



Children's Treatment Network

Our experience with a Single Plan of Care Process and the use of a Shared Electronic Record

April 9, 2015



Children's
Treatment Network





- Children's Treatment Centre for York Region and Simcoe County, providing services in home, school and communities and through 10 local shared sites.

- Provide clinical services to more than 6,000 kids/year with multiple special needs.
- 50+ partners: service contracts with 19 partner agencies in community, healthcare and education sectors to provide rehab services, specialized clinics & assessment services.

CTN was incorporated in 2005 and began delivering service to families in 2006.

Enabling collaboration and family-centered care for more than 6,000 families:

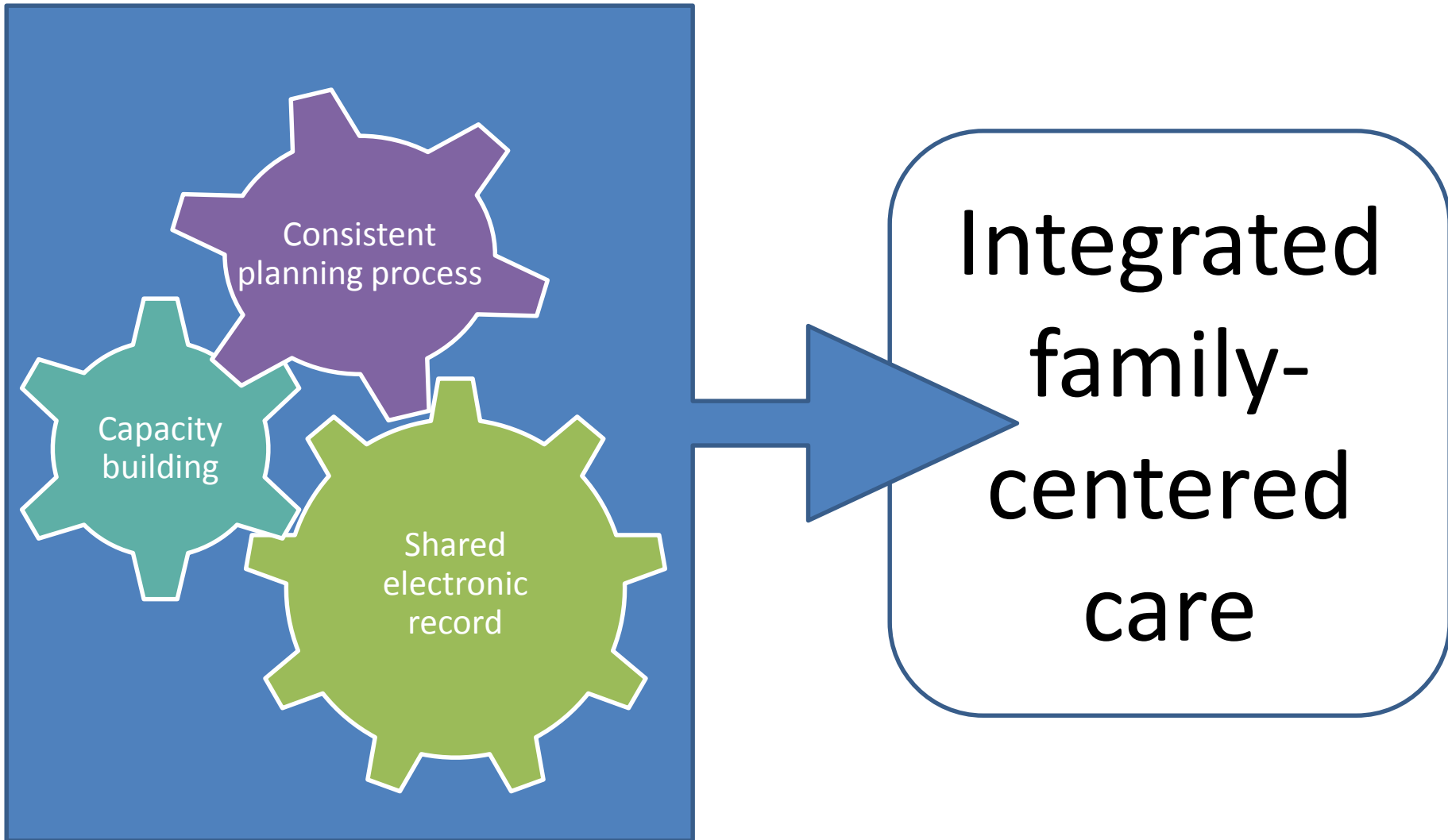
- ***Shared electronic client record:***
 - 12,000 records opened: 6,000 active, 1,200 staff trained with 500 active users across 30 organizations in health, education and community sectors.

- ***Single, integrated plan of care.*** The shared electronic record enables us to:
 - Create a family-centered plan that is focused on the vision the family identifies for themselves.
 - Ensure all providers are working towards the same goals.
 - Better to use our resources to help families work on the things that are important to them.

Levels of Network Participation

- All network partners sign partnership agreement:
 - Core –provide clinical services
 - Affiliate- may provide services
- Network partners whose staff participate in the single plan of care process, and/or use the shared electronic record sign an information-sharing agreement (covers consent, privacy, use of record).
- Network partners who are contracted to deliver services on behalf of the network, or provide infrastructure supports sign annual service contracts with reporting accountabilities identified.

