Making the Case for Integration/Mergers – Continuum of Care, Strengthening the Back Office and Creating Economies of Scale: The Reconnect Experience

A presentation by Mohamed Badsha, CEO
Reconnect Community Health Services

CMHO Governance Workshop

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Reconnect Community Health Services is a Toronto based organization that provides mental health, addictions and community support services to individuals 15 years of age and older.

Reconnect Community Health Services offers a wide range of programs, treatment, support and help to individuals 15 years of age and older. Our services include Adult Day Services, Case Management, Home Help and Personal Care, Meals on Wheels, Therapeutic Falls Prevention, Mental Health Multidisciplinary Teams, Addictions Case Management, Crisis Outreach and Crisis Beds.
“I don’t care how you organize my health care or about the rules – I just want care when I need it, where I can get to it, and to feel confident that it is going to make me better.”

- Toronto Central LHIN resident
# Recommendations for Toronto Central LHIN

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<th>Create a Culture of Integration and Change</th>
<th>▪ Changing the way we think and talk about integration</th>
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<td>Drive Effective System Performance</td>
<td>▪ Working with each other to deliver a health care system that is responsive to local needs, creating better outcomes and experiences</td>
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<td>Build Capacity and Success for Health Service Providers</td>
<td>▪ Supporting HSPs to use integration to improve viability and sustainability of programs and services of the LHIN</td>
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<td>Sustain and Build on the Successes of Voluntary Integrations</td>
<td>▪ Sharing knowledge, information and tools to promote voluntary integrations</td>
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What We Heard: Integration Should be Discussed Openly

- Integration can elicit anxiety and fear due to uncertainty:
  - Program and organizational impact
  - Staff layoffs
  - Maintaining a unique identity
  - Relinquishing control

- A shift is needed in how we talk about integration, through:
  - Thoughtful and consultative processes
  - Well-founded rationale and evidence
  - Defining success
  - Open communication

“What is the hidden agenda here? We need to be transparent when we talk about our intentions with integration.”
(Interviewee in Toronto Central LHIN)

Clients, patients and HSPs want the LHIN to talk openly about integration
The Toronto Central LHIN should drive system change that will have a measureable positive impact on the health of the population in Toronto Central LHIN and beyond, by:

- Identifying and encouraging voluntary integrations; and,
- If needed, facilitating and supporting integrations.
The Toronto Central LHIN should facilitate inter-HSP conversations at the HSP governance level, to:

- Talk about the benefits and realities of integration; and,
- To create Toronto Central LHIN-wide momentum for Voluntary Integration strategies.

Board Directors will be able to identify and push strategic opportunities.
The LHINs’ Integration Imperative

“LHINs were formed to integrate health systems as a means of improving the health of Ontarians” – South East LHIN

Most integrations have been voluntary, so far.

LHIN Boards support voluntary integrations that:

- Improve or, at a minimum, produce the same quality and accessibility of care.
- Are consistent with LHIN’s and Ministry’s directions.
- Are cost-effective.

LHINs have the legislated power to facilitate, compel (through funding decisions), or require providers to integrate.

Only the Ministry the can force an amalgamation or merger.
The LHINs’ Integration Imperative

Integration is a means not an end.
The LHINs’ Integration Imperative

Continuum for LHIN involvement – TC LHIN

Independent Voluntary
LHIN-supported, Voluntary
LHIN-initiated, Facilitated
Required by LHIN/MOH

Degree of LHIN Involvement
South East LHIN

Amalgamated 7 MHA agencies into 3 agencies/regional areas to reduce duplication, increase services, improve access and transitions.

Began in 2013

• One Regional Back Office
• Centralized intake and wait list plan for agencies
• Ongoing community and client engagement

MH LHIN

Created Regional Meals on Wheels Program “through a social determinants and population health approach.”

