Halton-Peel
District Health Council
Conseil régional de santé

Annual Report

1999/2000

HIGHLIGHTS

www.hpdhc.com

Building and Maintaining Effective Partnerships

- Supported and participated in the on-going growth and development of the **Children's Leadership Council of Halton**, a multi-stakeholder group of human service professionals and advocates working together to promote the need for accessible and integrated services for children.
- Facilitated the **establishment of the Health Care Leaders Forum**. The forum is composed of the CEOs of each of the 5 hospital corporations, the CEOs of the Halton and Peel CCACs, the Commissioner and Medical Officer of Health from the Regional Municipality of Halton, the Commissioner of Health from the Regional Municipality of Peel, the Regional Director of the Central West Region of the Ministry of Health and Long Term Care, and the Executive Director of the District Health Council. The Forum was established to drive and enable solutions that further system planning and the integration of health services in Halton and Peel.
- Partnered with the Regional Municipality of Halton to address mental health and homelessness **by identifying critical issues and future solutions** that can be used to develop emergency responses and permanent housing for one of the community's most vulnerable populations.
- Worked with a group of east Mississauga leaders and professionals to establish a community-driven planning structure for the **development of a community health centre** to promote sustainable health care options.
- **Facilitated and reported on health sector Y2K readiness.** Beginning in February 1999, the DHC became actively involved in discussions between health sector organizations to facilitate system readiness for Y2K. Compliance and contingency planning represented a major activity within all health sector agencies. Along with the major role of individual organizations in the smooth transition into 2000, the role of the Ministry of Health must also be acknowledged. In addition to supporting the work of health sector agencies and DHCs through the dedicated Y2K project team, significant health sector investment enabled operational sustainability.
- Undertook an extensive **assessment of palliative care service needs** in the Region of Halton. Examined service provision, utilization and demographic trends, and community need. Identified current issues in the palliative care system and the need for further integration and coordination of services among community and institutional providers.
- District Health Councils of Ontario embarked on a strategic plan to monitor and evaluate the delivery of service and health outcomes and **assess changes to the system and their impact on the health status of the community.** The 16 DHCs across Ontario continue to work collaboratively on the creation of a **provincial health system monitoring report** based on the *Toronto DHC's First Annual Toronto Health System Report Card (1999).*

A critical factor in our ability to do our work is the valued input and expertise from volunteers. In addition to opportunities to volunteer at the Board level, our projects are led by volunteer committees. If you are interested in an exciting and rewarding experience, please contact Steve Isaak to outline your interests and areas of expertise.

Your comments and input are important to us. We would like to hear from you and receive your ideas, questions or concerns. Please get in touch!

By Telephone (905) 814-5995
Toll Free 1 (888) 452-6818
By Fax (905) 814-4835
By Email planning@hpdhc.com

By Mail: 6711 Mississauga Rd.
Suite 600
Mississauga, ON L5N 2W3

Version française disponsible

MESSAGE FROM THE CHAIR

As Chair, I am very pleased to present the second annual report of the Halton-Peel District Health Council. Fiscal year 1999 / 2000 was a successful and challenging year for members and staff of the Halton-Peel District Health Council. Many changes occurred at the local and provincial levels and we continued to meet our mandate of providing quality advice to the Minister of Health and Long-Term Care and to advocate for the community.

During our second year of operation, the Council has grown in our understanding of the importance of the DHC role. Over the past year, Council has dealt with many interesting and challenging issues, some of which are highlighted in this report. These issues cut across a variety of planning areas, such as hospital restructuring, emergency health, long term care, mental health and addictions, community services and children's services. In all of these activities, we have focused our attention on maintaining and enhancing close relationships with our planning partners at the local, regional and provincial level. Through this collaborative process, we can more effectively make system improvements. As the Ministry has moved to decentralize its operations to Regional Offices, Council has been pleased to work closely and collaboratively with the Central West office and its Regional Director Mr. Michael McEwen.

Council members met with local MPPs, Ministers and other local officials on several occasions to apprise them of current planning initiatives and address funding issues in Halton-Peel and needs based on a population explosion that will occur over the next twenty years. The issue of growth and funding is central to ensuring adequate and appropriate health service delivery in Halton-Peel.

