

CASE MANAGEMENT CONNECTION

Spring 2011

**Newsletter of the
Canadian National
Case Management
Network**

a federally incorporated non-profit membership-based association dedicated to the advancement of excellence and professionalism among Case Management providers in Canada

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"I was very impressed with what I saw.... a wide range of resources both specific to case management as well as competency-based material."

Dianne Mathieu
Senior Manager
Organizational Development
Toronto Central CCAC

**COORDINATE
ADVOCATE
NAVIGATE**

Benchmarks of Case Management INGENUITY, CREATIVITY, TENACITY

An old African proverb once said it takes a village to raise a child, but it also takes a village to care for our elders says Elisabeth Antifeau, Community Care Practice Lead for Interior Health in British Columbia.

Antifeau has collected a trunk full of stories and memories over the past 17 years from working both as, and with many caring care managers from British Columbia's Interior. Her stories demonstrate the ingenuity, creativity, and tenacity required of the case management team, and a particular case comes to her mind.

In a remote area of the Kootenays live many elderly folks, mostly self sufficient, but one couple in their 80s with no immediate family were experiencing serious incontinence issues that were fast becoming dangerously unhealthy. With the mounting volume of bedding and personal items that required laundering, the lack of a washing machine or even a local laundromat was a setback. Sending home support workers on long laundry runs to Nelson was costly and time prohibitive.

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Independent Living Guide Receives NCMN Five Star Approval Rating



WHY?

We Care's Independent Living Guide offers exemplary information to help reduce risk of injury in and around the home. Room by room, it guides you through potential hazards and recommends simple changes to help enhance quality of life. This guide recently won a Leading Practice Award from Accreditation Canada. Available free of charge at www.wecare.ca

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(L-R) Dr Clifford Ottaway, Joan Park RN MHSc, Dr Norman Marcon, Dr Raymond Rupert, Dr Young-in Kim

DEVELOPING CASE MANAGEMENT BENEFITS GASTROENTEROLOGY

A presentation made to the University of Toronto Gastroenterology Research community by Joan Park, RN, MHSc, a fulltime Case Manager, Gastroenterology/ General Surgery at St. Michael's Hospital, and Dr Raymond Rupert, MD, MBA, and founder and medical director of Rupert Case Management Inc. generated interest in a Research Pilot to validate formula to measure patient complexity.

Park who is also President of the National Case Management Network of Canada, highlighted the benefits of Case Management for the gastroenterology patient population, while Dr. Rupert focused on harmonizing treatment plans and building expertise in managing complexity for patients. Dr. Rupert suggested there was a need to establish a centre of excellence for the management of clinical complexity in gastroenterology. Held in early February to a packed medical staff of 25 GI professionals, the

Toronto General Hospital, Toronto Western Hospital, and Sunnybrook Health Sciences Centre.

St. Michael's Hospital gastroenterologists, Dr. Clifford Ottaway, Dr. Young-in Kim, Dr. Jan Irvine and Dr. Gabor Kandel are moving forward with a complexity formula/model pilot.

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While mulling over the issue and seeking community options, the Case Manager approached the owner of the Blue Moon Inn, only to discover a children's daycare centre occupied the rented basement space below several days a week. The piece de resistance was a washer and dryer. She approached them to ask if a home support worker could use the laundry facilities on the alternate days and the problem was solved!

"This is a wonderful story of how ingenuity, tenacity, and creative thinking saved the day: community based solutions are the key. Rural communities are often viewed as disadvantaged due to lack of resources but living and working in small towns pushes us to think outside the box. Finding alternate solutions often happens *because* it's a small community. Small can be beautiful and caring," says Antifeau.

Another local lady with dementia who lived alone in a rural area was often found wandering the main highway which raised many safety concerns. "I chatted with her neighbours who then kept an eye on her, often inviting her over for a visit if she was heading out of the yard, or, if she made it to the highway, someone from the area

would usually recognize her, pick her up and take her home ensuring she had something to eat. It is the 'global' village caring for our elders: monitoring, watching, and supporting them," explained Antifeau.

Antifeau also spoke of another client with dementia whose favourite restaurant in Nelson was getting shortchanged because she would often forget to pay the bill. "I approached her son who lived away, who then set up an account with the restaurant owner so she never had to concern herself with it. In fact she delighted in hearing the owner say, 'don't worry, it's all taken care of', which supported her independence to enjoy a meal in a familiar setting without social embarrassment".



Elisabeth Antifeau, Practice Lead for Community Care, Interior Health, British Columbia

Do you have your copy of
**The Canadian Standards of Practice
for Case Management?**

The purpose of the Canadian Standards of Practice for Case Management is to establish a level of excellence and point of reference against which individuals can be compared and evaluated. A hard copy is FREE with membership, and readable versions are available online. Purchase at www.ncmn.ca



In another mental-health related case, a new client was very distrustful of strangers and wouldn't allow Antifeau access into her house, hiding behind a locked screen door. When neighbours mentioned the lady frequented a local coffee shop, Antifeau enjoyed a cup elbow-to-elbow with her over a few days, engaging her in friendly conversation in this public space. When she re-approached her at home the next week, the client recognized her and welcomed her into her home. Future visits went smoothly.

A wise woman once said that if you bungle raising your children, whatever else you do matters very little. When it comes to caring for our elders, Antifeau subscribes to the same creed.*

WHAT'S NEXT FOR NCMN?

A prime NCMN working objective is to confirm a framework for development of core competencies required for the practice of Case Management across the nation, and across sectors. At the September 2010 NCMN conference, members discussed several options for a framework.

NCMN has been working hard under the leadership of Board Member Shannon Berg to establish and finalize a competency framework. A competency work group met in February and March with 11 NCMN members taking part. By the end of March 2011, NCMN expects to have a framework that will guide us through further competency development.

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