividends for you, your organization, and the people to whom you provide care.

## THE CONTINUING CARE E-HEALTH COUNCIL

The Continuing Care e-Health Council is a sub-committee of the Ontario e-Health Council. Our goal is to ensure that the needs and perspective of community healthcare organizations are represented at the Ontario e-Health Council, and that community health care organizations are integrated within the exciting new world of e-Health in Ontario.

The Members of the Continuing Care e-Health Council are:

- Mary Kardos-Burton (Co-Chair), Assistant Deputy Minister Community Health, MOHLTC
- Camille Orridge (Co-Chair), CEO and Executive Director, Toronto CCAC
- Jim Armstrong, CEO, Ontario Association of Community Care Access Centres
- Kathryn Beaton, Chief, Human Services I&IT Cluster, MOHLTC
- Peter Catford, Vice President, Information Management and Chief Information Officer, Centre for Addiction and Mental Health
- Judy Chalmers, CEO and Executive Director, Grey Bruce CCAC
- Michael Connolly, CEO, Smart Systems for Health Agency
- Barbara Everett, CEO, Canadian Mental Health Association
- John McKinley, Acting Executive Director, Community Health and Acute Services Divisions, MOHLTC
- Joe McReynolds, CEO, Ontario Community Support Association
- Robert Moore, Acting Director, Mental Health and Addictions Branch, MOHLTC
- Donna Rubin, CEO, Ontario Association of Non Profit Homes and Services for Seniors
- Karen Sullivan, Executive Director, Ontario Long Term Care Association
- Lorelle Taylor, CIO, Human Services I&IT Cluster, MOHLTC
- Vida Vaitonis, Director, CCAC Branch, MOHLTC
- Susan VanderBent, Executive Director, Ontario Home Health Care Providers Association

\* Two additional Mental Health and Addictions members are yet to be identified.

For more information you can contact:

Cory Gosnell

Continuing Care e-Health Council Secretariat

416-212-1795

[cory.gosnell@moh.gov.on.ca](mailto:cory.gosnell@moh.gov.on.ca)