Jeanne Hay

On a personal note, as I leave the Chair to my very able successor, I want to reiterate that I have enjoyed these past two years tremendously. The role of chair of the Halton Peel District Health Council has been challenging and rewarding for me. I thank this excellent Council for their support and hard work. These Councillors have served their community well. Their volunteer hours, their ideas and their advice have greatly promoted and enhanced health care in Halton and Peel. To each of them I owe a debt of gratitude and on behalf of the community I want to take this opportunity to thank them. My thanks also to a superb staff under the leadership of Steve Isaak. Much has been accomplished and their efforts are part of everything the Council does. I wish the Council and the staff continued success in their efforts and advocacy on behalf of the community.

The Halton-Peel District Health Council is the local voice for health system planning. Made up of people who use and deliver health and related social services, the Council works in partnership to provide advice to the Minister of Health and Long-Term Care on local health planning needs and the development and implementation of a balanced and integrated health system.

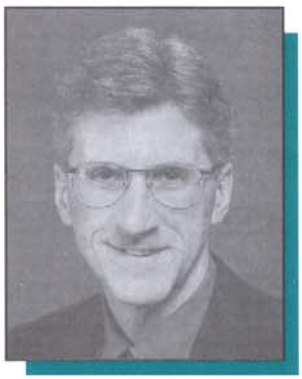
EXECUTIVE DIRECTOR REPORT

Population growth and demographic change continue to be the major underlying factors contributing to health planning issues in Halton-Peel. With a population of approximately 1.3 million in 1996, Halton-Peel represents the 2nd largest planning district in the province. Halton-Peel is projected to be one of the fastest growing districts in the coming years, with the population expected to increase by over 670,000 from 1996 to 2016.

The population aged 65 and older is similarly growing at the fastest rate in the province such that, within a couple of years, there will be more people in this age group living in Halton-Peel than in any other planning district in the province, outside of Toronto. As is well documented, the prevalence of illness increases with age, as does the use of medical services. The cultural diversity of the population also adds to the unique needs of the growing and aging population.

Rapid population growth creates pressures in terms of access to health care services and the capacity of existing services to meet demand. As hospitals continue to plan to meet restructuring targets, capacity remains an important issue. The Health Services Restructuring Commission sized the hospital system to the year 2003. Given the rate and volume of population growth and the length of time required to plan and build capital facility expansions, the planning horizon of 2003 may be too short. In response to this issue, the Health Council is working with providers to address the scope and volume of services required beyond 2003 to the year 2008 and 2016.

In the past a major issue for Halton-Peel has been the lack of long-term care beds. Two years ago the Government announced the creation of 20,000 new long-term care beds over a 6-8 year period for the Province. To be implemented over 3 phases, Halton and Peel will eventually receive approximately 3,800 new long-term care beds. The planned implementation of these beds and their impact on the health care system represent significant issues as these beds come on line.



Steve Isaak

With the planned devolution of the Provincial Psychiatric Hospital System there is a need to ensure that access to specialty mental health beds and services is facilitated. The Health Council continues to be involved in planning for ongoing access to these resources in Hamilton and Toronto.

Given the population growth and demographic changes, finding sustainable long-term alternatives must become part of the solution. This will involve research to identify best practice and innovative opportunities to meet service and access needs through integration of care delivery models and a coordinated response to health needs.

As the rate of change in the health care system continues, there is need for tools to monitor changes at the system level, both provincially and locally. District health councils around the province have begun to collaborate on the development of a health system monitoring tool to facilitate on-going health system improvement.

