



CANADIAN HOME CARE ASSOCIATION

OUTCOMES REPORT

2022/23



Canadian
Home Care
Association

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CHCA CHIEF EXECUTIVE OFFICER (Ex-Officio)

NADINE HENNINGSSEN



Established in 1990, the Canadian Home Care Association (CHCA) is a recognized and respected resource for our members as we make connections and facilitate the sharing of new ideas and leading practices across the country. Members of the CHCA include representatives from government (federal, provincial and territorial), administration organizations, service providers, researchers, educators and others with an interest in home care. As a national association, the CHCA is a unifying force that amplifies our members' individual voices to influence policy directions on key professional and structural issues.

Governance and Accountability

The association is governed by elected members who represent provincial and territorial home care programs and direct service providers. The board's responsibilities include setting the association's strategic direction, approving annual operating plans and budgets, and overseeing national projects. The national office handles the operational functions of the association under the leadership of the Chief Executive Officer. Operational functions encompass government relations, policy and research, communications, member relations, and financial management. Annual financial statements are audited and reported by an external auditor, BDO Canada.

Current openings on the Board of Directors include an Ontario representative and a service provider representative, both of which will be filled in 2023.

Our Strategic Vision

Home care is an essential part of an integrated health system that provides seamless patient- and family-centred care and supports for older adults living with frailty; those with complex, chronic disabling conditions; and individuals at the end of life. The achievement of this vision would result in:



Patients accessing the health care and support services they need, when they need them, outside of the hospital.



Patient and health care team members working together and easily accessing and sharing relevant health information and care plans.



Recognition of carers as partners in care, who know where and how to access resources and support.



Individuals' health care wishes at the end of life being shared, understood, respected and acted upon.

Home care is an array of health and support services provided in the home, retirement communities, group homes and other community settings to people with acute, chronic, palliative or rehabilitative health care needs. Services may include assessments, education, therapeutic interventions (e.g., nursing and rehabilitation), personal assistance with daily living activities, help with instrumental activities of daily living and caregiver respite and support.

Strategic Aim

An integrated health and social care system that provides seamless patient- and family-centred care that is accessible, accountable, evidence-informed, and sustainable.



GUIDING PRINCIPLES

- Patient and Family-Centred Care
- Evidence-Informed Care
- Accessible Care
- Integrated Care
- Accountable Care
- Sustainable Care



AREAS OF INFLUENCE

ADVOCACY

Inform and influence policy and practice

AWARENESS

Promote the role and value of home care

LEADERSHIP

Stimulate conversations that create change

KNOWLEDGE

Facilitate innovation and knowledge mobilization



TARGET AUDIENCES

- Frontline service providers
- Patients and caregivers
- Administrators
- Policy planners
- Funders
- Researchers



ENABLERS

- Diverse and active membership
- Partnership and networking
- Expertise and knowledge

ADVOCACY

STRATEGIC GOAL:

Elevate home care to a foremost priority in federal government funding and policy decisions.



In 2017, governments committed to significant investments in home care, community care, mental health, and addiction services. The CHCA played a pivotal role in setting the priorities that informed the bilateral funding agreements with the federal government. By 2022, the agreements reached the midpoint of the 10-year agreement. Concurrently, the Canadian Institute for Health Information provided comprehensive national reporting on the mutually agreed-upon home care indicators stemming from the bilateral agreements.

Anticipating the next phase of the bilateral agreements, the CHCA initiated a national consultation, bringing together home and community care stakeholders along with government representatives. This endeavour aimed to assess the impact and outcomes of the first half of the bilateral agreements. The invaluable insights garnered from these dialogues are now fortifying the foundation of the CHCA's advocacy strategies. We are resolute in our mission to shape the concluding years of these agreements, championing the cause of excellence in home and community care with amplified federal backing.

The CHCA believes that bolstering transparency is essential and that federal funds should produce consistent, beneficial results. In pursuit of these objectives, we advocate for:

- An increase in federal funds specifically dedicated to home care, reflecting inflationary trends and the escalating demand for services.
- A directive from the federal government for jurisdictions to clearly segregate federal and provincial/territorial funding, reinforcing the established accountability mechanisms.

High quality home-based care lies in its meticulous tracking, comprehensive reporting, and enhanced adaptive strategies. In alignment with this, we propose:

- That the federal government invest additional resources to enhance the ability of jurisdictions to accurately track and communicate information regarding common indicators.
- An expansion of indicators in the coming years, integrating elements such as social care, workforce trends, and tangible health outcomes.