Coordinated Care



Single Plan of Care Process (SPOC)

CTN ACCESS/Service Navigation

- Opens shared record
- Completes assessment, CANS
- Obtains consent
- Refers for SPOC coordination if eligible
- Refers to other services

SPOC Coordinator

- Meets family, discusses visions
- Determines if additional services/assessments are required
- Assembles and coaches team to assess child/youth according to visions
- Sets SPOC meeting for all team members

SPOC meeting

- Aim for full participation
- Use time to plan together
- Client and family are key members of the team
- Determine goals, tasks and activities together

Monitor and next steps

- SPOC coordinator monitors plan and works with family and team to determine when another meeting is needed

Shared electronic record

- Visions, SMART goals and activities documented in the shared record for all to monitor

Jessica

- 11 year old living with twin brother and her parents in rural neighbourhood.
- Attends grade 4 loves school and being with her classmates.
- Delays noted at six months. Jessica suffered significant seizures at two years.
- Now uses a wheelchair and communicates using augmentative communication equipment.
- Recently Jessica returned home after several months at SickKids and Holland Bloorview following surgery to reduce her seizures.
- Jessica was linked with CTN in 2007. Her family has been a strong supporter of the single plan of care process and have been advocates of using the shared record.





- Home
- Back
- Client Inquiry
- User Activity Notes
- Help Mini Lessons
- Print
- Logout

All About Me

Contacts

Forms Assessments/Consent

Notes

Documents

Client # 901083 JESSICA [REDACTED]

Preferred Name: Jessica

- Allergies
- Diagnosis
- Immunizations
- Contacts
- Messages

Inbox 17

▼ Allergies	Notes

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Address	
Address	[REDACTED]
City/Town	[REDACTED]
Postal Code	[REDACTED]
Phone	[REDACTED]
Driving Instructions	
Safety Concerns	DOG
Local Team	Barrie

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Consent for Sharing Information

Network Partner Consent	Additional Team Members	Limitations
Date 17 JUL 14	Hospital for Sick Children	
Limitations	Dr Cellupica - paediatrician	
Name Theresa	Speak Freely - private SLP clinic	
	Dr Climpson-Kennedy - family physician	

Child/Youth Information	
Gender	F
Birth Date	[REDACTED]
Age	11
Primary Contact	Theresa [REDACTED]

External Links

- CTN Calendar
- CTN Waiting List
- CTN Website
- FAQ
- Local Team List
- Quick Questions
- Sharepoint

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Recent Assessments		Recent Notes		
▼ Date	System	Type	Status	Incomplete Sections
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Assessments		Notes		
▼ Program	Date	Type	Note Text	Note Written By
OT	★ 07 APR 15	OT	School visit-spent time working with Jessica and her E.A. on some weightbearing activities. See sum ...	Laurie H Rife - CTNLHR
PT	★ 06 APR 15	PT	March 30th, 2015. OTA/PTA Note. Aquatic Physiotherapy Session. Author assisted Physiotherapist with ...	Cameron Sutherland - CTNCBS
CDA	02 APR 15	AAC	April 1/15 - School visit with Barb Davidson, SLP. See SLP notes for details about today's school v ...	Annette Leibovitch - CTNARL
	02 APR 15	ADMIN	PT TREATMENT REPORT MARCH 31 2015 POSTED TO DOCUMENT MANAGER	Carolyn Ritchie - CTNCGR

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Physician	
Paediatrician	
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Family	
Household Type	TWO
Custody	Both
Joint Custody	NA
Custody Comments	
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School Information	
School Type	ELEMENTARY_SCHOOL
School	Catholic School
School Board	SC
Grade	4
Teacher	Ms. [REDACTED]
Ontario Education Number	IN
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Privacy Framework

- Supported by comprehensive work on privacy and security.
- Policies and procedures are in place that support agreements with over 30 partner agencies.
- Relies on express consent by the family for team members to share information for the purposes of delivering services in a coordinated way.

CTN is a Health Information Custodian (HIC) – has a role to collect, protect and disclose health information through staff and agents of CTN.

CTN is also a Health Information Network Provider (HINP) – which enables two HIC's to share information even if CTN isn't involved directly for example preschool speech providers and early interventionists. Responsible to maintain and oversee the shared record.

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Consent for Sharing Information		
Network Partner Consent	Additional Team Members	Limitations
Date 17 JUL 14	Hospital for Sick Children	
Limitations	Dr Cellupica - paediatrician	
Name Theresa	Speak Freely - private SLP clinic	
Relationship mother	Dr Climpson-Kennedy - family physician	
Comments		

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Child/Youth Information	
Gender	F
Birth Date	
Age	11
Primary Contact	Theresa I
Language	ENGLISH
Referral Date	04 JUN 07
Primary Concerns	Jessica will walk Jessica will speak Jeessica will have productive use of her left hand.

Child & Family Team						
Program	Stage	Date	Organization	Service Provider	Type	
ACCSLP	DIS	30 APR 13	TSC	RAY, HEATHER (#100)	H	^
ACCSMAIN	OGC	09 FEB 11	TSC	HUNT, TRACY (#91)	H	v
CDA	SD	02 APR	SMCDSB	LEBOVITCH ANNETTE (#445)	H	

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Complexity of Service Multi-service
GMFCS Score V - TRANSPORTED IN A MANUAL CHAIR
Primary Care Physician
Paediatrician
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Recent Assessments		Recent Notes		
Date	System	Type	Status	Incomplete Sections

Family	
Household Type	TWO

Child or Youth's Name	Date of Birth	Address	ID Number
JESSICA [REDACTED]	[REDACTED]	[REDACTED]	901083

I understand that personal information will be collected, recorded, stored and used by the Children's Treatment Network (CTN) (which for the purposes of this consent, includes those agencies and organizations that make up CTN (see [current list](#)), and their respective staff and agents about (Please check the box which applies):

- me
 my child and family
 the child for whom I am a guardian

for the following purposes:

- to plan, monitor, and review services to be provided initially and on an ongoing basis;
- to assess my/our needs in order to develop a single plan of care to be provided by the agencies and organizations that make up my child/family team and who require access to my personal information; and
- to allow my child/family team to provide health care, education, social and other services, as directed by me.

I understand that CTN will collect and use the following types of personal information and personal health information as necessary for the purposes listed above, for example, telephone referral forms, histories, assessments, treatment plans, progress reports or notes, and videotapes.

