

Relationship Building: Principles for Success



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Cummer Lodge

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History

- Director of Nursing attended a Symposium on Aging in Toronto in 2000
- Started with one individual with complex needs
- Reena recognized a need to partner both for this individual and for others
- Setting up meetings with the Director of Nursing to talk about possibilities

History

- Willingness to work together
- Willingness for Reena to stay involved with the individuals by providing needed supports
- Reena staff visits to Cummer
- Cummer staff visits to the Reena group home
- Developed a concrete (in writing) transition plan including staff training across all shifts at Cummer

OPADD and Partnership

- Cindy volunteered to become member of OPADD after the Symposium
- Reena was the lead for OPADD
- Cindy became co-chair for TPADD (Toronto regional committee)
- Both organizations saw the broader need for the sectors to work together
- Wanted to develop a partnership – we had an understanding of what the vision was and we wanted to build a practical model

Current Context

- 6 Reena clients living at Cummer Lodge
 - 9 individuals who transitioned from Reena to Cummer
 - 5 who have passed away
 - 2 individuals who came from facilities
 - Over 4 years
- Has evolved from a few hours a week visiting to 2.5 full time equivalent

Facilities Initiative

- LTC protocol was developed by MCSS and MOH-LTC for the facility project but also covers community agencies
- LTC protocol spoke to the developmental services agencies remaining involved and providing enhanced supports within LTC
 - Staffing
 - Equipment
 - Private Room
 - Special Needs - other costs that are not covered e.g. medication not covered by ODB

Facilities Initiative

- Because of the relationship between Reena and Cummer – MCSS choose the two organizations to transition 2 individuals from a facility to Cummer.
- This increases community capacity for the future
 - The funding remains in this model and others can access these same supports when the individuals pass away

CCAC

- Recognize their critical role in the transition of individuals
- Relationship building with CCAC is key
- Acknowledge our wonderful partnership with CCAC Central LHIN and Jennifer Scott
- Need to have a champion within CCAC who is sensitive to the issues of Aging and Developmental Disabilities, understands the limitations on the system and how to help

Transition

- James and Cindy were co-chairs of the transition task group for OPADD
- OPADD's document "Transition Guide for Caregivers"
 - See checklist – this is based on Reena's experience as well as Survey that was designed and tested
- Distributed to 1200+ long term care and developmental services providers, families, planning bodies, Ministry offices

Transition

- Survey - questions designed to gather data on practices, philosophy, similarities and differences – guide developed from this
- Planned and coordinated
- Stages of transition – pre-move, move, post move, ongoing care and supports
- Reena remains involved with the individuals post transition

Role of Family

- Consent by Substitute Decision Makers
 - For the application to LTC
 - For the admission to the LTC home
 - For care decisions
 - Some manage finances – others it will be managed by the LTC home or PG&T
 - Crucial involvement prior to choosing a LTC home and continuing through the process

Role of Staff

- Cummer staff – within the context of LTC home – Nursing, Nutrition, Social Work, recreation etc.
- Reena staff – enhanced services such as community outings, recreation, swimming, visits to medical specialists, feeding etc.
 - Reena staff are supervised and managed by Reena includes WSIB, all insurance, police reference checks etc.

PG & T

- CCAC may communicate with the PG&T before admission to LTC
- Substitute health care decisions
- In some cases Finances & Estates
- Invited to Care Conferences

Cross Sector Training

- Cummer offers Reena staff a thorough orientation
- Orientation covers amongst other things, Policies and Procedures, feeding, lifts and transfers
- Reena staff share their expertise in the developmental sector with LTC home staff
- Cummer staff share their expertise in the LTC/Seniors sector with the DS staff
- Cummer and Reena staff attend OPADD/TPADD workshops (e.g. U-First)

Challenges

- Flow of Communication
- Consent and who to contact when an agency is involved – information sharing
 - DS agency must fully understand who is the SDM and who makes health care and financial decisions prior to admission to LTC
- Staff training for both DS agency and the LTC home – requires time & money
- Defining staff roles and shifting roles
- Finances – things that are not covered by MOH-LTC such as medication not covered by ODB

Tips for Success

- Develop good communication processes
 - Regular Team meetings with all players
- Constant evaluation – partnership is constantly evolving
- Willingness to work through challenges
- Open minded
- Good staff orientation and education
- Understanding the “other” system is key – e.g.
 - “Walk in my shoes” session

Thank-You!



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