FEDERAL ADVOCACY

\$3.6 Billion of federal funds transferred to provinces and territories for home care (2017-22)

\$2.4 Billion of new federal funds committed to home care until 2026

6 national home care indicators featured in 2022 CIHI reporting:

1 in 11 patients had their **hospital stay extended until home care service or supports ready**

1 in 3 caregivers reported distress

10% of new **long-term care residents** potentially could have been cared for at home

1 in 10 Canadian report a one month **wait time for home care services**

1 in 10 reported that **home care services helped the recipient stay at home**

54.5% of Canadians are **dying at home or in community**



Visit the CHCA website for details on our advocacy work

AWARENESS

STRATEGIC GOAL:

Increase awareness of the human resource challenges and potential solutions.



Shaping Future Workplaces

Shaping Future Workplaces is a multi-year initiative undertaken by the CHCA to explore and introduce new ways for employers to support, empower, recognize, and invest in their employees. The goal of the initiative is to stimulate conversation, generate innovative ideas, and help shape the future of workplaces. To achieve this, specific national campaigns focusing on priority themes have been introduced throughout the project's duration.

Lessons from beyond home care

Enabling a bright future for technology

Michelle Demille
Senior Director of Transformation, ParaMed



2022-23 Campaign: The Technology Factor

This campaign focused on the technological evolution within the home care sector. "THE TECHNOLOGY FACTOR" stimulated dialogue about the potential of transformational technology to reshape home care through webinars, blogs, resources, and briefs.

The premise of the theme is that technology is rapidly changing work, and organizations must adapt to these changes to remain competitive and attract top talent. Framed through five technology megatrends, the discussions generated ideas on ways technology can influence how care is provided (work), how talent is nurtured (workforce), and how efficiency is achieved (workplace).

Engagement and dialogue was fostered in several ways:

- A dedicated microsite featuring links to the megatrend framework, key facts, blogs, and other resources.
- Blogs from thought leaders discussing topics ranging from the planning, use, and outcomes of technology.
- Catalyst Conversations on balancing tech with touch and lessons learned from digital transformations.
- Social Media (Twitter, LinkedIn) presence facilitated knowledge translation and awareness.

THE TECHNOLOGY FACTOR

12 thought leader blogs
on technology and home care

1,900 visitors
to the microsite with
72% accessing resources

206 participants
joined the Catalyst Conversations
for across Canada

25% of CHCA members
actively engagement in discussions

Resource-rich microsite page
engaged users for over 4 minutes per visit



The Shaping Future Workplaces initiative is featured on the CHCA website

LEADERSHIP

STRATEGIC GOAL:

Identify and share best practices to build operational excellence in home-based palliative care.



Project ECHO Hub: “Be Prepared: Palliative Care Emergencies in the Home”

Our 2022-23 ECHO Sessions featured the four most common emergency scenarios in home-based palliative care. This focus generated considerable attention and engagement from stakeholders nationwide, with attendance figures and evaluation metrics far exceeding expectations.

Each ECHO Session in the series focused on:

- Patients are at risk for this emergency, and how to identify them
- How to prepare patients and their families for the emergency; assessing family caregiver needs and the capacity/ability to provide the necessary care in an emergency.
- Management/care plan for the condition (caregiver role, healthcare provider role).
- Aftercare for the patient, caregiver(s), and healthcare provider (where appropriate; debrief, review, support).

The topics included:

Breathing (dyspnea): Dr. Christine Jones and Katarina Bvoc Berta explore techniques to anticipate and address dyspnea. They offer guidance on supporting patients and caregivers during breathing emergencies at home.

Balance (hypercalcemia): Dr. Jennifer Shapiro and Dr. Aamir Haq provide insights into hypercalcemia symptoms and assessments. They encourage discussions on treatment methods and how to assist patients and their caregivers.

Blockages (superior vena cava obstruction): Dr. Carmen Johnson delves into the indicators of superior vena cava obstruction. She shares strategies to assist patients and caregivers, tailoring interventions to individual care goals.

Bleeding (hemorrhage): Dr. Courtney Smith and Gayatre Maharaj discuss identifying patients prone to massive hemorrhages. They present home-based strategies to manage bleeding and support patients and their caregivers.

Participants in ECHO reinforce their learning through the online ECHO Hub, where they can access self-directed microlearning modules that reinforce key content from selected sessions, research papers, and on-demand videos of the learning session.

