



Local Health Integration Network

LHINfo Source

February 2007

Expo will Celebrate Innovations in Health Care

Celebrating Innovations in Health Care Expo 2007 is an opportunity for health care providers in the Central LHIN to spread the word about their innovative programs and best practices.

Expo 2007, sponsored by the Ministry of Health and Long-Term Care and the 14 Local Health Integration Networks (LHINs) is set for **May 23-24, 2007** at the Direct Energy Centre, Canadian National Exhibition Grounds in Toronto.

"We know there are many innovations and best practices among providers in the Central LHIN and we encourage them to get involved with Innovations Expo this year," says Lynne Lawrie, the LHIN's Senior Director, Planning, Integration and Community Engagement.

The event is a showcase of innovative solutions and projects supporting health care renewal in Ontario. There is an opportunity to engage with other professionals and participate in interactive workshops, exhibits and poster displays.

The 2007 Innovation Awards, acknowledging leading made-in-Ontario health care initiatives, will be presented at the special closing ceremony.

*Caring Communities –
Healthier People*

"The Expo is an opportunity to showcase excellence and create new conversations with new people about innovation and best practice," says Hugh MacLeod, Assistant Deputy Minister, Health System Accountability and Performance.

"There is gold in the Ontario Health Care system," says MacLeod. "We need to spend more time mining it and once mined, transfer the knowledge to others."

In its first year, Expo 2006 attracted more than 2,000 delegates and showcased 35 workshops, 153 booths and 194 posters representing a cross-section of Ontario's health care system.

George Smitherman, Minister of Health and Long-Term Care, called it "a showcase for the remarkable creativity, intelligence and drive that distinguishes Ontario's health care system."

The event offers participants an opportunity to share and learn about current achievements and unique approaches underway in communities across the province as they relate to the government strategies around primary care, wait times, critical care, information management and LHINs.

Expo 2007 will also highlight innovations underway in such areas as mental health, long-term care and

public health. The Ministry describes the event as "a unique occasion for collectively acknowledging the system's successes around the delivery of patient-focused and integrated health care services."

Themes for this year are centred on:

- **meeting community needs through integrated care**
- **improving quality and patient safety**
- **improving efficiency through process redesign**
- **innovative health information management**
- **innovations in health human resources**
- **innovations in health promotion**

Representatives from all sectors of health care are encouraged to participate. For more information, visit www.ontariohealthexpo.ca



Moving Toward a Patient-Centred System for Prevention and Management of Chronic Diseases



Hy Eliasoph, Central LHIN CEO

There was definitely a positive buzz about the possibility for creating a new inclusive, patient-centred system in the Central LHIN at an energy-filled Diabetes Management and Prevention Planning Session February 2nd, 2007 in Markham.

Chronic disease management and prevention is one of seven health service priority areas in the Central LHIN's first Integrated Health Service Plan (IHSP).

Topics in the small group discussions included navigating the system, co-ordination of services, system design, self-management, Information Management/Information Technology, education/best practices, and primary care and physician integration into the system.

"This was a very good session," said Jane Sanders, Program Manager for transitional care at Toronto Grace. "You could feel the energy in the room and it is clear that everyone is eager to co-operate to find a way for patients to get what they need."

The 89 participants included people with diabetes, physicians, nurses, diabetes educators, endocrinologists and representatives of hospitals, diabetes education centres, wellness centres, long-term care, community health centres, diabetes networks and community support services.

Among others participating were representatives of the Kidney Foundation, Osteoporosis Canada, Ontario Medical Association, Arthritis Society, Heart and Stroke Foundation, mental health and addictions services, the Central LHIN and the Ministries of Health and Long-Term Care and Health Promotion.

Participants agreed that the patient should be the driver of the system and that the providers must be there to support them. "Right now the delivery model for chronic diseases is scrambled and the patients are on their own," said one participant.

A major theme that emerged in every small discussion group session during the day was recognition of the need to empower people to self-manage their chronic diseases.



Rich information was provided during the reporting back session.

A better system of supporting people to manage their chronic disease is needed, participants agreed.

Diabetes educators pointed to statistics showing they are only reaching 10 per cent of people who have diabetes. A small percentage of people with diabetes are being referred to diabetes education centres.

Another theme centred on the advantages of people being able to self-refer to diabetes education centres. There is a need to educate caregivers including physicians, pharmacists, people with diabetes and

the general public about the centres. The need for co-ordination of the system, collaboration and partnerships among stakeholders was also highlighted. "Patients are asking us to get organised, get our act together, and we can't do that in isolation," said one participant.

