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**THEME: Realizing Benefits Beyond Institutions**

**Children's Treatment Network: Leveraging an Electronic Client Record to Provide Integrated Care for Children and Youth with Multiple Needs**

**Abstract**

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**Abstract**

Children's Treatment Network of Simcoe York (CTN) is an innovative model for delivering integrated clinical, rehabilitation and support services for children and youth with multiple needs and their families. Rather than creating a traditional 'brick and mortar' agency similar to the 20 Children's Treatment Centres (CTCs) in Ontario, healthcare, education and community services stakeholders across York Region and Simcoe County developed a coordinated approach for service delivery across 10 widely dispersed geographical teams. Leveraging existing services, and fostering collaboration between 40 plus partners, the Network facilitates a 'virtual' Children's Treatment Centre. CTN's electronic client record (ECR) is pivotal to this integrated system approach. The ECR enables CTN to provide 'single point of access' to service navigation, service coordination and the generation of a cross-disciplinary Single Plan of Care, focusing service on shared Child and Family Team goals. A single information repository provides a holistic and family-centred approach. Common assessment and evaluation tools reduce duplication. Development of an individualized Single Plan of Care facilitates coordinated, efficient service delivery aligned with family goals. The reporting capabilities built into the software deliver comprehensive data informing system wide planning and resource utilization. The next stage of ECR development includes common assessment tools, workload measurement modules, and wait list management tools. A research study evaluating the effectiveness of this integrated model is underway.

**Introduction**

Simcoe County and York Region have a combined population of 1.32 million people and cover an area of 6,600 square kilometers. This large geographical area, sitting partly in the Greater Toronto Area, and extending up through central Ontario, did not have funding for children's treatment services as did areas covered by the 20 Children's Treatment Centres in Ontario.

Over a significant period, a broad range of stakeholders – families, providers, both leaders and front line, and planning groups worked collaboratively to develop an implementation plan for a children's integrated rehabilitation service system for Simcoe York. The funding and the opportunity to

implement this unique model were approved by the Ministry of Children and Youth Services in December 2004; the Children's Treatment Network of Simcoe York started to take shape in 2005, with a mission to enhance and expand the range of local services, and enable integrated care. The implementation planning and development of the Network, and how the Network partners would integrate their work, was powered by the strength of the early, inclusive stakeholder visioning.

Partners clearly heard from families that the new system approach had to address that: 1) They had to tell their story MANY times, 2) They had to travel long distances to access services, and 3) They were responsible for maintaining the records of care, and frequently had to carry boxes of assessments, reports and records from multiple agencies. Some computer literate families even compiled their own compact discs (CDs) of assessments and reports to share with various providers.

From the beginning, there was a broad understanding that the electronic client record - still considered innovative outside of the health care sector, would have to be much more than an electronic health record. It would be required to support the work of many professionals across several disciplines, agencies and sectors, and support the process of not only depositing information, but facilitating an integrated approach to the development of a multi-domain, comprehensive single plan of care for children with multiple needs and their families.

Given the strength-based, capacity-building approach of the Network, the search started within the Network, and lead to a Reference group of CTN partners, which developed a Request for Proposal (RFP). Via the RFP evaluation, GoldCare, a division of Campana Systems Inc., was chosen to assist CTN in the development of the electronic client record. Out of this collaboration, a tailored configuration of GoldCare's Case Management modules- currently used in the Community Care sector, was developed. This entire process was assisted by Healthtech Inc, and the association continues as the Network adds functionality to the ECR in successive phases.

CTN's ECR, named [singleplanofcare.com](http://singleplanofcare.com) is both a service provider hosted desktop and web-based application. It is a common, secure repository of client information. It contains a framework for integrated assessment, planning and service delivery of a Single Plan of Care for children and youth with multiple needs. The ECR supports the dynamic nature of care and service whether the client requires continuous service from early intervention through to age nineteen as well as a continuous connection with intermittent service as needed by the child or youth.