Lead agency selected through RFP
One Destination, Many Roads

Champlain LHIN

“Therefore, in the coming three years, we will be focussing more on integrating community and home care services, because that is a big area of concern for our community. People are fed up with being shopped around, and they want somebody to put the pieces together and make their lives - which feel like separate puzzle pieces - into a whole that makes sense.

Chantale LeClerc, CEO, Champlain LHIN, Strategic Plan 2015-2019

2 Required, 6 Facilitated and numerous voluntary integrations since 2008.
Toronto Central LHIN

5 Areas of Focus

Critical components of Integrated Community Care:

1. Simplified and Coordinated Access to Home and Community-Based Services
2. Improving Capacity and Client Flow
3. Easy Navigation and Care Coordination
4. Common Service Standards
5. Common Assessment and Referral Tools
Reconnect Community Health Services (Reconnect) and St Clair West Services for Seniors (SCWSS) are both non-profit community health agencies that came together in 2016 to undertake a voluntary integration of their services and operations under a single corporation. The integration was a transfer of SCWSS’ assets to Reconnect with the intent to build on and extend each organization’s strengths, assets, programs, partnerships and presence with clients and in the communities they serve.
Reconnect Community Health Services
Integration Journey

Combined the agencies have approximately 260 staff (each agency had about 130 staff each). Most staff are unionized with funding coming primarily from the Toronto Central LHIN, with additional from the City of Toronto and United Way.
St. Clair West Services for Seniors is a non-profit, charitable organization, which provides innovative, and caring support services to older adults and/or adults with disabilities who wish to maintain their quality of life while living in their homes. SCWSS provides a range of services tailored to each client’s needs including Adult Day Services, Case Management, Community Programs, Home Help and Personal Care, Meals on Wheels, Older Adult Centre, Respite Care, Supportive Housing, Therapeutic Falls Prevention and Exercise, and Transportation.
Impact of the Integration on the Population of the LHIN and Any Specific Sub-Populations:

• The integration will improve the patient journey of the sub-populations currently served by Reconnect and SCWSS: individuals aged 16 years and older with complex mental health and addiction needs and seniors with multiple and complex health issues and disabilities.

• Through a single referral, clients from these sub-populations will be able to receive a more comprehensive and customized program developed from a greater diversity of programs and services. The existing overlap in the populations served by our organizations and the complementary programs and services will further enable integrated service delivery.
Impact of the Integration on Other HSPs or Organizations Providing Services in the LHIN:

• This integration presents a new way of working together to deliver seamless, integrated care for clients and patients across our local health system who have multiple, interrelated health care needs.

• This integration is innovative and represents a patient/client rather than provider or “sector” focused approach because it brings together different community health sectors to coordinate services across the TC LHIN.

• It promotes a culture of planning for large-scale system change that will positively impact clients/patients rather than planning at the individual service provider level.
Impact of the Integration on Government and Organizations that Provide Funding to HSPs:

- The proposed integration of Reconnect and SCWSS supports the advancement of the TC LHIN’s strategic goals and priorities.

- System planners, funders and provider organizations can leverage the enhanced capacity, infrastructure and the knowledge base from the integrated organization. Integrating our “back office” systems will make us more efficient. Having a single infrastructure rather than two will reduce costs and duplication, putting us in a stronger financial position going forward.
The Reconnect-SCWSS: The Journey So Far

Spectrum of Integration Activity

Degree of Integration

- Linkage (ad hoc)
  - Limited or informal connections, network
  - One time/ad hoc working arrangement

- Coordination
  - Ongoing formal partnership/coordination agreements within a system
  - Program/service level
  - No structural changes

- Structured Collaboration
  - Ongoing formal collaboration agreements within a system
  - Standardization along care pathway, shared services

- Program/Service Transfer
  - Formal transfer, merge or amalgamation of program services
  - May include back office services/functions as well as clinical

Full Integration
  - Creation of single system of care

Additional Considerations for Integration

FOCI
- Entire Community
- Vulnerable
- Complex

TYPES
- Functional
- Organizational
- Professional
- Service/clinical
- Normative

LEVELS
- Funding
- Administrative
- Organizational
- Service Delivery
- Clinical

BREADTH
- Horizontal
- Vertical
The Reconnect-SCWSS: The Journey So Far

Exploration → Feasibility Assessment → Planning and Implementation → Post-merger harmonization, culture

We are here.
The Reconnect-SCWSS: The Journey So Far

Key Facts:

• **Primary Goal:** Create a ground-breaking comprehensive care model for seniors with physical, mental health and social care needs.