Building strategic linkages and stronger communication among stakeholders was emphasized. Better use of existing resources should be developed and complementary medicine should also be included in the dialogue, some participants said.

There was a call for the LHIN to develop an inventory of services in one data base to identify barriers and gaps in services and the establishment of a website and 1-800 number for people to call for information on services related to management and prevention of chronic diseases. Using e-Health to connect service providers and consumers was another theme coming out of the session. There is a lack of co-ordinated information on what is available, participants pointed out.

The need to transport some people to services and transport services to people was also raised.

Participants agreed on the need to be proactive in developing a new system of care. They called for a number of working groups to begin the process.

Michaela Sandhu, Senior Planner with the Central LHIN, said she was pleased with the results of the session and in the response from participants who were asked if they were interested in participating in the Chronic Disease Management Advisory Group or one of several working groups being organized.

"We had very enthusiastic participation at the session with stakeholder representation from across the LHIN and we are now ready to move forward," she said.

Seamless Care for Seniors

There are now four work groups established by the Central LHIN's Seniors Advisory Network to develop the strategies for seniors outlined in the LHIN's Integrated Health Service Plan (IHSP).

Services for Seniors is one of seven priorities identified in the Central LHIN's initial IHSP approved by the provincial government.

"This is a big challenge and we are very pleased with the progress so far," says LHIN planner Fern Teplitsky.

The Specialized Geriatric Services Work Group is looking to enhance geriatric services including specialized assessment, diagnosis and treatment, Teplitsky explains.

"These services are not evenly distributed across the LHIN," she says. For example, there are fewer specialized geriatric services for seniors available above Steeles Avenue, she points out.

The Work Group is looking at where the greatest needs are and at creative ways of meeting those needs, such as partnerships with physicians and using transportation to get people to services or services to people.

The Doorways to Care Work Group is developing pilot projects to get more information on services to seniors and quicker connections to services for seniors and caregivers.

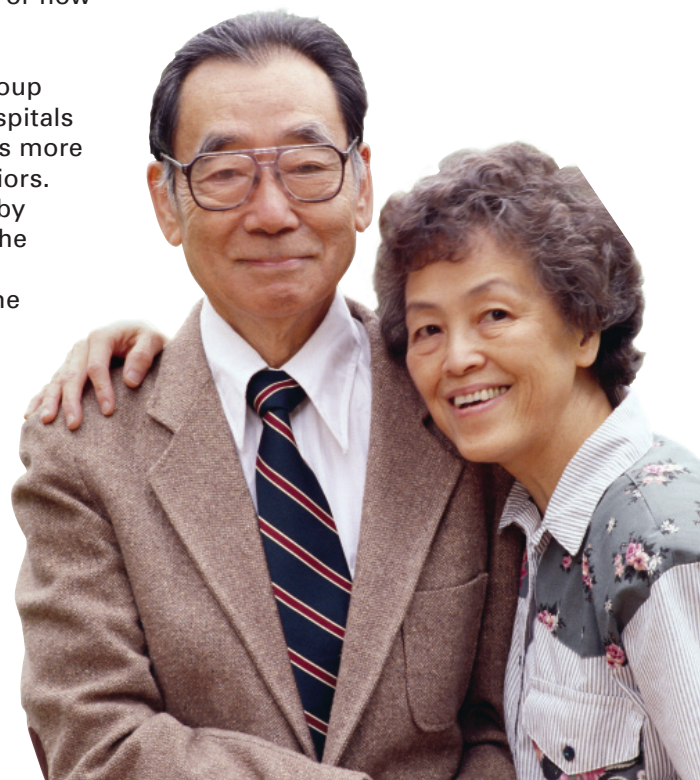
People do need help in navigating the system and we want to simplify the system for seniors," she says. "What we heard during the engagement process is that many seniors don't understand what is available or how to access services."

The Senior Friendly Work Group is aiming to help to make hospitals and community organizations more sensitive to the needs of seniors. This could be accomplished by educating staff and making the physical environment more welcoming for seniors. "Some hospitals have already started to do these things," Teplitsky says. "We are trying to get the whole LHIN to be sensitive to the needs of seniors and their caregivers."

The Transportation Work Group is trying to develop a more comprehensive and coordinated transportation system so that seniors can get to the services they need.

The work groups have a full portfolio and each is working parallel to the strategies outlined in the IHSP, she says. Some groups were organized earlier and have progressed further than others.