[Singleplanofcare.com](http://Singleplanofcare.com) is open and accessible to all members of the Child and Family Team. It contains templates for assessment, Single Plan of Care development, referral notes, progress notes and a roster of the current team providing care and service. The software accommodates the inclusion of documents in a searchable format and has embedded security features to encrypt documents as needed. A progressive consent and security framework enable access and restriction by user, client and time period.

Use of the ECR, [singleplanofcare.com](http://singleplanofcare.com), facilitates integrated working, enabling team members to easily share client information and to view other team members' assessments and documentation. This leads to the development of a truly customized and multidisciplinary single plan of care based on goals determined by the child, family and the team and provides system wide information for planning and management at both partner and network levels.

Network growth and development is not linear; it is organic. Just as a community expands, adopts standards and incorporate common values and mores, cooperation and collaboration among the greater than 40 partner agencies is steadily increasing. Strong yet flexible network governance and stewardship frameworks are integral to building network trust, shared focus on outcomes and accountability.

The privacy and security of client information is addressed by Network policies and a robust security framework, frequent comprehensive record auditing and education of service providers and families. A Privacy Impact Assessment has been submitted to Information and Privacy Commission of Ontario and results are pending.

Establishing connectivity between 40 partners with disparate, legacy or paper-based information systems is pivotal to the success of the network. Smart Systems for Health (SSHA) installations and connections between partners is progressing. CTN is exploring modalities to provide internet access in remote locations.

Education and training of the staff of all partners is a huge undertaking. It is compounded by the necessity of simultaneous education and training on a new care model, software development and network evolution. Education and training sessions are provided in a variety of modes, face to face small and large group settings, web accessible videos, 'mini-help' lessons embedded in the software. Communiqués to staff, partners, families and the community are regularly issued, time targeted with consistent patterns and channels. They are integral to communicating and managing the change regarding how network partners are working differently together.

Groundwork for evaluation of the Network's innovative approach was laid early. A Research project was designed by Dr. Gina Browne, Director of the Systems-Linked Research Unit, Health Sciences, McMaster University, in collaboration with Dr. Peter Rosenbaum, CanChild Centre for Childhood Disabilities, and Network partners.

The project, entitled "The Comparative Effect and Expense of More and Less Integration of Services that Provide Treatment and Rehabilitation for Children with Multiple Disabilities: A Randomized Controlled Trial", will evaluate outcomes from three perspectives: 1) Children and Families, 2) Network Effectiveness and 3) Economics.

The next steps in CTN development are related to increasing integration of care and adoption of the single plan of care model. Performance monitoring, capacity and wait list management initiatives are being rolled out for the use of all partners for both mandatory provincial governmental reporting as well as for planning and decision support at the entire network level and from an individual partner agency perspective.

The evolution of the ECR functionality for consultative assessment and referral tools and mechanisms will enhance throughput and support integrated working among the Child and Family Team, to provide the most appropriate service and care at the most appropriate time. As the network matures, as the single plan of care model becomes standard practice and as users become proficient with the ECR, CTN will continue to refine and enhance the software based on user feedback.

Families no longer have to carry their boxes of records, pack their CDs of information and only need to 'tell their story' one single time. For more information about the Children's Treatment Network of Simcoe York, please visit us at [www.ctn-simcoeyork.ca](http://www.ctn-simcoeyork.ca).

## **ABOUT THE AUTHORS**

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Long associated with the planning, collaboration and delivery of services for children, youth and families in Simcoe County and York Region, Sandy is the Director of Network Development, Evaluation and Planning at Children's Treatment Network of Simcoe York (CTN).

### **Catherine Renwick, RN**

A senior consultant with Healthtech Inc. an Information Management/ Information Technology consulting firm focusing exclusively on the healthcare market, Catherine has taken her broad clinical nursing experience through the Supply Chain and Logistics arena and reinvested it in healthcare project management. Experienced in workflow analysis and clinical applications, Catherine is the co-lead for Children Treatment Network's development and implementation of clinical processes and an electronic client record for children and youth with multiple needs.