Approaches to Accountability: Home and Community Care in Ontario

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Sub-study

- Home and Community Care

- Partners:
  - Leads: Janet Lum (Ryerson); Paul Williams & Raisa Deber (U of T)
  - Decision making partners: Anne Wojtak (TC CCAC), Nadine Henningsen (Canadian Home Care Association), Judith Shamian (Victorian Order of Nurses), Susan Thorning (Ontario Community Support Association)
Home and Community Care in Ontario: Overview

Home and Community Care delivered by:

- 14 Community Care Access Centres (CCACs): linked to 14 LHINs; publicly funded
- Community Support Agencies (CSAs): both FP and NFP; user fees, or purchased privately
CCAC’s have two roles

**Purchasers**
- Professional Services
  - Nursing
  - PT, OT, SLP
  - Social work
  - Dietetics
- Non-professional services
  - Personal support
  - Home making
- Medical supplies

**Connectors**
- Long-Term Care Options
  - Retirement homes
  - LTC homes
- Community Services
  - Meals-on-wheels
  - Transportation
  - Caregiver relief
  - Adult Day Programs
Methods

- Accountability for home care services purchased by CCACs
  - Case Study: Toronto Central CCAC
- Literature Review
- Document Analysis
  - Publicly available contract and RFP documents
  - Qualitative analysis: NVivo 7
- Colleagues from TC CCAC
## Production Characteristics: Home Care

<table>
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<tr>
<th>Measureability</th>
<th>Mixed – patient satisfaction (high); quality (potentially low). BUT - High transaction costs! &amp; Low observability</th>
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<tr>
<td>Contestability</td>
<td>High – fewer barriers to entry BUT – may be lower in rural settings</td>
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<td>Complexity</td>
<td>Low – many services can be cut off from other streams of health care</td>
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Governance - financing, delivery, public-private

- CCACs are funded by the MOHLTC
  - Services provided by CCAC are covered
- Home care purchased through competitive process (RFPs)
  - Service providers may be FP or NFP
  - Currently the TC CCAC holds contracts with 27 providers. 19 – FP (mostly FP/c) & 8 – NFP.

RFP process also has HIGH transaction costs for service providers & Ministry
Accountability Arrangements

- LHINs
- CCACs
- Service Providers
- Accountability Agreements
- Contracts & RFP process
CCAC/Service Provider
Contracts

Contracts include:

- Reporting requirements
- Performance monitoring (services and financial)
- Professionalism – practice guidelines & applicable legislation
Goals: Contracts

- Access
  - Performance standards identified by CCAC
  - # of referrals and services accepted (quarterly),
    # of assigned service personnel/client

- Cost
  - Strong financial reporting requirements (audited financial statements, quarterly volume statements)
  - Key component to winning contracts
  - Protects CCAC against financial liabilities
Goals: Contracts

- Quality: Service Providers must
  - Identify and report: 10 performance indicators & 5 HR indicators.
  - Conduct and report performance evaluations
  - Adhere to professional standards and regulations
  - Demonstrate performance through past experience
  - Administer and report client satisfaction surveys

- High Transaction Costs!
Observations

- Making use of contracts are accompanied by trade-offs
  - High Specificity at the cost of Resources i.e. High Transaction Costs
  - Measureable indicators at the cost of Quality Indicators?
    - Are we picking up what we need?
Observations

Another concern

- Using a low-trust tool (contract) under conditions of low-observability.
  - Lipsky* - Street-level bureaucracy

Future Research

- Case study
  - Compare CCACs
  - Conduct interviews with key stakeholders

- Need to include in the analysis:
  - Key stakeholders/policy communities – accountability webs*
  - Political culture

Goals: TC CCAC

- TC CCAC four strategic goals:
  - Excellent service
  - Leading integration
  - Promoting learning, inspiring innovation
  - Contribute to a strong community and building trust

- Emphasis on Quality and Accountability
- Shifting accountability

MOHLTC → Clients