

## Section 7

Update on the implementation of  
recommendations from:

**Home and Community Care Services:  
Meeting Needs and Preparing for the Future**

October 2008

October 2009



# Response from the Ministry of Health Services

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October 9, 2009

798998

Ms. Norma Glendinning  
Assistant Auditor General  
8 Bastion Sq  
Victoria BC V8V 1X4

Dear Ms. Glendinning:

**Re: Follow-up review of the Auditor General's Report *Home and Community Care Services: Meeting Needs and Preparing for the Future***

On behalf of the Ministry of Health Services (the Ministry), I am pleased to provide an update on our progress in implementing the recommendations contained in the Auditor General's Report, *Home and Community Care Services: Meeting Needs and Preparing for the Future*.

The Ministry has moved forward on all of the recommendations contained in the Report, and are working across divisions and with health authorities to ensure that the Ministry continues to strengthen its effectiveness and accountability for home and community care services in British Columbia.

A completed recommendation status summary and listing of progress in implementing individual recommendations is enclosed. Thank you for the opportunity to provide this update.

Yours truly,

on behalf of

John Dyble  
Deputy Minister

Enclosures



**RECOMMENDATION STATUS SUMMARY**  
**Home and Community Care Services: Meeting Needs and Preparing for the Future**  
**As at July 31, 2009**

*(Please tick implementation status for each recommendation)*

Auditor General's Recommendations	Implementation Status				
	Fully	Substantially	Partially	Alternative Action	No Action
1. The Ministry of Health Services set a clear timeline for completing the process and update its vision and strategic direction for home and community care			✓		
2. The Ministry of Health Services set a clear timeline and update key policies for home and community care services			✓		
3. The Ministry of Health Services work with the health authorities to finalise comprehensive information system planning that identifies key priorities, timelines and expectations for replacement of the existing home and community care system.		✓			
4. The Ministry of Health Services improve the documentation of roles, responsibilities and processes for data quality		✓			
5. The Ministry of Health Services ensure the integration of planning both across sectors and with capital information and human resources planning.			✓		
6. The Ministry of Health Services diversify and expand its planning and analytical tools by: <ul style="list-style-type: none"> <li>• Developing capacity indicators for all home and community care programs and services (such as waitlist information, where appropriate);</li> <li>• Incorporating information on system costs and population needs into program planning and analysis; and</li> <li>• Developing a coordinated cycle of research and evaluation with the health authorities.</li> </ul>		✓			
7. The Ministry of Health Services : <ul style="list-style-type: none"> <li>• Develop performance measures that provide a more comprehensive</li> </ul>					

Auditor General's Recommendations	Implementation Status				
	Fully	Substantially	Partially	Alternative Action	No Action
<p>picture of how the home and community care system is performing and report publicly the critical few measures that best demonstrate that performance</p> <ul style="list-style-type: none"> <li>Require health authorities to report publicly both service plans and annual reports.</li> </ul>	✓				

**PROGRESS IN IMPLEMENTING RECOMMENDATIONS FROM**

**Home and Community Care Services: Meeting Needs and Preparing for the Future  
As at July 31, 2009**

**General comments**

*The Ministry of Health Services (the Ministry) has undertaken considerable work to move forward on all of the recommendations contained in the Auditor General's report. Many of these identify important work which is highly complex and integrated across sectors. Given the challenging nature of these initiatives, and the importance of ensuring alignment across sectors, full implementation of the recommendations may take several years to achieve.*

**Progress by recommendation**

Self-Assessed Status	Actions Taken Since Report Issued	Results of Actions and/or Actions Planned (with information on implementation, including dates)
<b>Recommendation 1: The Ministry of Health Services set a clear timeline for completing the process and update its vision and strategic direction for home and community care</b>		
P	A draft Strategic Directions document has been developed, and initial consultations held with stakeholders to inform final development of strategic priorities.	Initial input from stakeholders to be incorporated into final draft document by December 31, 2009
<b>Recommendation 2: The Ministry of Health Services set a clear timeline and update key policies for home and community care services</b>		
P	This work is in progress	Key policies for residential care services, self managed home support and financial management will be revised and implemented by January 1, 2010
<b>Recommendation 3: The Ministry of Health Services work with the health authorities to finalise comprehensive information system planning that identifies key priorities, timelines and expectations for replacement of the existing home and community care system.</b>		
S	Home and Community Care (HCC) Minimum Reporting Requirements (MRR) database development concluded by Ministry of Health Services	Database ready for health authority submissions
P/F	Interior Health Authority (IHA) has transitioned to HCC Minimum Reporting Requirements, and is in process of completing data quality	HCC MRR Database in production for IHA, as at August 2009. Data

Status

F or S – Recommendation has been fully or substantially implemented

P – Recommendation has been partially implemented

AA – Alternative action has been undertaken, general intent of alternative action will address OAG finding

