



LHINfo Source

Summer/Fall 2010

IHSP Launch Series “time well spent”

Health system challenges and opportunities for system improvements were hot topics of discussion at the launch of [*Creating Caring Communities, Healthier People... Together*](#), the Central Local Health Integration Network's (LHIN's) Integrated Health Service Plan (IHSP) 2010-2013.

More than 175 Central LHIN health service providers, community partners and consumers, along with Central LHIN Board members and staff, came together at a series of five engagement sessions held over the past several months to officially launch the new plan.

The aims of the sessions were to:

1. provide an overview of the new IHSP,
2. showcase Central LHIN health service provider successes in supporting the IHSP through innovative programs and services and
3. create a forum for health service providers to discuss and prioritize their key issues, challenges and opportunities for collaborative system improvements.

Cross-sector representation ensured lively discussions during the breakout portion of the sessions and participant feedback was positive.

“Attending the Launch Series was time well spent. I was impressed with the open dialogue about the scope of healthcare issues within our LHIN and the challenges patients face in trying to access the system,” said Dr. Shawn Whatley, Medical Direc-

tor, Emergency Program, Southlake Regional Health Centre. “I came away with a better sense of where the LHIN was heading, and an appreciation for all the work that has been going on behind the scenes.”

Kim Baker, Central LHIN's Chief Executive Officer (CEO), says the interactive and cross-sector format of the launch series mirrors the collaborative way in which the IHSP was developed, incorporating input from a wide range of stakeholders to ensure the plan reflects the needs of Central LHIN's growing communities.

“Our success in achieving the goals of the new IHSP depends on each of our health system partners taking an active role in system-level thinking and planning,” said Baker. “We also need to continue to work together to improve access to quality care for residents in our LHIN. These sessions were a great start.”

Highlights and findings from the sessions will be summarized and shared with participants, then used to support future planning efforts and the work of Central LHIN's new advisory networks.

Go to [Let's Talk IHSP!](#) on our website to view the presentations made by Central LHIN's CEO, and our health service provider guest presenters.

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Ontario
Local Health Integration
Network

Special guests join LHIN to announce Aging at Home expansion

On August 31, local politicians, health service providers and media gathered with Central LHIN staff and Board members at North York General Hospital to celebrate the successes to date of the Aging at Home strategy in our LHIN, and to announce what's to come thanks to year three funding.

In 2010-11, Central LHIN will invest \$52.9 million through Aging at Home to fund over 60 coordination and collaboration initiatives. In the last two years, these initiatives have enabled our health service providers to offer additional care and services to over 16,000 seniors in our LHIN, and to decrease the number of people waiting in acute care beds in our hospitals who need alternate level of care in the community.

David Caplan, MPP for Don Valley East, was on hand to make the announcement.

"I have had the pleasure of seeing Aging at Home take shape in the Central LHIN; achieving very positive outcomes through the many successful programs and services that Central LHIN health service providers have implemented in partnership with one another," Caplan said. "These programs are helping Central LHIN, along with its hospital and community partners, to deliver on the provincial government's commitment to reduce emergency department wait times and create a more coordinated and integrated health system."

Aging at Home is a strategy focused on enhancing the continuum of services for seniors, to help provide them with quality care and a wider range of options. It gives LHINs the flexibility to work with their communities to design and deliver innovative projects that meet the specific needs of local seniors.

"Our Aging at Home initiatives are giving seniors across our LHIN the supports they need to stay in their own



Left to right: Cathy Szabo, CEO, Central CCAC, Bonnie Adamson, former CEO, North York General Hospital, Kim Baker, CEO, Central LHIN, David Caplan, MPP, Don Valley East, Ken Morrison, Chairman of the Board of Directors, Central LHIN

homes or in a supportive housing environment for as long as possible," said Kim Baker, Chief Executive Officer, Central LHIN. "They are also helping us to continue to build and strengthen the linkages among our health service providers, creating opportunities for successful collaboration and integration throughout the system."

Read more about *Aging at Home* in the Central LHIN at www.centrallhin.on.ca

Central LHIN health service providers to be showcased at annual Innovations Expo

Attending this year's Celebrating Innovations in Health Care Expo? Be sure to stop by and congratulate these Central LHIN health service providers and provider partners whose innovative programs are being showcased at the Expo:

- **ACTIVE Health Management:** Preventing Falls in Seniors – How Research Makes a Difference!
- **Aphasia Institute:** Quantifying the 'Difficult to Quantify' – A New Assessment Tool for Aphasia
- **Central Community Care Access Centre (CCAC):** Medication Management Support Services – Keeping Seniors Healthy and Safe
- **Human Endeavour:** HOPE – Healthy Outcomes of Preventive Engagements
- **St. John's Rehab:** Efficacy of Seven Days Per Week Admissions and Inpatient Rehabilitation Success with SLEDD; Improving Access, Quality and Continuity of Care
- **North York General Hospital:**
 - Rehabilitation Success with SLEDD; Improving Access, Quality and Continuity of Care
 - Raising the Bar with Closed Loop Bar Code Medication Administration
 - Implementation of a Geriatric Clinic for Parkinson's to Provide Patient-Centredness

Special kudos to the Central CCAC and Human Endeavour whose programs were selected as finalists for an Innovations Award in the Improving Safety and Improving Evidence-Based Practice categories respectively.