I understand that CTN will use and disclose (i.e. share) personal information with the agencies and organizations that make up the CTN and are involved in providing care and services to me, in order to have the information they need to provide care and services, subject to any limitations on information sharing that I identify in writing.

- No Limitations to Consent
 Limitations to Consent: *identify and list any limitations to the Consent*

^
v

Additional Child and Family Team Members

In addition, I agree to the sharing of personal information to and from the agencies, organizations and/or individuals listed below who are involved in my care, but do not form part of CTN.

Agency/Organization/Individuals	Limitations
Hospital for Sick Children	
Dr Cellupica - paediatrician	
Speak Freely - private SLP clinic	
Dr Climpson-Kennedy - family physician	

- CIN Website
- FAQ
- Local Team List
- Quick Questions
- Sharepoint

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Consent for Sharing Information	
Network Partner Consent	Additional Team Members
Date 17 JUL 14	Hospital for Sick Children
Limitations	Dr Cellupica - paediatrician
Name Theresa	Speak Freely - private SLP clinic
Relationship mother	Dr Climpson-Kennedy - family physician
Comments	











Local Team [Barrie](#)
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Child/Youth Information	
Gender	F
Birth Date	
Age	11
Primary Contact	Theresa I
Language	ENGLISH
Referral Date	04 JUN 07
Primary Concerns	Jessica will walk Jessica will speak Jessica will have productive use of her left hand.
Complexity of Service	Multi-service
GMFCS Score	V - TRANSPORT IN A MANUAL CHAIR
Primary Care Physician	
Paediatrician	
Refresh Created at 18:27:25 in 0ms. 1 of 1 Row Displayed.	
Family	
Household Type	TWO

Child & Family Team					
Program	Stage	Date	Organization	Service Provider	Type
ACCSLP	DIS	30 APR 13	TSC	RAY, HEATHER (#100)	H
ACCSMAIN	OGC	09 FEB 11	TSC	HUNT, TRACY (#91)	H
TSA	SD	07 APR	SMOOR	LEBOVITCH ANNETTE (#445)	H

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Recent Assessments		Recent Notes		
Date	System	Type	Status	Incomplete Sections

		CTNSLB
	2014-09-15 PT TREATMENT REPORT JS.pdf PT TREATMENT REPORT SEPTEMBER 15 2014	16 SEP 14 14:38 CTNCGR
	2014-09-11 OT SCHOOL VISIT REPORT JS.pdf OT SCHOOL VISIT REPORT SEPTEMBER 11 2014	16 SEP 14 12:16 CTNCGR
	2014-07-23 PT TREATMENT REPORT JS.pdf PT TREATMENT REPORT JULY 23 2014	25 JUL 14 12:08 CTNCGR
	2014-06-25 PT TREATMENT REPORT JS.pdf PT CONSULTATION REPORT JUNE 25 2014	03 JUL 14 16:44 CTNCGR
	2014-07-02 sick kids report js .pdf Sick Kids report	02 JUL 14 15:47 CTNDAU
	2014-06-13 OT SCHOOL VISIT REPORT JS.pdf OT SCHOOL VISIT REPORT JUNE 13 2014	20 JUN 14 16:38 CTNCGR
	2014-06-04 PT TREATMENT REPORT JS.pdf PT TREATMENT REPORT JUNE 4 2014	16 JUN 14 12:45 CTNCGR
	2013-12-16 PT APPLICATION FOR FUNDING MOBILITY DEVICES FORM JS.pdf PT APPLICATION FOR FUNDING MOBILITY DEVICES FORM DECEMBER 16 2013	06 JUN 14 13:06 CTNCGR
	[REDACTED] 2014-05-06 School visit by AAC mentor team	09 MAY 14 14:50 CTNBJD
	2014-04-29 PT TREATMENT REPORT JS.pdf PT TREATMENT REPORT APRIL 29 2014	02 MAY 14 14:42 CTNCGR
	[REDACTED] 2014-04-01 School visit by SLP AAC mentor	02 APR 14 17:53 CTNBJD
	2014-03-26 PT TREATMENT REPORT JS.pdf PT TREATMENT REPORT MARCH 26 2014	31 MAR 14 13:32 CTNCGR
	2014-03-19 OT EQUIPMENT RENOVATION RECOMMENDATION REPORT JS.pdf OT EQUIPMENT/RENOVATION RECOMMENDATION REPORT MARCH 19 2014	21 MAR 14 15:05 CTNCGR

Comprehensive Initial Assessment

- Completed by phone by the service navigator
- Builds on the information contained in the file
- Assessment is from the family's perspective – 'do you have any concerns about.....'
- Helps to inform the Child and Adolescent Needs and Strengths (CANS)

Communication

Do you have concerns about how your child communicates? Yes No Declined to Answer

If yes,

Comments

Jessica can be frustrated with communication, some improvement.

		Comments
Does your child seem to understand language like other children his/her age?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> N/A	Receptive language better then expressive - still delayed
Do others have difficulty understanding your child when he/she speaks?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> N/A	Most people can understand her as she only speaks 1-2 words sentences. She is able to physically show what she wants
Does your child have difficulty pronouncing sounds or words?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	She tends to drop ending of words
Does your child use signs, pictures or devices to assist with communication?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	Points to objects. Visual schedule, simple books
Does your child tend to repeat certain sounds or words?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A	

When your child speaks, what is the average number of words in an average sentence?

1-2

How much does your child understand?

Does your child follow commands? Yes No N/A

If not understood, how does your child express his/her needs?