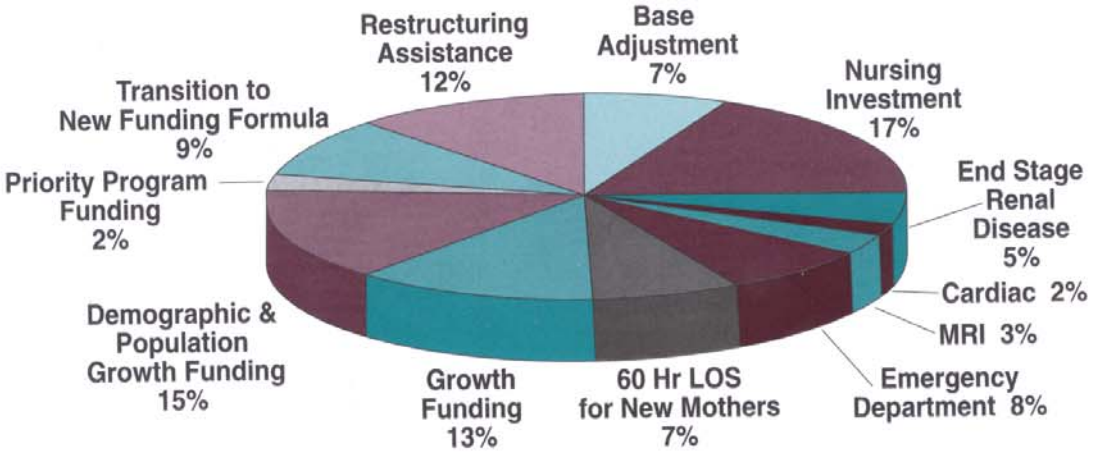
I look forward to continued collaborative successes and partnerships as we move ahead into this new millennium. As our population continues to grow in Halton and Peel, I am confident that the DHC will also grow in planning strength, knowledge and expertise to meet the challenges and needs of our residents.

Did you Know

The Halton Peel DHC has a library of recent DHC and other planning publications. If you are looking for information on health system planning, give us a call, we may be able to help you out!

INCREASED HOSPITAL FUNDING

Since April 1, 1999, Halton and Peel have received increased hospital funding totaling more than $64.7 million, an increase of 14% over the 1998/99 base funding. This brings the total hospital allocation (as of 2000) to more than $525 million and reflects the government's plan to improve access to front-line services and to modernize Ontario's health care system. The increased funding is essential to ensuring that the hospital system is able to continue to meet the needs of a growing and aging population. The distribution of new funding since April 1, 1999 (based on total funding of $64.7 million) is illustrated below.



AUDITED FINANCIAL STATEMENTS

Statement of Financial Position

Assets	
Cash and short-term deposits	$583,927
Accounts Receivable	6,257
Prepaid expenses	18,651
	$ 608,835
Liabilities	
Accounts Payable and accrued liabilities	$21,750
Payable to the Ministry of Health operating Fund to be applied to subsequent years revenue	204,946
Deferred revenue	322,139
Grant received in advance	60,000
	$608,835

Summarized Statement of Operating Fund Revenue and Expenditure

Revenue	
Ministry of Health – Core	$1,234,093
Ministry of Health – one time funding	36,170
Interest	19,302
Other	8,168
Total Revenue	$1,297,733
Expenditure	
Salaries and Benefits	$676,877
Rent	168,231
Other, miscellaneous	262,358
	$1,107,466
One time expenses	$44,302
Total Expenditure	$1,151,768
Excess of revenue over expenditure for the year	
To be applied in subsequent year's revenue	$145,965

HIGHLIGHTS

Affecting Change Through Leadership

- Brought together local stakeholders and managed **a process to increase access to tertiary/specialty beds and community mental health programs** from the Centre for Addiction and Mental Health. Plans are being made to establish a clinical and rehabilitation office by Summer, 2000.
- **Faced with an imminent shortage of hemodialysis stations in Halton and Peel, the DHC partnered with local providers to analyze the current capacity and projected future need for services.** Consensus was reached on immediate and short-term solutions and recommendations were provided to the Ministry. Based on these recommendations, the Ministry approved over $2.85 million to significantly expand access to hemodialysis services in our planning region.