Winners will be announced by Health Minister Deb Matthews at the Expo on November 10.

The six themes of the 2010 Expo reflect the *Excellent Care for All Act*, which puts patients first by improving the quality and value of the patient experience through the application of evidence-based health care.

Medication Management: innovative collaboration helps seniors stay healthy

Thanks to Aging at Home funding, it continues to be easier for seniors in the Central LHIN to manage their meds.

Funded through Central LHIN's Aging at Home strategy, the Medication Management Support Service program – led by the Central Community Care Access Centre (CCAC) – is reducing medication-related adverse events for seniors who are over the age of 65 with at least one chronic disease and taking three or more medications.

“Older adults with more than one chronic disease, taking multiple medications, have a higher incidence of adverse medication events,” said Mary Burello, Senior Manager-Project Lead, Central CCAC. “This can lead to unnecessary visits to the emergency department.”

Medication Management Support Service is all about medication reconciliation – the formal process of obtaining the best possible medication history by comparing a patient's list of medications with what their physician actually prescribed.

Through the program, a pharmacist or nurse visits eligible clients to review discrepancies or medication-related problems, then follows up with the prescriber or pharmacist to resolve any issues.

All Central CCAC clients who undergo this consultation receive a medication schedule with information to increase their understanding and ability to self-manage their medication.

When the Central CCAC provided an update on Medication Management Support Service at a Breakfast of Champions Quality Series session hosted by Central LHIN, Burello and representatives from York Central Hospital, and the Institute for Safe Medication Practices Canada, shared their experiences and support for the project.

“One of the successes of the program is the excellent teamwork among the key partners,” said Burello. “The collaboration between Central CCAC, York Central Hospital, Southlake Regional Health Centre, SRT Med Staff Inc, St. Elizabeth Health Care, VHA Rehab services, family physicians and community pharmacists, has been vital in providing a valuable service to clients in the Central LHIN.”

CCAC data has shown that over 80 per cent of discrepancies were resolved after the Medication Management Support Service consultation, resulting in a reduction in the number of emergency department visits. According to Burello, there has been an overwhelmingly positive response from clients and

caregivers alike who found the service to be excellent.

The Medication Management Support Service will continue to be relevant as the population of seniors living in the Central LHIN increases at a greater-than-average rate. In the next 10 years, the number of seniors over the age of 65 in the Central LHIN is expected to increase by 52 per cent, compared to the provincial average of 41 per cent.

Want to learn more? View the presentation from this and other Central LHIN [Quality Series](#) events on our website.

Read Clyde's story...

Clyde is a 69-year-old York Region man who suffers from a neuromuscular disease called Myasthenia Gravis.

Medication taken to control this serious disease made Clyde vulnerable to other conditions, including osteoporosis. These side effects, as well as severe bouts related to his condition, often required visits to the emergency department.

Frustrated by the many medications he was taking, Clyde worked with a pharmacist through the Medication Management Support Service, to inventory and cross-reference his medications. Identifying the need for changes, the pharmacist also modified some medications to liquid form, which was much easier for Clyde because his condition was causing trouble with swallowing.

Clyde is now managing his condition much better with the help of several outpatient supports he received last year from the CCAC including physiotherapy, occupational therapy, dietician observation and counselling, social counselling, constant monitoring from a nurse practitioner who kept an eye on Clyde's overall progress and of course the Medication Management Support Service.

Thanks to the Medication Management Support Service, Clyde is able to successfully manage his medications and his illness is under control. He is feeling better, allowing him to continue participating in running his business, and, once unable to walk, he is walking again unassisted.

“There is no question that my healing has been greatly helped by this service,” said Clyde. “My health has improved and my reliance on hospitals has decreased.”





THREE NEW MEMBERS APPOINTED TO BOARD OF DIRECTORS

Over the past six months, the Central LHIN Board of Directors has welcomed three new members as the terms of other members concluded.

John Rogers, a long-time resident and past mayor of Georgina joined the Board in March 2010. Constantine Georganas, a former banker with extensive community involvement in and outside of the Richmond Hill area, and Maneesh Mehta, a strategic entrepreneur, consultant and electrical engineer from Unionville, both attended their first meeting in June 2010.

We acknowledge and thank former members Eugene Cawthray, Dr. Monique Moreau and Elaine Walsh for their guidance and support of our collaborative efforts to improve the health system in the Central LHIN during their tenure.