Be Prepared Home-Based Palliative Care ECHO HUB

4 ECHO Learning Sessions
featuring subject matter experts

422 active learners
participated in the “Be Prepared”
ECHO sessions

93.5% of learners
affirmed the value of the
“Be Prepared” ECHO sessions

328 participants
joined the ECHO Community Hub for
additional resources

189% year-over-year growth
remarkable growth in attendee numbers



Learn more about how the CHCA is advancing excellence in home-based palliative care on our website

KNOWLEDGE

STRATEGIC GOAL:

Enhance providers' skills and capabilities to empower and engage patients and their caregivers.



Partners in Restorative Care

From 2019 to 2022, the CHCA led the Partners in Restorative Care (PiRC) project, funded by Health Canada. This project, crucial for alleviating challenges such as patient overcrowding in acute care hospitals, was designed to enhance the capabilities of caregivers of patients receiving home-based restorative care. Restorative care, or reablement, employs a strength-based, person-centric method, facilitating early discharge from acute care settings for individuals who have experienced physical traumas like falls or strokes.

Central to PiRC was the introduction of Emotional Intelligence (EI) and its significance in patient and family-centered care. In collaboration with home care organizations in Saskatchewan, Ontario, Manitoba, and Newfoundland and Labrador, the CHCA co-developed the groundbreaking EI Learning Program. Its primary objective is to bolster healthcare providers' capacity to understand and manage emotions, thereby effectively engaging and empowering patients and caregivers. The program incorporated two key constructs:

- **The head-heart-hands lens:** A view of patients' and caregivers' experiences that encompass their knowledge (head), emotions (heart), and actions (hands).
- **Emotional Cycles of Change:** An understanding of the emotional transitions caregivers experience due to changing care situations.

Following its deployment through a CHCA SPRINT™ Implementation Collaborative with five home care organizations, feedback underscored the training's extensive utility for all home care personnel, from frontline workers to senior leaders. EI skills, universally applicable, act as a powerful tool for all healthcare providers, ensuring comprehensive, patient-centered care. As a result, the Emotional Intelligence Learning Program stands out as essential in cultivating the necessary clinical competencies for enhanced patient and caregiver experiences.



Training informed by
32 literature reviews
24 caregivers
83 professionals

8 EI modules
providing over 6 hours of training

10 Learning Aids
for practical EI application

49 home care leaders
enhanced their EI through
EQ-I 2.0 assessments

506 healthcare providers
from five organizations underwent
EI training

100% healthcare providers
saw EI as new and crucial to their roles



Visit our website to learn about the PiRC project
and how EI can empower caregivers and patients

The eiCOMPASS Project

Developing emotionally intuitive competency-based palliative care skills

Beginning in September 2022 the CHCA embarked on a transformative journey to enhance the capabilities of nurses and personal care workers, ensuring emotionally intuitive home-based palliative care. Supported by a three-year grant from Health Canada's Health Care Policy Contribution Program, the focus is to champion the Canadian Interdisciplinary Palliative Care Competency Framework while seamlessly integrating Emotional Intelligence (EI) training.

Key Project Milestones

Awareness: An intensive awareness drive was initiated, and by March 2023, consultations with 17 national palliative care experts were undertaken. Their insights began shaping the national campaign, emphasizing the Competency Framework's pivotal role in standardizing quality care, amplifying patient outcomes, and harmonizing with provincial standards.

Education: The CHCA has developed a blueprint for 23 emotional intelligence (EI) microtraining courses (12 for nurses and 11 for personal support workers). This foundation prioritizes EI in palliative care. Preliminary discussions with the Montreal Institute for Palliative Care have been set in motion, with plans to co-create six Conversation Guides to facilitate poignant dialogues about home-based palliative emergencies.

Implementation: Preliminary groundwork for the SPRINT Implementation Collaborative™ is underway with the May Call for Interest setting the stage for a launch in September 2023. As the year unfolds, these teams from various home care organizations nationwide will immerse themselves in both the Competency Framework and EI tools. The SPRINT methodology, characterized by its dynamic improvement cycles and expert-driven guidance, promises to be a cornerstone of our implementation phase.



PROJECT OUTCOMES

20 palliative care experts' testimonials on the value of the Competency Framework

12 Information Briefs on emotional intelligence and palliative care

23 EI microtraining courses
Engagement of 10 national partner organizations

12 home care organizations participating in the SPRINT Collaborative

600 healthcare providers trained in emotional intelligence