

Central East LHIN



# Integration Plan Northumberland Hospice Services

*An integration facilitated by the Central East LHIN.*



PALLIATIVE CARE  
Campbellford

Community Care  
Northumberland

Engaged Communities.  
Healthy Communities.



## Purpose

- The purpose of the Integration Plan is to provide the information necessary to make an informed decision on the integration of hospice services, currently provided by Hospice Northumberland Lakeshore (HNL) and Palliative Care Campbellford (PCC), with the services provided through Community Care Northumberland (CCN).
- The integration identified in this Plan represents a “transfer of services and operations” from HNL and PCC to CCN, a “ceasing of services” by HNL and PCC, and the eventual voluntary wind-down of HNL and PCC corporate entities.

Engaged Communities.  
Healthy Communities.

## Background

- The challenges facing HNL and PCC provide a unique opportunity to integrate hospice services within the broader range of services provided by CCN.
- An integrated set of services available through CCN will improve ease of access and navigation to community services for palliative and bereaved clients, leverage existing local governance, management, back office support, volunteerism and fund raising.
- CCN's board, management, staff and volunteers are well positioned geographically and operationally to provide hospice services.
- The CE LHIN recommended a **facilitated and negotiated integration** as the means to successfully integrate hospice services.

Engaged Communities.  
Healthy Communities.

## Planning Team and Process

- HNL, PCC, CCN and the CE LHIN approved a set principles to guide the integration process.
- A Planning Team was established and a Terms of Reference was approved. The Planning Team was charged with developing and implementing an Integration Plan for hospice services.
- The process involved:
  - Information sharing and due diligence
  - Understanding the “current state” of hospice services and CCN services
  - Identifying opportunities for integration
  - Identifying and analysing options
  - Selecting a preferred option
  - Defining the “end state” integrated service
  - Determining the steps to transition to the end state

Engaged Communities.  
Healthy Communities.

## Integration Plan

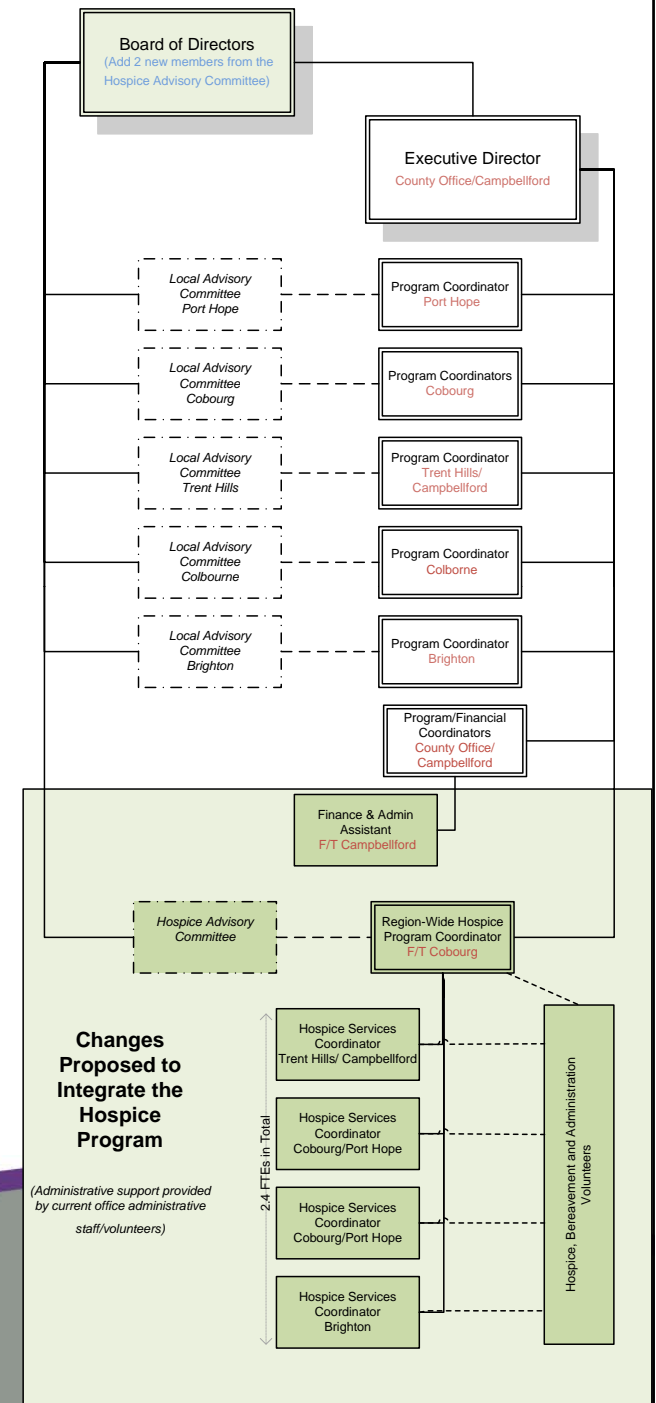
- The Integration Plan documents the process, information, analysis, recommended service delivery model and transition activities to transfer hospice services to CCN.
- Steps have been taken to inform and obtain input from key stakeholders and the community:
  - Peer Review of the draft service delivery model
  - All HNL, PCC and CCN staff briefed in person
  - 40+ HNL volunteers briefed in person
  - Broader engagement of community, volunteers, clients and donors via CE LHIN news releases, newspaper articles and feedback survey
  - Letter to HNL donors
  - Boards of Directors kept up-to-date on process by Planning Team.