Other:

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

Finish Cancel Help

CAD Print

Assessment Type

Date:

M F
Gender

Child's Name

Child's Number

Date of Birth

Mother Tongue

CHILD/ADOLESCENT DOMAINS NEEDS

MALADAPTIVE BEHAVIOURS

0 1 2 3

0 = No evidence of problem - No need for action

1 = History - Watchful waiting & prevention

2 = Moderate need - action required

3 = Severe problem/need - Immediate/intensive action required

LIFE DOMAIN FUNCTIONING

0 1 2 3

1. Family Functioning

0 1 2 3

2. Social Functioning

0 1 2 3

3. Temperament/Emotional Responsiveness

0 1 2 3

4. Eating

0 1 2 3

5. Sleeping

0 1 2 3

6. Elimination

0 1 2 3

7. Parent-Child/Adolescent Interaction

0 1 2 3

8. Academic Achievement

N/A 0 1 2 3

9. Academic Persistence

N/A 0 1 2 3

10. School Attendance

0 1 2 3

11. Classroom Behaviour

N/A 0 1 2 3

12. Non Classroom Behaviour

N/A 0 1 2 3

13. Special Education

N/A 0 1 2 3

14. Activities of Daily Living

0 1 2 3

15. Adaptation to Change

0 1 2 3

16. Transitions

0 1 2 3

42. Repetitive Behaviours

0 1 2 3

43. Restricted Interests

0 1 2 3

44. Aggression

0 1 2 3

45. Self Injurious Behaviour

0 1 2 3

46. Exploitation

0 1 2 3

47. Flight Risk

0 1 2 3

48. Suicide

0 1 2 3

PARENT/CAREGIVER NEEDS AND STRENGTHS

0 1 2 3

49. Language

0 1 2 3

50. Cultural Stress

0 1 2 3

51. Physical/Behavioural Health

0 1 2 3

52. Family Stress

0 1 2 3

53. Parental Responsiveness

0 1 2 3

54. Organization

0 1 2 3

55. Residential Stability

0 1 2 3

56. Financial Resources

0 1 2 3

57. Natural Supports

0 1 2 3

58. Caregiver Resourcefulness

0 1 2 3

59. Transportation

0 1 2 3

Referral for Single Plan of Care

- Information from the assessment helps to determine need for Single Plan of Care process
- Admitted to program with a status of Waiting
- Information in the shared record is reviewed
- Referrals are assigned to a SPOC Coordinator based on urgency, area of need and location
- Once involved the SPOC Coordinator reviews the file

Stages of Care (CTN.CUSTOM-6164)

Program	Stage	Date	Organization	Service Provider
ACCSLP	DIS	30 APR 13	Speech Clinic	RAY, HEATHER (#100)
ACCSMAIN	OGC	09 FEB 11	Speech Clinic	HUNT, TRACY (#91)
CDA	SD	02 APR 15	Simcoe Musk Cath School Brd	LEIBOVITCH, ANNETTE (#445)
CMHCFT	DIS	30 MAR 09	New Path Youth and Family Svcs	FERGUSON, CHARLOTTE (#439)
CTNSW	SD	18 MAR 15	New Path Youth and Family Svcs	MARTIN, KRISTI (#991)
DACSOT	DIS	10 FEB 09	Not Yet Referred	
DACSPT	DIS	24 OCT 08	Closing the Gap	WENZEL, BARBARA (#147)
DEVSUPFRS	DIS	05 OCT 10	Simcoe Community Services	GUNN, CHARITY (#166)
EDUPRIN	DIS	07 SEP 10	Simcoe Musk Cath School Brd	
EDUSERT	DIS	07 SEP 10	Simcoe Musk Cath School Brd	HILDEBRANDT, CHRISTINE (#730)
EDUTEACH	DIS	07 SEP 10	Simcoe Musk Cath School Brd	DOURIS, MRS (#729)
EISO-6	DIS	30 JAN 09	Simcoe Community Services	ABERNETHY, LINDA (#81)
NETSUPP	A	02 FEB 09	CTN Access	
NUT	DIS	01 OCT 09	Southlake Regional Health Ctr	PEARCE, FIONA (#160)
ORTHOPT	SD	11 FEB 11	Southlake Regional Health Ctr	CHISAMORE, KIM (#287)
OT	SD	07 APR 15	Closing the Gap	RIFE, LAURIE (#83)
OTA	DIS	27 JAN 12	Closing the Gap	KOWALYK, MELISSA (#832)
PT	SD	06 APR 15	Closing the Gap	WENZEL, BARBARA (#147)
PTA	SD	24 MAR 15	Closing the Gap	ELLIS, JOANNA (#1057)
REFERRAL	DIS	17 JAN 12	CTN Access	GRUCHY, NOLA (#1007)
SC	DIS	26 APR 12	Simcoe Community Services	DESORMEAUX, LEAH (#818)
SLP	DIS	02 APR 09	Simcoe Musk Cath School Brd	DAVIDSON, BARBARA (#128)

-
-
-
-
-

Client #: 901083

Name: JESSICA

Date of Birth:

Initial Plan for Assessments and Services

Finish Cancel

POC Print

Initial Child and Family Vision #1: Date 08 MAY 12

Jessica's verbal language will be understood by communication partners (increased

Initial Child and Family Vision #2: Date 08 MAY 12

Jessica will be able to attend to classroom activities and learning opportunities (attent

Initial Child and Family Vision #3: Date 08 MAY 12

Jessica will be able to stand without the use of equipment. (future vision walking)

Initial Child and Family Vision #4: Date 08 MAY 12

Jessica will become independent with self-feeding and dressing

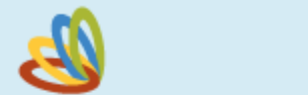
Initial Child and Family Vision #5: Date 08 MAY 12

Jessica will develop and demonstrate an awareness of her left hand

Service Coordination Summary:

April 2013 IPAS updated -

1. Initial Area of Concern or Identified



Site Map Filter Print

- Audit Browse / Report
- MYOR Audit
- MYOR File Security
- Merge CRI
- Community Care Plan
- Client Inquiry
- Client Inquiry**
- Workspaces
- CTN Privacy Statement
- My GoldCare Today
- ALL Agency Statistical I
- Agency Statistical Info
- CCAC KPI's
- CHA Statistics-Insight
- CTN-Agency
- CTN-Waiting
- MIS
- MIS Management
- Management
- Performance CP
- Service Coordination
- Service Navigation
- Service Provider
- Test INS Workspace
- Waiting Information