• **Innovative:** Break down traditional siloes between community support services (CSS) and community mental health and addictions (CMHA).

• Merger through asset transfer.
Reconnect-SCWSS: The Journey So Far

- Assessed Partnership
- Steering committee
- Third-party support
- Board motions
- Joint committee of Boards
- Working groups
- Engagement
- Due diligence
- Business case
- LHIN Board
- Asset transfer
- Post-merger harmonization, culture
- START
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Techniques and Tools

- **Separate joint groups** co-chaired by CEO and ED.
  - Steering Committee leading integration planning; membership of each agency’s management team, and third-party experts.
  - Operational IT and HR working groups - management from both agencies.

- **Third-party experts** led critical pieces: project management, legal, labour relations, and community engagement, financial due diligence. Shared all support except for legal.

- Comprehensive community and stakeholder engagement.

- Integrated communications.

- Board sub-committees for each organization.

- **Special Joint Committee of the Boards** provided oversight.

- LHIN assistance key.
The Reconnect-SCWSS: The Journey So Far

Why we chose each other ……

• Similar geographies.
• Gaps in west end for seniors CSS and CMHA.
• Need for greater critical mass and capacity to meet strategic goals:
  • Improving transitions and access to comprehensive care.
  • Real-time, quality data.
  • Play system leadership roles around population health.
• Complementary services.
• Partnership experience – e.g., Health Links, SCWSS outsourced IT to Reconnect

• ….. **Most important factor: Relationships.**
• ED and CEO able to have a non-threatening and credible conversation about what was needed from a client perspective
Insights for HSP Leaders

Critical Factors:

• Guided by a clear service delivery model.

• Board and ED/CEO commitment.

• Willingness to change key.
  • Change is often most difficult for management staff.
What We Learned

Also...

• **Cultural differences are not insurmountable.**

• **Prepare for and acknowledge feelings of loss.**

• **Boards’ and EDs’/CEOs’ roles** – No right answer.
  • Clarify expectations and roles early on.
  • Governance style influences pace and path to decision-making.

• **Branding** – No one way to approach.
Insights for HSP Leaders

• If you take away nothing else.....

• Planning and approval is just the beginning.
  • Post-integration can be most challenging part.

• Allow 40-45% for organic change.

• Allow room for calculated risk.

• Non-negotiables can become negotiables.

• Pay attention to what staff and clients do and say..... but don’t rush to judgment based on “word on street.”
Concluding Thoughts

Merger debate is overly polarized.

Our view

• Mergers are one option and often the best course to achieve system-level impact.

• Advantages: Economies of scale and capacity to meet changing community needs, improve population health, and operate credibly at a systems level.
Why Integrate?

Program and service integration should be an option when one or more of the following are possible:

- Improved client/patient outcomes and experiences;
- Strengthened transitions along the continuum of care and smoother care pathways;
- Improved access to care;
- Improved sustainability and program/service stability;
- Improved “value for money;” and,
- Improved health of the community overall, including factors beyond health, such as social services or education.

Adapted from: (Dennis Kodner, 2009)
Reconnect Community Health Services

1281 St. Clair Ave West
Toronto, Ontario M6E 1B8

Main Line: 416-248-2050
Main Fax: 416-248-6557
Community Services: 416-787-2114
Community Services Fax: 416-787-8552

Email: contact@reconnect.on.ca
www.reconnect.on.ca