NA – No substantial action has been taken to address this recommendation

Self-Assessed Status	Actions Taken Since Report Issued	Results of Actions and/or Actions Planned (with information on implementation, including dates)
P	reviews to bring full reporting current.	received for 2005/2006 to present
P	Vancouver Coastal Health Authority (VCHA) has implemented an HCC information system which is fully compliant with the requirements of the MRR, and is planning for submission to the Ministry	Submission of VCHA information as required by the Ministry requires resolution of concerns raised by the Office of the Information and Privacy Commissioner with regard to the Ministry's data requirements.
P	Vancouver Island Health Authority, Northern Health Authority and Fraser Health Authority are currently planning replacement information systems. Use of the Continuing Care Information Management System (CCIMS) will continue for related data	Health authorities report that replacement of CCIMS will be achieved by 2011/12.
P	Replacement of HCC Information System is incorporated in the Ministry of Health Services Health Sector Information Management/Information Technology (IM/IT) Strategy.	Ministry will continue to monitor and support health authority progress in transitioning to replacement information systems.
<b>Recommendation 4: The Ministry of Health Services improve the documentation of roles, responsibilities and processes for data quality</b>		
S	The Ministry has established an Information Management Committee to work collaboratively with health authorities on data management issues, and to provide an opportunity to proactively address issues of common concern. Resulting from this collaboration, the Minimum Reporting Requirements Specifications have been revised and issued to all health authorities.	This work will be ongoing as health authorities transition to new information systems.
<b>Recommendation 5: The Ministry of Health Services ensure the integration of planning both across sectors and with capital information and human resources planning.</b>		
P	The Ministry has adopted a new planning framework based on the balanced scorecard approach that considers the alignment of resource capacity (physical infrastructure, information systems, human resources) with sector priorities and desired health system outcomes.	The health system planning framework is currently in use by the Ministry. The framework and associated processes are being used to determine strategic priorities and initiatives in the next service planning cycle (2010/11 – 2012/13)

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Self-Assessed Status	Actions Taken Since Report Issued	Results of Actions and/or Actions Planned (with information on implementation, including dates)
<p><b>Recommendation 6: The Ministry of Health Services diversify and expand its planning and analytical tools by:</b></p> <ul style="list-style-type: none"> <li>• <b>Developing capacity indicators for all home and community care programs and services (such as waitlist information, where appropriate);</b></li> <li>• <b>Incorporating information on system costs and population needs into program planning and analysis; and</b></li> <li>• <b>Developing a coordinated cycle of research and evaluation with the health authorities.</b></li> </ul>	<p><b>Recommendation 6: The Ministry of Health Services diversify and expand its planning and analytical tools by:</b></p> <ul style="list-style-type: none"> <li>• <b>Developing capacity indicators for all home and community care programs and services (such as waitlist information, where appropriate);</b></li> <li>• <b>Incorporating information on system costs and population needs into program planning and analysis; and</b></li> <li>• <b>Developing a coordinated cycle of research and evaluation with the health authorities.</b></li> </ul>	<p>The model has been used to inform planning decisions for the next service planning cycle (for 2010/11 – 2012/13). It will continue to evolve and is expected to become a key analytical tool for health system planning.</p>
S	<p>The Ministry has developed a Health System Component Service Model that describes the entire health service delivery system at a population level or as a population health need segment. It identifies 28 health system service lines (the supply side) juxtaposed with everyone who is served (the demand side). This provides a shared conceptual model to enable collective thinking about population health and clinical delivery aspects of the health system (including service line costs, infrastructure, information technology and human resources).</p> <p>The model will enable comprehensive assessments of health system clinical performance structured around five key areas and linked with population, patient and health system goals. The five areas are:</p> <ul style="list-style-type: none"> <li>○ Funding</li> <li>○ Core Capacity (human resources, IM/IT, physical infrastructure)</li> <li>○ Processes</li> <li>○ Outputs</li> <li>○ Outcomes</li> </ul> <p>The Ministry is working with health authorities and academic research organizations to support a number of research initiatives.</p>	<p>This work will continue to be supported through the Home and Community Care Council.</p>

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Self-Assessed Status	Actions Taken Since Report Issued	Results of Actions and/or Actions Planned (with information on implementation, including dates)
<p><b>Recommendation 7: The Ministry of Health Services :</b></p> <ul style="list-style-type: none"> <li>Develop performance measures that provide a more comprehensive picture of how the home and community care system is performing and report publicly the critical few measures that best demonstrate that performance</li> <li>Require health authorities to report publicly both service plans and annual reports.</li> </ul>	<p><b>Recommendation 7: The Ministry of Health Services :</b></p> <ul style="list-style-type: none"> <li>The Ministry has developed a comprehensive performance measurement framework aligned with its Health System Component Service Model (see above). The model includes the services within the home and community care sector and initial identification of measures for capacity, accessibility, efficiency, effectiveness and safety have been researched and compiled. Further refinement and identification of the critical few measures across service lines (including home and community care) is underway.</li> <li>Health authorities posted service plans on their respective websites on September 1, 2009 in conjunction with the publication of Ministry and Crown Corporation service plans. The health authority plans are very similar in structure to those produced by ministries and Crown Corporations.</li> </ul>	<p>The performance measurement framework is being used to inform planning and the selection of key performance measures in the next service planning cycle (for 2010/11 – 2012/13).</p> <p>Health authorities will continue to produce service plans aligned with the Ministry and Crown Corporation service plans.</p>

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