Consent for Sharing Information

Network Partner Consent	Additional Team Members	Limit
Date 17 JUL 14	Hospital for Sick Children	
Limitations	Dr Cellupica - paediatrician	
Name Theresa	Speak Freely - private SLP clinic	
Relationship mother	Dr Climpson-Kennedy - family physician	
Comments		

Child & Family Team

Program	Stage	Date	Organization	Service Provider
ACCSLP	DIS	30 APR 13	TSC	RAY, HEATHER (#100)
ACCSMAIN	OGC	09 FEB 11	TSC	HUNT, TRACY (#91)
CDA	SD	02 APR	SMCDSR	LEIBOVITCH ANNETTE (#44)

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Recent Assessments

Recent Notes

Date	System	Type	Status	Incomplete Section

Employee Contact Information

RAY, HEATHER (# 100)	
Home Phone	
Cell Phone	
Alternate Phone	
Fax	(705) 792-3832
Office Phone	(705) 725-1500
Business Email	heather.ray@speechclin



Child and Family Vision #4:

Date Vision Established: 08 MAY 12

Jessica will become independent with self-feeding and dressing

Goals

Goal 1

Jessica will feed herself taking small bites of food and using specific utensils.

Domain: Physical Functioning

Goal Lead (role): Family

Date Set: 12 MAY 12

Status: IP (in progress)

Comments:

Feb 2014 - spoon use is OK, Jessica is able to load her spoon independently - some days Jessica

Activities

Activity 1A

Mom to send small items of food to school with Jessica for her to bite into.

Activity Lead: School/O.T.

Date Set: 12 MAY 12

Status: IP (in progress)

Comments:

Jessica is managing well with biting into things.

Activity 1B

Provide opportunity for Jessica to open her lunchbag/backpack (velcro) at school. Provide opportunity for Jessica to use utensils. Managing

Activity Lead: School/O.T.

Date Set: 12 MAY 12

Status: IP (in progress)

Comments:

Feb 2014- OT to reader scoop dish

Notes for Client

Notes				
Program	Date	Type	Note Text	Note Wr
OT	★ 07 APR 15	OT	School visit-spent time working with Jessica and her E.A. on some weightbearing activities. See sum ...	Laurie H Rife - CTNLHR
PT	★ 06 APR 15	PT	March 30th, 2015. OTA/PTA Note. Aquatic Physiotherapy Session. Author assisted Physiotherapist with ...	Cameron Sutherland - CTN
CDA	02 APR 15	AAC	April 1/15 - School visit with Barb Davidson, SLP. See SLP notes for details about today's school v ...	Annette Leibovitch - CTNA
	02 APR 15	ADMIN	PT TREATMENT REPORT MARCH 31 2015 POSTED TO DOCUMENT MANAGER	Carolyn Ritchie - CTNCGR
	02 APR 15	ADMIN	OT SCHOOL VISIT REPORT MARCH 31 2015 POSTED TO DOCUMENT MANAGER	Carolyn Ritchie - CTNCGR
SLPAAC	01 APR 15	AAC	School visit. Notes in document manager. B. Davidson, SLP	Barbara Davidson - CTNBJ
	01 APR 15	ADMIN	PT REFERRAL TO PTA PROGRAM (UPDATE) FEBRUARY 18 2015 POSTED TO DOCUMENT MANAGER	Carolyn Ritchie - CTNCGR
PT	01 APR 15	PT	Mar 31st School PT Report and PT Program for PTA and EA's.on document manager. Joint visit with PTA ...	Barbara Wenzel - CTNBJW
OT	31 MAR 15	OT	School visit-followed up on discussions from last visit. School staff are feeling comfortable handl ...	Laurie H Rife - CTNLHR
	25 MAR 15	ADMIN	PT TREATMENT REPORT MARCH 24 2015 POSTED TO DOCUMENT MANAGER	Carolyn Ritchie - CTNCGR
OT	24 MAR 15	OT	School visit-transition back to school team visit with P.T., Barb Wenzel, Rehab Assistant, Joanna El ...	Laurie H Rife - CTNLHR
PTA	24 MAR 15	PT	Joint school visit with PT, Barb Wenzel and OT, Laurie Rife. See PT and OT notes dated 24 Mar 15 upl ...	Joanna Ellis - CTNJLE
PT	24 MAR 15	PT	Mar 24th School PT Report on document manager. Joint visit with OT Laurie Rife and PTA Joana Ellis. ...	Barbara Wenzel - CTNBJW
	24 MAR 15	ADMIN	PT TREATMENT REPORT MARCH 20 2015 POSTED TO DOCUMENT MANAGER	Carolyn Ritchie - CTNCGR
SPOC	23 MAR 15	SPOC	Data: SC and mother met with school team to prepare for Jessica's return to school tomorrow. To note ...	Lori N Brown - CTNLNB
OT	22 MAR 15	OT	Late entry for home visit on March 18/15. Reviewed O.T. program at Holland Bloorview. Discussed go ...	Laurie H Rife - CTNLHR
PT	21 MAR 15	PT	mar 20th Home PT Report on document manager along with PT Report from Traci Lee at HBKD and some Pr...	Barbara Wenzel - CTNBJW

SPOC Coordinator

- Leads the process ensuring that client and family's visions are the focus of assessments and interventions
- Updates Child and Adolescent Needs and Strengths (CANS), Consent to Share Information as appropriate
- Makes referrals for additional services should plan or status indicate
- Ensures that team members not authorized to access the shared record are still kept up to date and invited to participate
- Monitors the plan
- Ensures that the family feels supported
- Works with the family to address issues that come up
- Have various experiences and backgrounds including education, social work, and nursing
- Caseloads of 35 – 45 families per FTE

- **Partnering with Families and Youth**
 - Family-centred practices
 - Directed by client-family visions
 - Capacity-development/empowerment
 - Tailoring programs for development and culture
 - Emphasis on Life Needs
- **Integrated Teams/Teamwork**
 - Collaborative and facilitative practices
 - Information-sharing/shared decision-making
 - Inter-professional practice/shared care

SPOC Process - Key Elements

- **Progressive and Holistic assessment**
 - **Common understanding of needs & strengths**
 - **Dynamic cycle**
- **Integrated Plans**
 - **Individualized, continuous process**
 - **SMART goals**
 - **Assigned roles for team members**
- **Service Delivery**
 - **Services & supports promote functioning and participation**

What Have We Learned?