The Seniors Advisory Network will be seeking more public input into their implementation strategies later in the year.



HHR ACTION IN THE CENTRAL LHIN

The Central LHIN HHR Advisory Group is piloting a **Career Fair on March 26th** at the Villa Colombo Banquet Hall. The fair will be geared toward recruitment of nurses and other allied health professionals. We have already received lots of interest from our health service providers and we are confident the fair will be a great success.

To participate, please contact Rochelle Rutman at Rochelle.rutman@lhins.on.ca or at (905) 948-1872 ext 209



Community Governance Councils

The Central LHIN board is meeting with chairs of boards of health care organizations throughout the LHIN in Governance Council meetings beginning February 28, 2007 through to March 28, 2007.

The meetings are designed to talk through issues and challenges of governance raised during the first set of meetings in May and June of 2006 and provide a forum for board-to-board relationships. Meetings are organized according to geographic areas.

Letters have been issued to the board chairs. For more information, please contact Anna Themelis at anna.themelis@lhins.on.ca or (905) 948-1872 ext 203.

Staff Profiles



Mary Byrnes (Markham)
Integration Consultant

Mary brings an array of experience to the Central LHIN as she has worked on various projects of the MOHLTC, including working on the Long-Term Care Redevelopment Project and at two of the District Health Councils. In her most recent position, Mary worked for the MOHLTC Health Results Team on Information Management, where her duties included accountability policy work. Mary has a M.B.A. from York University's Schulich School of Business.

When she is not hard at work at the LHIN, Mary spends time with her husband and two children and enjoys reading, films, skiing, camping and canoeing.

"Working at the Central LHIN is a terrific opportunity to be involved in health planning and integration activities in the community where I live and work."



Michael Byrnes (Markham)
Senior Consultant, Performance & Contract Allocation

Michael Byrnes brings over 25 years of experience. Michael has recently retired from the MOHLTC, where he has worked for the last 7 years in the position of Manager Information Analysis and Reporting. While in this role, Michael and his team responded to queries and developed standard reports for financial, statistical and clinical information related to hospitals, Community Care Access Centres, community support systems and Children's Treatment Centres.



Naj Hassam (North York)
Senior Funding & Allocation Consultant

Naj Hassam brings over fifteen years of experience from the MOHLTC where he has held various senior financial roles. Prior to joining the Central LHIN Naj was the Accounting Manager at Cancer Care Ontario and most recently held the position of Finance Manager at the Public Health Division of the MOHLTC. Naj holds a CMA degree from both England and Canada.

Naj spends his free time with his wife and two children, both of whom are attending university. Naj also enjoys gardening and working on various home projects.

"I am very excited to join the Central LHIN because the challenge builds on my previous health care experience and allows me to work with a small group of professionals dedicated to where the front line action is. Besides, working for the Central LHIN allows me to focus on specific health care issues in my community."

Michael's unit was also involved in developing a budget and creating forecast and supplementary forms. Prior to this position, Michael held the position of financial coordinator of the Regional teams and the Health Reform Implementation Team.

Michael holds a Masters degree in Physics, a Masters in Business Administration (MBA) and is a Certified Management Accountant (CMA).

In his spare time, Michael enjoys golfing, curling and gardening with his wife. He also enjoys spending quality time painting with watercolours and drawing.

"The LHIN represents an opportunity to coordinate sectors and the potential for my role as a mentor and trainer within the unit."

Central LHIN Fast Fact

Diabetes is a large and growing health problem in Ontario. The prevalence of diabetes is **4%** and is directly responsible for **2%** of all deaths in the Central LHIN.

Risk Factors:

- Risk increases with age and is generally higher in men
- The prevalence of diabetes rises as body mass index (BMI) increases and exercise decreases, especially for women
- Individuals with lower incomes are more likely to suffer complications from their diabetes, and are less likely to see a physician regularly

Watch for the next issue of LHINfo Source in March. If you have comments or ideas for future issues, please contact Sandi Pelly at **905-948-1872 ext 212** or email sandi.pelly@lhins.on.ca

Remember to check out Central LHIN's Newsroom regularly at www.centrallhin.on.ca for news stories on community engagement and our Integrated Health Service Plan.

Central LHIN

140 Allstate Parkway, Suite 210
Markham, ON L3R 5Y8

905-948-1872
1-866-392-5446
fax: 905-948-8011

www.centrallhin.on.ca
central@lhins.on.ca



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Integrated Health System
for Our Communities*