Central
LOCAL HEALTH INTEGRATION NETWORK
RÉSEAU LOCAL D'INTÉGRATION DES SERVICES DE SANTÉ
du Centre

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March 2006

STAKEHOLDER ENGAGEMENT PROCESS

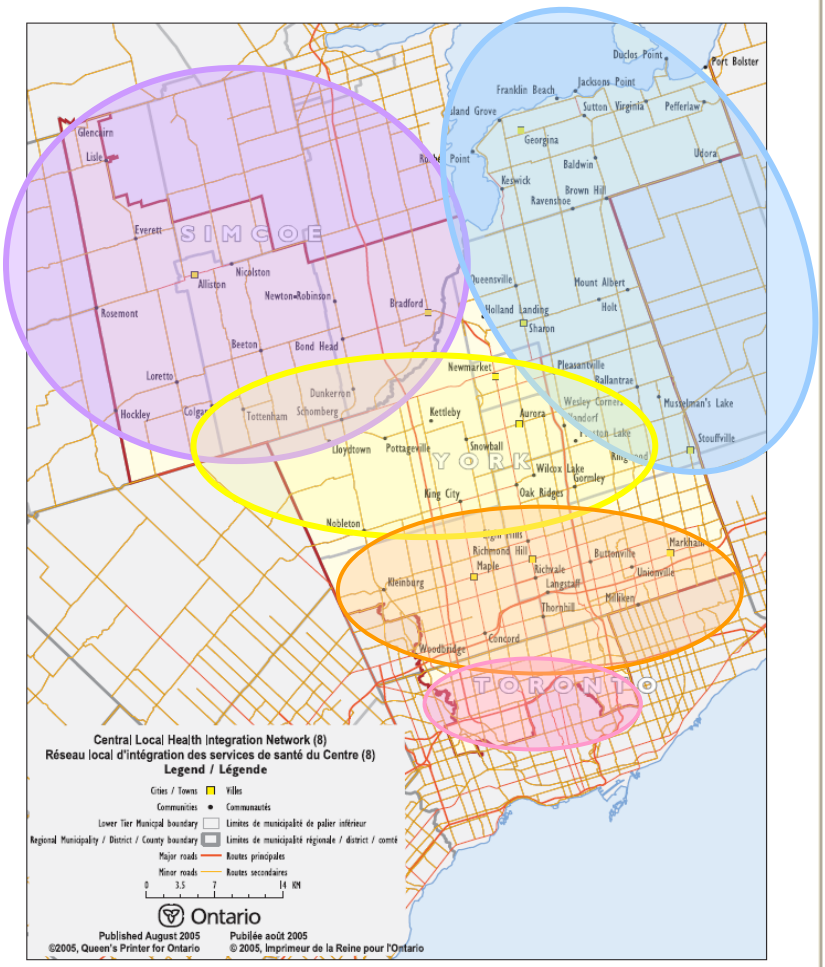
Central LHIN is committed to open communication and broad, inclusive consultation. We will keep stakeholder groups informed, engaged and working together to strengthen local health services.

Our Stakeholder Engagement Strategy will focus on the people who use health care, in order to enhance local accountability, balance priorities and develop system capacity and sustainability. Our stakeholders are defined as *anyone who will be affected by, or who has the ability to affect, the activities of the Central LHIN.* This includes: members of the public, health care consumers, service providers and others.

In early February, the Central LHIN sent out the proposed strategy to health providers and others for their feedback. Their feedback has been incorporated and the Central LHIN Board approved the revised strategy on February 28, 2006.

The objectives of the Stakeholder Engagement Strategy are to:

- Provide stakeholders with balanced and objective information;
- Obtain feedback and make recommendations on service gaps and opportunities for coordination and integration;
- Ensure that concerns are consistently understood and considered; and
- Build relationships.



To create an accessible process of engagement, we have divided Central LHIN into five geographic areas *(see map)* to facilitate input, disseminate information and achieve validation from our stakeholders. Volunteers from each of the five areas are working with us as members of regional stakeholder groups to connect Central LHIN with members of its many communities.

The next series of meetings with stakeholders will be held throughout March to gather their insights into the current state of health care in Central LHIN. Those insights will help shape our Integrated Health Service Plan.

Ontario

ENGAGING OUR STAKEHOLDERS: Neurological Services Providers

On February 17, 2006, Central LHIN hosted a meeting for providers of neurological services. The 40 attendees represented a diverse range of care settings, including hospitals, community agencies, care networks and in-home providers. Key points in these initial discussions were the diversity of provider models and programs and the challenges of compiling a complete roster of available services.

Concerns raised by participants included the spectrum of access, coordination of services, system capacity and continuity of care for people requiring neurological services. Several participants noted the need to improve post-hospital care coordination and to provide additional support for those who need care at home. Participants voiced the need to provide better support to the patient's family-based caregivers. As was noted at the session, "*When caregivers are not supported, we end up with two patients instead of one*."

The discussion led to the formation of a smaller, LHIN-supported, planning group that will meet in March to identify the goals and process for addressing the group's common challenges. For more information, please contact Lynne Lawrie, Director of Planning, Integration and Community Engagement, at the Central LHIN offices by email at Lynne.Lawrie@lhins.on.ca.

LOCAL HEALTH SYSTEM INTEGRATION ACT, 2006

On March 1, 2006, the Local Health System Integration Act, 2006 passed third reading in the Ontario Legislature, giving the province's 14 LHINs the power to plan, integrate and fund local health services for their specific geographic areas.

"LHINs will break down the barriers faced by patients trying to find the health care services they need because those services will be better coordinated," said Health and Long-Term Care Minister George Smitherman.

The act, as passed, contains amendments that reflect the comments and insights gathered from various stakeholders. The result is an improved act that is part of the government's plan to build a health care system that delivers on three priorities – keeping Ontarians healthy, reducing wait times and providing better access to doctors and nurses.

CENTRAL LHIN TEAM MEMBER PROFILE: Nitin Madhvani

A recent graduate of the Ivey Business School at the University of Western Ontario, Nitin joined the Central LHIN in early October 2005 to support stakeholder engagement and planning activities. From the initial October dialogue sessions to the ongoing advisory groups, Nitin has worked with providers in our LHIN to facilitate an inclusive and vigorous Integrated Health Services Plan process. Nitin is a lifelong resident of the Central LHIN and brings a local and fresh perspective to the team. Prior to joining the LHIN, Nitin spent a semester in Denmark to study that country's health care and social system. Nitin hopes to eventually return to school for graduate studies in health care and to apply his Ontario health care experience in other places around the globe.

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