- SPOC Coordinator role serves both the family and the service providers on the team
- System needs to recognize the role
- Facilitation takes skill
- SPOC Coordinator needs to have a relationship with the family
- Team of SPOC Coordinators with different backgrounds works well – can support each other
- Not an adversarial role
- Need to make process and plan simple to complete
- Goal setting can be challenging i.e. developing SMART goals
- Planning is facilitated when all team members participate in the shared record
- Focus on visions critical to ensuring plan is family centred

Shared Electronic Client Record

The Shared Record supports the Single Plan of Care process:

- Facilitates team members communication: secure web application allows access from multiple sites by multiple providers.
- Follows the client through transitions from one system to another and from one provider to another.
- Tracks wait times, waiting lists, statistical information.
- Framework driven by ministry reporting requirements.
- Client information collected and stored in one place
- Supported by a network privacy agreement and a network consent to share information.
- Enables documentation of the plan in one place for all team members to view and update.

What Have We Learned?

- Implementation – incremental, identify ‘champions’ accept that some will always resist practice change
- A shared record supports inter-professional practice
- A shared record can help to drive standardization across service partners by utilizing common templates
- Move to a shared record takes time – frontline need to see value
- Buy-in increases as more staff participate
- Buy-in may increase demand on resources for training and help desk
- Data reporting is key – information out to partners supports system wide review and shared problem solving

Capacity Building

- Interprofessional practice is enhanced by opportunities to learn and practice together.
- CTN has taken lead in providing cross sector training events focused on enhancing the skills of all team members to work better together.
- Trainings to date have included :
 - SMART Goals (Specific, Measurable, Achievable, Realistic and Timely)
 - Inter-professional Practice Approach
 - Single Plan of Care Process
 - Solution Focused Coaching Approach
 - Use of Child and Adolescent Needs Assessment Tool (CANS)

Evidence

CTN is involved in many quality improvement and evaluation activities:

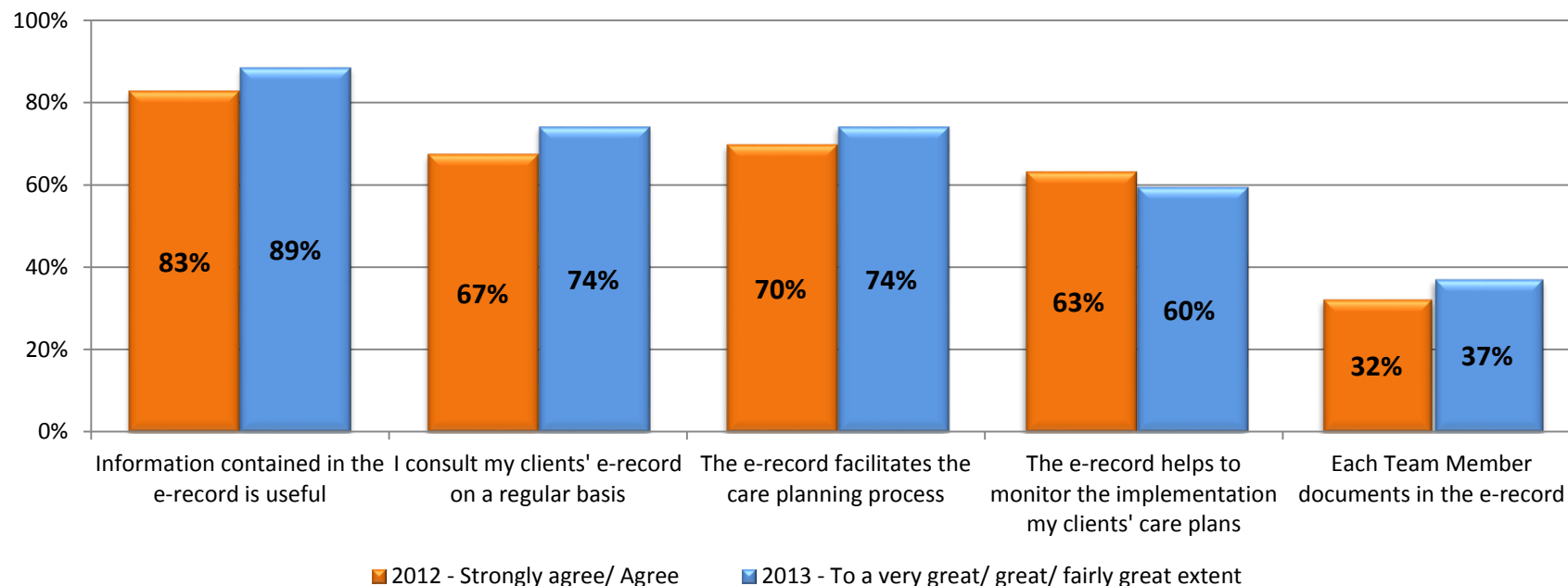
- Client Satisfaction – compares clients with and without a Single Plan of Care
- Provider Satisfaction – asks questions related to use of the shared record and questions related to the single plan of care process