Plans are under way at each site to implement the expansion by Fall 2000, bringing the total local capacity to 128 stations. Planned expansions are:

Hospital	DHC Recommended	Ministry Approved
Halton Healthcare Services	Adding 14 stations	12 station expansion
The Credit Valley Hospital	Developing 24 station satellite	Development of a satellite
William Osler Health Centre	Adding 12 stations	12 station expansion

- Led the process for the establishment of a joint initiative between the Ministry of Health and Long-Term Care and the Ministry of Community and Social Services and their funded programs to develop a plan for **the enhancement of child and adolescent mental health beds in Halton and Peel.**
- Provided the lead role in the **development of protocols for access to specialty mental health beds and programs** in Hamilton and Niagara Region.
- Promoted a partnership with the Simcoe-York, Durham, HKPR and Toronto DHC's and other regional representatives in the development of a **System Planning Framework for Eating Disorders.**
- Continued collaboration with public health, hospital and community providers from Halton, Peel and Etobicoke on the completion of **a comprehensive proposal for an integrated system of eating disorder services.**
- **Led an analysis to demonstrate the impact of high population growth and demographic changes on the provision of health care services in Halton-Peel.** Once complete, the analysis will include a population growth and demographic profile, a translation of population growth and demographic changes into need for hospital-based services and subsequent translation of need beyond the institutional sector.

AUDITOR'S REPORT

We have audited the statement of financial position of the Halton-Peel District Health Council as of March 31, 2000 and the statements of operating fund revenue and expenditure and cash flows for the year then ended.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Council as of March 31, 2000 and the results of its operations and cash flows for the year then ended in accordance with generally accepted accounting principles.

ALLEN & MILES LLP
Chartered Accountants

Brampton, Ontario
May 26, 2000

HIGHLIGHTS

www.hpdhc.com

Involving Our Community

- **Facilitated several working groups and 2 community consultations in preparation for the creation of a strategic plan for the development of community and facility long-term care services** in Halton and Peel. The final report provides advice on the development and enhancement of housing, health and support services, and information services for the long-term care population.
- In partnership with Human Resources Development Canada, Mississauga Office, **staff and community partners examined the ability of the local labour market to deliver health services to an aging population in Peel, Halton and Dufferin as well as the factors affecting the supply of health care workers**. The outcome was the report, *Health Human Resources: Serving An Aging Population in Halton, Peel and Dufferin.*
- In response to joint guidelines prepared by the Ministry of Health and the Ministry of Community and Social Services, the Halton-Peel DHC continues to work with two local dual diagnosis committees in the **development of Dual Diagnosis System Designs**.
- **The DHC moved ahead in addressing the requirements of the French Language Services Act in its designated community of Mississauga**. A DHC staff review of Ministry of Health feedback on the original *Study of French Language Health Services in Peel District* has been completed. This is the first step in an ongoing planning process.
- Staff continued to participate in many additional linkage committees / networks. **These linkages provided ongoing participation in various local groups, representing a vital component of the planning process**. They also act as an important vehicle for information sharing, relationship development and keeping informed of "early warning" signals within the health and related services system in Halton-Peel.

Pioneering Solutions to Complex Problems

- The DHC facilitated a planning process involving more than 60 health and human service providers and clients **to design a new approach for delivering addiction treatment services**.

  The Halton-Peel Addiction Treatment Plan for Integrated Services calls for the development of neighbourhood teams with active outreach services to be placed in each of the seven municipalities of Halton-Peel. Existing programs will co-locate their staff and develop common policies and approaches to ensure clients easy access to the most effective services. A single 1-800 line will link callers directly to the appropriate regional team.

  The addiction planning process afforded the opportunity to move beyond a provincial health reform process that targets efficiency and **narrow** structural integration to create a system re-design that removes barriers for racial, cultural, vulnerable and other marginalized communities through more fluid and broad-based processes. The ***Diversity Strategy*** is a **multi-faceted** approach emphasizing system inclusiveness, proactive outreach & linkages, and the development of diverse interventions that are culturally appropriate.
- Worked with the Peel Mental Health Housing Coalition by working with a sub-committee to develop **housing options for persons with serious mental illness**. Solutions identified through this group will form one component of a comprehensive proposal to expand the number of supported housing units and stream-line access through inter-agency partnerships.
- Established the **Halton-Peel Emergency Services Network**, a voluntary group of key health service providers, funders and planners, to ensure that the emergency services system is organized and integrated within the broader health system to provide the best care in an environment where staff want to work.

