



*We want you to stay connected.*

## The HNHB Hospital Sites Involved

Brant Community Health System  
*Brantford*

Haldimand War Memorial Hospital  
*Dunnville*

Hotel Dieu Shaver Health & Rehabilitation  
Centre  
*St. Catharines*

Joseph Brant Memorial Hospital  
*Burlington*

Niagara Health System

Douglas Memorial Hospital  
*Fort Erie*

Greater Niagara General  
*Niagara Falls*

Niagara on the Lake Hospital  
*Niagara on The Lake*

Port Colborne Hospital  
*Port Colborne*

Welland Hospital  
*Welland*

Norfolk General Hospital  
*Simcoe*

St. Joseph's Healthcare Hamilton  
*Hamilton*

St. Peter's Hospital, Hamilton Health  
Sciences  
*Hamilton*

West Lincoln Memorial Hospital  
*Grimsby*

## A NEWSLETTER ABOUT THE HAMILTON NIAGARA HALDIMAND BRANT (HNHB) LOCAL HEALTH INTEGRATION NETWORK (LHIN) COMPLEX CARE IMPLEMENTATION PROJECT

Welcome to the first issue of "The Complex Care Connection". Quarterly newsletters will be circulated to help keep you informed and up-to-date with this exciting LHIN-wide integration project. For the remainder of the year and into spring 2012, Complex Care leaders, frontline staff, patients and families will be involved with the development and implementation of best practices for Complex Care.

**We want you to stay "connected".**

## The Project's Purpose

The purpose of the implementation project is to enhance care for complex care patients and improve the overall health of this population. We're hoping to lead the way as this project is the first of similar projects proposed. We hope to be able to share project steps, critical success factors, and lessons learned with future projects.

*Wendy Robb,  
Health Program  
Director (left)  
toured Brenda St.  
Amant, Project  
Mgr (right), &  
Sonia Rogers,  
CCAC Client  
Services Mgr  
(centre) to her 5  
Complex Care  
sites in the  
Niagara Health  
System*



## The Project Manager

**Brenda St. Amant, Project Manager**, joins the project from Hamilton Health Sciences (HHS), where she was the Clinical Manager for Stroke and Acquired Brain Injury Rehabilitation. Brenda loves the details of larger project work, and draws from many past experiences including her work as a Reengineering Specialist, and Project Manager and Clinical Lead for the Hamilton Health Science's Regional Rehabilitation Centre build.

\*Contact Brenda with your questions 905-633-3892 or email [Brenda.StAmant@hnhb.ccac-ont.ca](mailto:Brenda.StAmant@hnhb.ccac-ont.ca)\*



## New Service Delivery Model

Complex Care (CC) patients have completed the acute phase of care and are medically stable but have multiple complex chronic conditions requiring daily skilled assessments by an interprofessional team.

The new service delivery model encourages new ways of thinking about Complex Care. The CC bed is no longer a final destination but a step along the continuum and when admitted, patients will have specific goals, a targeted length of stay and a solid plan for discharge to a safe environment.

## New Shared Definition for Complex Care

“Complex care is a specialized, time-limited program providing patients with complex medical conditions who require a hospital stay with ongoing onsite assessment and active care by an interprofessional team with a goal to enhance the health and quality of life”.

### The Community Care Access Centre (CCAC) Expanding Their Role

CCAC will become involved in the movement of all Complex Care patients with an expanded role in referral, assessment, and placement. Their experience managing many of the same processes for Long Term Care including maintaining a centralized wait list will help them with the new responsibilities. Currently CCAC Case Managers are helping Complex Care inpatient units discharge individuals designated ALC to appropriate places. They also determine eligibility and coordinate admissions to the Assess/Restore beds in 3 hospitals and the Slow Paced Rehabilitation beds at Hotel Dieu Shaver.

## Four Streams of Care

**Behavioural Health** - Patients with dementia and challenging behaviours who require skilled interventions in a controlled environment to facilitate their transition to the appropriate level of care.

**End of Life Care** - Patients with a life limiting illness who are at the end stage of that disease process and who require symptom management and skilled interventions delivered by an interprofessional team.

**Medically Complex** - Patients with multiple medical conditions such as complex wounds, ALS, MS, bariatric or COPD who require unique programming. Some distinct patients of this group include: those ventilator-dependent, requiring dialysis, or with an acquired brain injury.

**Restorative Care** - Patients with multiple medical and/or functionally complex conditions who are expected to benefit from low intensity, long duration interventions provided by an interprofessional team.

## WHAT'S STAYING THE SAME

Quality Patient Care  
Involved and Motivated Patients and Families  
Dedicated and Qualified Complex Care Staff  
Partnerships with Complex Care Hospital Sites  
Partnerships with Community Care Access Centres



## HNHB LHIN COMPLEX CARE IMPLEMENTATION PROJECT STEERING COMMITTEE

*To monitor the project and ensure a successful outcome, this project will be overseen by the HNHB LHIN CC Implementation Project Steering Committee.*

Members include:

- ✦ **Co Chair:** Kathryn Leatherland, Director Client Services, HNHB CCAC
- ✦ **Co Chair:** Lina Rinaldi, Vice President, Patient Services, BCHS
- ✦ **Project Manager:** Brenda St. Amant, HNHB LHIN CC Implementation
- ✦ Carolyn Bergeron, VP Clinical Services, Chief Nursing Officer, HDS
- ✦ Cheryl Cullimore, Advisor, Performance & Contract Management HNHB LHIN
- ✦ Sharon Dafoe, Administrative Assistant, Vice President Patient Services, BCHS
- ✦ Laurie Ellis, Vice President Operations, Chief Nursing Officer, WLMH
- ✦ Angie Grice, Administrative Assistant, Director Client Services, HNHB CCAC
- ✦ Jane Loncke, Director, Clinical Programs, CCC & Rehab., Therapeutics, Palliative Care and Community Partnerships, SJHH
- ✦ Liz Mersereau, Clinical Manger, Medically Complex and Site Administrator, St. Peter's Hospital, HHS
- ✦ Sharon Moore, Vice President and Chief Nursing Officer, HWMH
- ✦ Yvonne Pearson, Manager, Complex Care and Palliative Care, BCHS
- ✦ Wendy Robb, Health Program Director PCG, DMH & NOTL Sites, Director Complex Care Program and Welland Extended Care Unit, NHS
- ✦ Sonia Rogers, Manager Client Services, HNHB CCAC, Hamilton Branch
- ✦ Ed Zeismann, Director Rehabilitation, Complex Care & Mental Health Services, JBMH

### Project Timeline

Only "365 Days Left!! April 2012 is our deadline. Knowing the clock is ticking most committee members are meeting at least every 2 weeks

### Financial Subcommittee

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**Just what does it cost to provide the best complex care?**

Under the leadership of Patti Cicarelli, financial leads of the CC hospitals have been busy analyzing current costs associated with the care of this complex patient group. Costs examined include direct costs such as staff salaries and medical supplies, variable costs like laundry, food and drug costs, and finally overhead costs including diagnostic tests, and security.

- Patricia Ciccarelli, Team Lead Funding and Allocation, HNHB LHIN (Chair)
- Sonia Browne, Deputy CFO, St. Joseph's Healthcare Hamilton
- Chris Eivers, Vice President, Corporate Services, BCHS
- Florine Lobo, Acting Vice President, Corporate Services, JBMH
- Julie Marrone, Manager, Finance, HDS
- Dan McInnis, Advisor Funding and Allocation HNHB LHIN
- Brenda St. Amant, HNHB LHIN Complex Care Implementation Project Manager
- Tom Thompson, Vice President, Finance, NGH
- Kathy Watts, VP Finance and CFO, HHS
- Angela Zangari, Chief Financial Officer, NHS

## HOSPITAL ACRONYMS TO HELP YOU OUT

- BCHS Brant Community Health System
- JBMH Joseph Brant Memorial Hospital
- HHS Hamilton Health Sciences
- NHS Niagara Health System HHS Hamilton Health Sciences
- WLMH West Lincoln Memorial Hospital

- HDS Hotel Dieu Shaver Health & Rehabilitation Ctr
- HWMH Haldimand War Memorial Hospital
- NGH Norfolk general Hospital
- SJHH St. Joseph's Healthcare Hamilton



## The Human Resource Planning Subcommittee

Committee members have been busy since Feb. 2011 gathering baseline data on current staffing and models of care. Our clinical reps. have worked at describing the patient's in each stream and their care needs.

Understanding the daily needs of the complex care patients will help the committee recommend preferred staffing models. Eight Complex Care Patient Profiles have been created and will be shared with the hospital sites for feedback.

In April, using a specific framework, members will prepare recommendations for preferred staffing models for each patient stream.

Committee members include:

- ♦ Carolyn Bergeron, VP Clin. Services, Chief Nursing Officer, HDS
- ♦ Joy Clarke, Acting Nurse Manager, RN, SJHH
- ♦ Sheila Ceko, H.R. Consultant, HHS
- ♦ Robert Davidson, HR & Labour Relations Manager, BCHS
- ♦ Grey McGarry-Ainslie, HR Manager, NHS
- ♦ Yvonne Pearson, Clinical Manager, BCHS
- ♦ Sonia Rogers, Mgr Client Services, HNHB CCAC
- ♦ Brenda St. Amant (Chair), HNHB LHIN CC Implementation Project Manager

## Patient Flow Processes Subcommittee

Hospital representatives have partnered with CCAC to outline a consistent process for the referral, assessment and admission of a patient appropriate for Complex Care. CCAC will use some well known, valid and reliable assessment tools to determine the best place for our patients and the hospitals will have access electronically to all CCAC information. This committee will describe the enhanced CCAC roles and responsibilities, and will detail the wait list strategy.

Committee members include:

- Celia Aiello, Clinical Manager, NHS
- Jennifer Hansen, Clinical Manager, HDS
- Christine Hnatiuk, Occupational Therapist, JBMH
- Lori Lawson, Discharge Specialist, SJHH
- Kathryn Leatherland, Director Client Services, HNHB CCAC
- Sharon Moore, Vice President Patient Care and Chief Nursing Officer, HWMH
- Yvonne Pearson, Clinical Manager, BCHS
- Sonia Rogers, Manager Client Services, HNHB CCAC, Hamilton Branch
- Anne Smith, Clinical Leader of Physiotherapy, St. Peter's Hospital, HHS
- Brenda St. Amant, HNHB LHIN CC Project Manager (Chair)
- Debbie Thwaites, Patient Flow Coordinator, WLMH



Marion Ratzlaff, CCAC Case Manager & Educator (middle) led education sessions for all Patient Flow Subcommittee & Steering Committee members including Anne Smith, HHS (left) and Lori Lawson, SJHH (right)