Shared Electronic Client Record 2012-2013



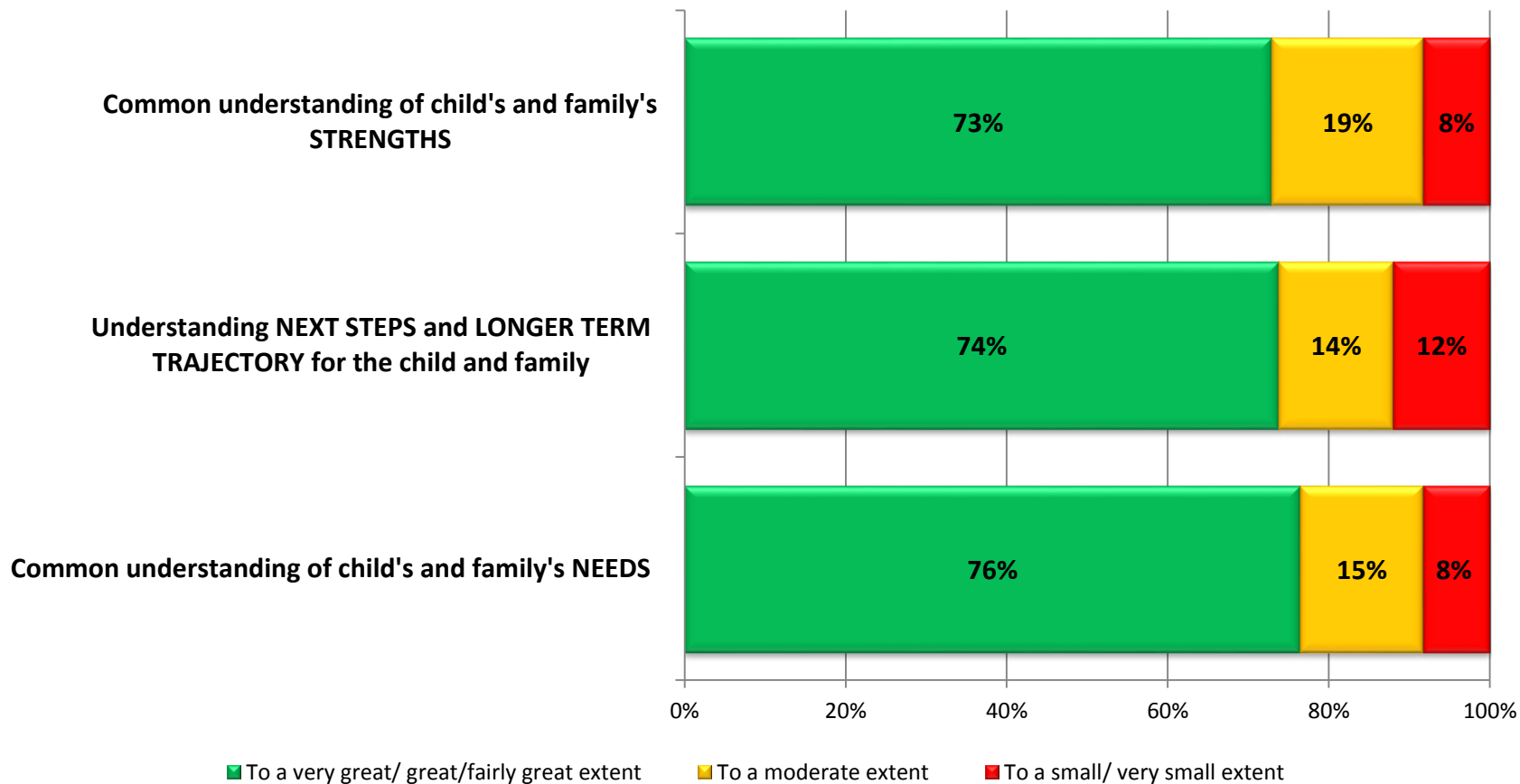
- Similar to providers' responses in 2012, majority (89%) feel that the information in shared record is useful
- 74% report consulting it on a regular basis and feel that using the record facilitates the care planning process. However, only 60% feel that the shared record helps to monitor the implementation of their clients' care plans.
- Issue of greatest concern is that not all team members document in the shared record.
- Although a different response scale was used for the 2012 SPOC provider survey, the patterns of responses was similar in 2013.