  The Network identified over 70 ideas to continue to improve emergency services in Halton and Peel. The Network has focused on implementing 12 of the priority strategies.

THE COUNCIL

The Halton-Peel DHC has a 20 member governance board, made up of people who use and deliver health and related social services. The Council members are appointed by Lieutenant Governor Order-in-Council to reflect the diversity of the Council's geographic area.

Back Row: Peter Kujtan, Richard Helm, Kurt Franklin, Joe McReynolds, Doug Billett, Al Cook
Front Row: Ann Mulvale, Jeanne Hay, Fiona Ryner, Gael Miles, Connie Sanci

Mr. Doug Billett, *Consumer, Brampton*
Mr. Al Cook, *Consumer, Halton Hills*
Councillor Kurt Franklin, *Regional Municipality of Halton*
Ms. Jeanne Hay, *Chair, Provider, Burlington*
Mr. Richard Helm, *Consumer, Burlington*
Ms. Mary (Benny) Icely, *Consumer, Mississauga West*
Dr. Peter Kujtan, *Provider, Mississauga East*
Mr. Joe McReynolds, *Provider, Caledon*
Councillor Gael Miles, *Regional Municipality of Peel*
Councillor Marolyn Morrison, *Regional Municipality of Peel*
Karen Murphy**, *Consumer, Mississauga*
Mayor Ann Mulvale, *Regional Municipality of Halton*
John Oliver**, *Provider, Oakville*
Connie Price**, *Consumer, Burlington*
Dr. Glen Roberts*, *Provider, Brampton*
Ms. Fiona Ryner, *Vice-Chair, Provider, Brampton*
Ms. Connie Sanci*, *Provider, Oakville*

* Term Completed
** New appointment as of April, 2000

The Planning Team

Steve Isaak	**Executive Director**
Chris Altmayer	**Epidemiologist**
Danielle Claus	**Health Planner**
Rose Cook	**Health Planner**
Juvy Dayao	**Admin. Assistant**
Mary Jane Glover	**Executive Assistant**
Lisa Jones	**Health Planner**
Sandi Kent	**Secretary / Receptionist**
*Aasif Khakoo***	**Health Planner**
*Elizabeth Martin**	**LTC Planner**
Scott McLeod	**Senior Planner**
*Rupinder Singh***	**MBA Co-Op Student**
Linda Sullivan	**Health Planner**
*Donna Laevens-Van West***	**E.R. Co-ordinator**
Ron Wray	**Senior Planner**

* on secondment as of April, 2000
** started as of April, 2000

OFF THE PRESS

- Health Human Resources – Serving an Aging Population in Halton, Peel and Dufferin (February, 2000)
- Multi-Year Plan for Long-Term Care Services in Halton and Peel: Fiscal Years 2000/ 2001 to 2002 / 2003 (February, 2000)
- Palliative Care Needs Assessment – Region of Halton (November, 1999)
- Halton-Peel Addiction Treatment Plan for Integrated Service (November, 1999)
- 1999 / 2000 Mental Health Operating Plan – Summary Report (July, 1999)
- 1999 / 2000 Hospital Operating Plan Review Committee Summary Report (July, 1999)
- Staff Review of the 1999/2000 Mental Health Operating Plans (July 1999)
- Staff Review of the 1999/2000 Addiction Program Operating Plans (March 2000)
- Recommendations regarding Haemodialysis in Halton and Peel (November 1999)
- Halton and Peel Health Sector Year 2000 Status Reports (April 1999)
- Halton and Peel Health Sector Year 2000 Readiness Workshops - Summary Reports (May 1999)
- Halton and Peel Operational Continuity and Emergency Preparedness Reports (July 1999)
- Halton and Peel Operational Continuity and Emergency Preparedness Reports (October 1999)

News

The Halton-Peel DHC issues a quarterly newsletter. If you would like to be added to our mailing list please call Sandi Kent at (905) 814-5995, ext. 100
Toll Free 1-888-452-6818

Printed on Recycled Paper