Engaged Communities.  
Healthy Communities.

# Integrated Hospice Service

- CCN hospice services delivered from Cobourg, Brighton and Campbellford.
- Hospice services managed by a region-wide hospice coordinator, with the support of 1 full-time and 3 part-time service coordinators - **all current front-line hospice service positions retained.**
- CCN will provide the full range of hospice services and follow existing Volunteer Recruitment and Training , and Client Intake, Assessment and Service Delivery processes.
- CCN will adopt HNL program policies.

Engaged Communities.  
Healthy Communities.



## Integrated Hospice Service

- Hospice Advisory Committee (HAC) to provide program advice, fundraising support , branding and accreditation strategy - contributes two new directors to CCN Board.
- CCN financial/administrative program supplemented with a full-time financial assistant – 40% paid by hospice service.
- Administrative support provided through existing CCN local staff.
- Executive leadership provided by CCN Executive Director .
- CCN will evaluate its mission/mandate to ensure it is reflective of hospice clients.
- 2011/12 cost of hospice service is within 6% of projected CE LHIN allocation - conservative estimate of fundraising easily addresses difference and provides opportunities to enhance program services.
- 2011/12 operating costs reduced by approx 50% from 2010/11 pre-integration projections.

Engaged Communities.  
Healthy Communities.



## Key Benefits

- Important community based hospice services remain viable in the short-term and are sustainable over the long-term.
- All front-line hospice staff positions retained – key to continuity of volunteer services and transparency of change to clients.
- Hospice services will have a solid financial foundation – significantly reduces the CE LHIN's risk associated with underperformance of financial and operational targets.
- Majority of the CE LHIN's funding directed to front-line client services rather than overhead and infrastructure.
- CE LHIN facilitated integration demonstrates support for health service providers during a difficult period.
- Establishes a process, tools and lessons learned that can be replicated for future facilitated and negotiated integrations.

Engaged Communities.  
Healthy Communities.



## Agency Approvals

- The Integration Plan has received the following approvals confirmed in letters to the CE LHIN Board Chair:
  - PCC Board approved the plan on September 5, 2010
  - HNL Board approved the plan on September 7, 2010
    - *Approval included an amendment to invite operational staff to join the planning team to support the transition activities.*
  - CCN Board approved the plan on September 8, 2010

## Next Steps

- CE LHIN Board approval of the Integration Plan.
- Planning Team to commence the transition of hospice services to CCN.

Engaged Communities.  
Healthy Communities.