Shared e-record use - SPOC 2012 vs 2013



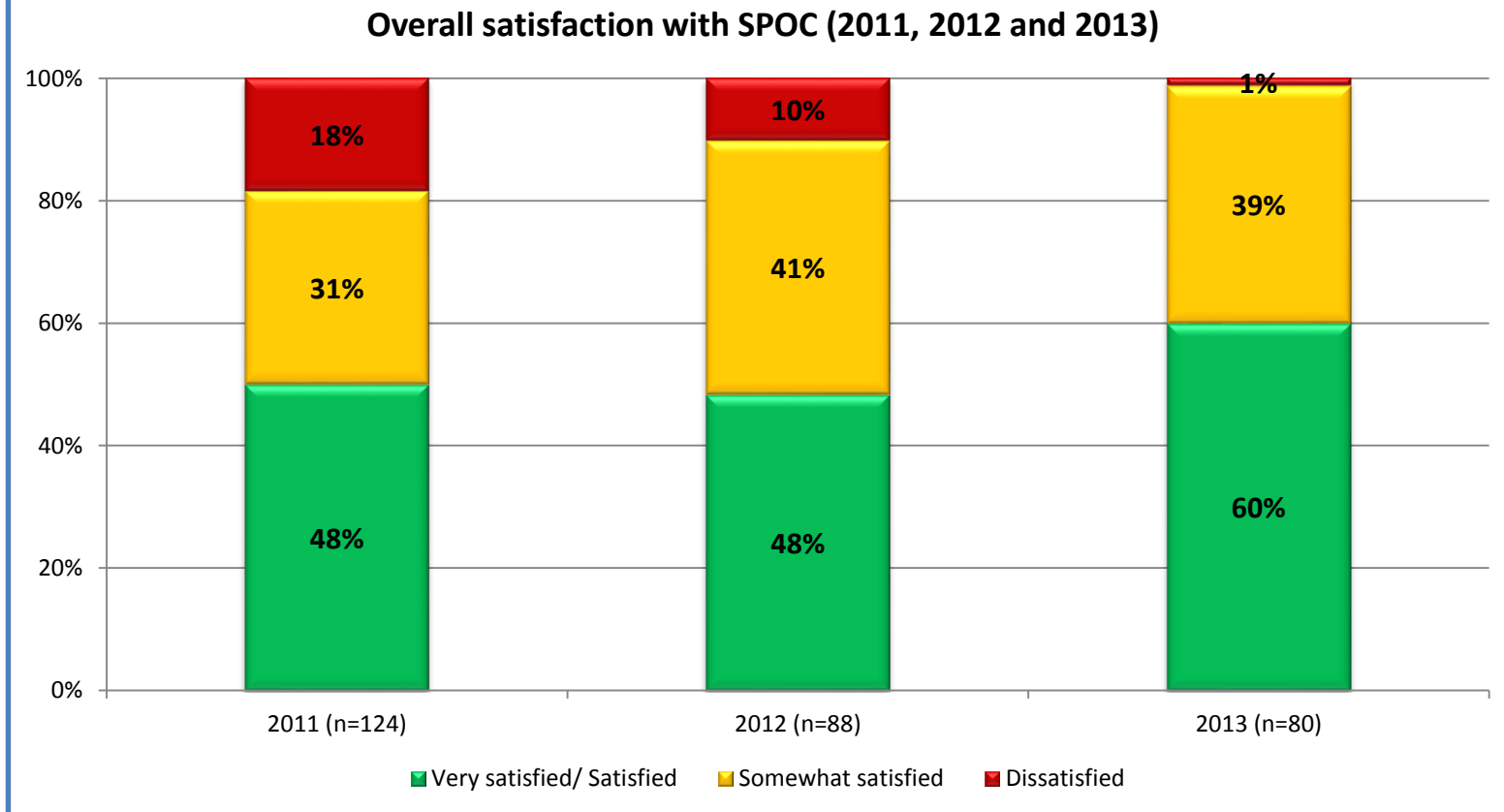
Impact of SPOC on Teams (2013)

SPOC helped Teams'....(n=87)



Provider Satisfaction with SPOC

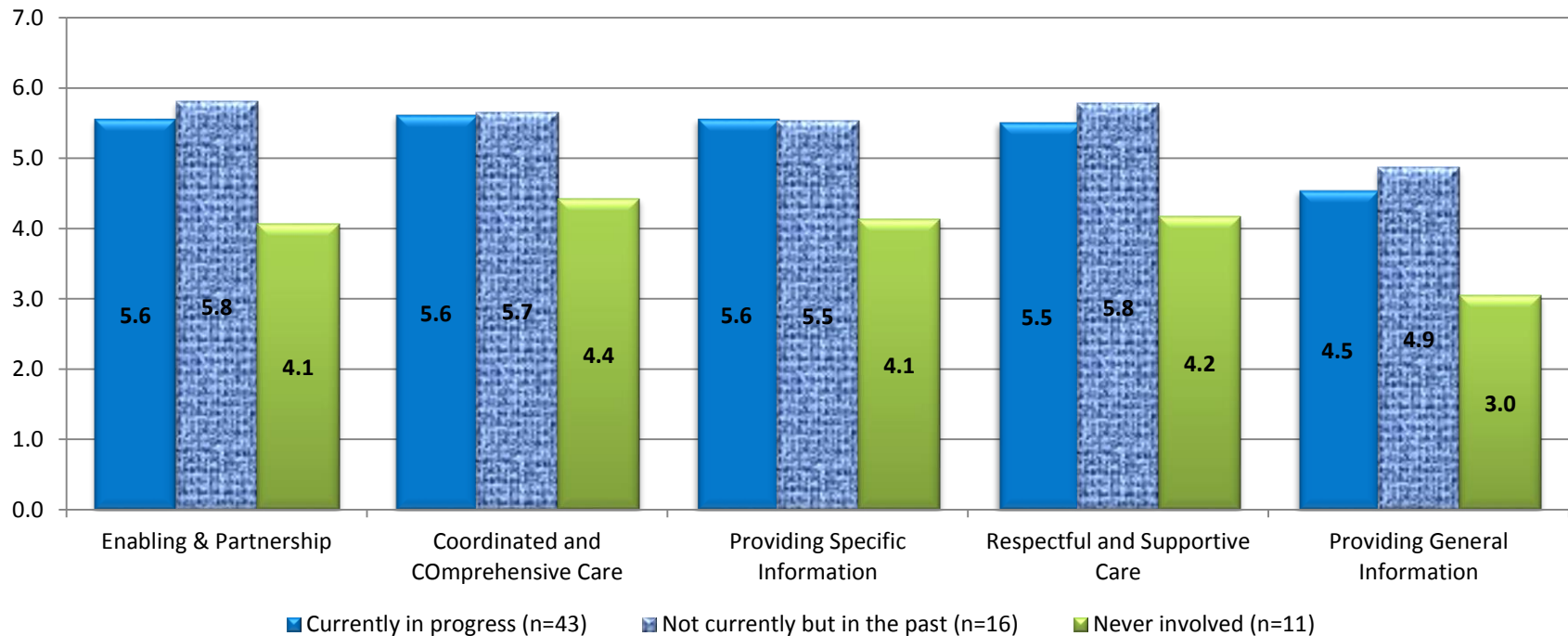
Compared to 2011 and 2012, more SPOC providers expressed being satisfied with SPOC in 2013.



Family Satisfaction

- In 2014, mean *Measures of Processes of Care (MPOC)* dimension scores remain higher in families who received SPOC coordination than those who did not. Scores were similar whether SPOC coordination was currently ongoing or had occurred in the past year or two.

CTN Family Feedback 2014 -
MPOC dimension scores: means \pm SD
With or without CTN Single Plan of Care (SPOC)



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