Central LHIN holds public Board meetings on the fourth Tuesday of each month. Dates, locations and other Board information is available on our website under [Board of Directors](#).

HEALTHFORCEONTARIO HOSTS SUCCESSFUL HHR SYMPOSIUM

With an impressive line-up of speakers, including the Minister of Health and Long-Term Care, HealthForceOntario held its first health human resources symposium this summer.

The symposium, entitled Stronger Together – Collaboration in Health Human Resources, provided attendees with current and relevant information on health human resources in Ontario from a variety of knowledgeable and dynamic speakers.



For those who may have missed the event, keynote and concurrent session presentations are available on HealthForce Ontario's website at www.healthforceontario.ca/symposium

Did you know? Since October 2009, a Community Partnership Coordinator from [HealthForceOntario's Marketing and Recruitment Agency](#) has worked with our LHIN to boost our ongoing physician recruitment and engagement efforts.

LHIN CEO GUEST SPEAKER ON FUTURE OF HEALTH SYSTEM

Central LHIN Chief Executive Officer Kim Baker took the opportunity over the summer to speak to a group of future health care leaders at a symposium organized by Ryerson University's school of Health Services Management.

The event, entitled Change: The Evolution of Canada's Health-Care System, brought together influential and thought-provoking health care leaders for a one-day debate and discussion on the future of Canada's health care system.

Baker was one of three guest speakers at the symposium, which was the capstone for the school's most recent Leadership Speaks Series. Her presentation focused on system planning, integration, performance and stakeholder engagement.

"These topics are inextricably linked as LHINs work towards their mandate to improve the sustainability of the health system," said Baker. "A sustainable system is created by balancing and prioritizing needs, maximizing the efficiency of services provided and partnering within and across sectors to make the most of available resources."

View Kim Baker's symposium presentation on the Central LHIN website under [Resources and Publications](#).

ADVISORY NETWORKS ALIGNED TO SUPPORT IHSP 2010-2013

Central LHIN has established six new advisory networks to support the implementation of the four priorities outlined in our [Integrated Health Service Plan \(IHSP\) 2010-2013](#).

Response to the LHIN's call for expressions of interest was very positive, and after a careful review of all applications to achieve a balance of knowledge, experience and cross-sector representation, the following co-chairs were selected:

- **Chronic Disease Management and Prevention**
Malcolm Moffat, St. John's Rehab Hospital
- **eHealth**
Perry Doody, Central Community Care Access Centre
- **Emergency Department/Alternate Level of Care**
Barb Willits, Humber River Regional Hospital
- **Health Equity**
Lynn Harrett, Central Community Care Access Centre
- **Mental Health and Addictions**
Sandy Marangos, Markham Stouffville Hospital
- **Performance**
Bill Krever, Better Living Health and Community Services

Other network members have also been selected and the groups have begun to meet to provide advice on IHSP implementation.

ADVANCING QUALITY IN ONTARIO LONG-TERM CARE HOMES

Central LHIN continues to play a leading role in advancing continuous quality improvement by working with stakeholders to implement the *Excellent Care for All Act*, which puts patients first by improving the quality and value of the patient experience through the application of evidence-based health care.



An example of this is Central LHIN's participation in Residents First – a program sponsored by the Ontario Health Quality Council that supports long-term care homes in Ontario in providing an environment for their residents that enhances their quality of life.

The initiative also facilitates comprehensive and lasting change by strengthening the long-term care sector's capacity for quality improvement. The program will kick-off in Central LHIN on November 30, 2010 with a leadership session featuring most long-term care homes in the Central LHIN.

More information (including a downloadable brochure) is available online at www.centrallhin.on.ca or www.residents-first.ca, or by email to info@residentsfirst.ca.

NEW ON OUR WEBSITE...*En Français SVP!*

Just over three per cent of Central LHIN residents – about 56,000 people – are considered Francophone under the new provincial definition.

Our LHIN engages with our Francophone community to receive input into the priorities of our new Integrated Health Service Plan (IHSP) 2010-2103, to better understand the needs of our Francophone population, and to continue our ongoing dialogue around how to achieve a shared vision for French language services in the Central LHIN.

We also partner with our health service providers to plan and implement strategies that encourage collaboration across the health sectors to enhance linguistically sensitive programs and services and expand access to French language health services.

Central LHIN continues to work to increase the availability of key information in French. Most recently, we've developed a new French Language Health Services page *en Français*, on our website. Find [Renseignements sur les services en français](#) under "Get Connected with Care."

IMPROVING ACCESS TO PRIMARY CARE

Family physicians and other primary care providers are the front line of the health system – contributing to the continuity of care by caring for patients and their families closer to home and in their own communities.

Central LHIN is collaborating with primary care providers to leverage resources, programs and services to enhance access to primary care for residents in our communities, with specific focus on areas that may be underserved or where there may be higher-than-average incidence of conditions such as diabetes.

Here are three recent initiatives focused on improving access to primary care in the Central LHIN:

- Establishment of three new Family Health Teams (in Don Mills, Humber River and Woodbridge) – bringing the total number of teams in our LHIN to 11
- Announcement of our first-ever Nurse Practitioner-Led Clinics – one in Georgina and one in North York West
- Engagement through an interdisciplinary Primary Care Action Group to support the development of a primary care system vision for the LHIN, and to support progress on our IHSP priorities

Learn more about this key IHSP enabler on our [website](#).

QUALITY SERIES HELPS PROVIDERS NETWORK AND LEARN

To encourage innovation, promote quality and support sharing of best practices, Central LHIN hosts regular knowledge transfer sessions.

Sessions are offered in a variety of formats including breakfast meetings, teleconferences and webinars. A broad range of knowledgeable presenters and guests create a vibrant setting for health care professionals to network and learn from each other.

Upcoming sessions:

- **Community Support Sector Best Practices** – November 4
- **Health Equity** – November 18
- **A Schizophrenia Wellness Program** – December 2

Visit the [Breakfast of Champions Quality Series](#) page on our website for locations and registration information.

Get your LHIN news faster...with email WEB ALERTS

Signing up is easy! Just visit www.centrallhin.on.ca and click on **My Page**. Then choose to receive email web alerts when information like board meeting materials, newsclips and newsletters is updated on Central LHIN's website.

Lower emergency department wait times in the Central LHIN

Residents in the Central LHIN are receiving emergency care faster thanks to continuous improvements in our emergency department wait times.



According to data available as of June, Central LHIN hospitals achieved the third best rate of improvement in the province for wait times for all patients who are treated and then discharged from the emergency department.

This is particularly good news given that Central LHIN hospitals have been faced with the highest growth in the number of very sick people that are showing up in our emergency departments needing emergency care.

“Reducing the time people spend waiting in the emergency department is both a provincial and a Central LHIN priority so we are excited by these positive and progressive results,” said Kim Baker, Chief Executive Officer, Central LHIN. “Through our Aging at Home investments and focus on collaborative partnerships across sectors and across the continuum of care, we look forward to this trend continuing.”

Hospitals in the Central LHIN also achieved this improvement without losing focus on patient safety and quality of care. The number of people discharged from the emergency department that need to return within seven days – a key indicator of the appropriateness of the care received – continues to be the lowest in the province.

“Our hospitals are seeing positive outcomes through initiatives such as the placement of case managers in our emergency departments, improved triage processes and extended diagnostic imaging hours, just to name a few,” said Dr. Rakesh Kumar, Central LHIN’s Emergency Department Lead. “These improvements speak to the ongoing efforts of our health service providers to ensure residents in our LHIN are receiving the care they need, more quickly.”

Community programs and services that reduce the time seniors spend in acute care beds waiting for alternate levels of care such as rehabilitation, long-term care or home care, also play a key role in reducing emergency department wait times.

“Patients deserve timely, high-quality care when sudden

injury or illness takes them to the emergency department, said Mario Sergio, MPP, York West. “By reducing wait times, providing faster service and improving performance and access to alternate levels of care within the community, we increase patient satisfaction and enhance confidence in Ontario’s health care system. The significant reduction in wait times is exceptional news for our community,” he added.

Pay-for-Results Funding

Six of Central LHIN’s hospitals and the Central Community Care Access Centre (CCAC) have received just over \$6 million through the provincial Pay-for-Results program to continue implementing initiatives to help reduce emergency department wait times.

Over the last two years, participating Central LHIN hospitals reduced emergency department wait times by 20 per cent thanks to Pay-for-Results funding.

Some of the initiatives implemented in the Central LHIN include enhanced triage, increased diagnostic hours, and rapid assessment zones.

In addition, five Central LHIN hospitals have patient flow facilitators who help to ensure safe, quality care and timely discharges by supporting the timely assessment and treatment of in-patients requiring acute care, assisting with the transition of emergency department patients requiring admission to an in-patient bed, and linking medically stable emergency department patients to appropriate community services.

Pay-for-Results funding helps hospitals meet specific reduction targets. This year, 71 Ontario hospitals have committed to treat more patients within the targets, aiming to improve performance by 15 per cent over the year.

“Emergency department wait times are improving in our LHIN,” said Central LHIN’s Chief Executive Officer Kim Baker. “Continued funding for the Pay-for-Results incentive program will enable our hospitals and our CCAC to keep up the good work by providing them with the resources they need to build on their current achievements and successes.”

Read more about our [emergency department and alternate level of care priority](http://www.centrallhin.on.ca) at www.centrallhin.on.ca

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