

North Simcoe Muskoka LHIN

LHINformer

2008 NSM LHIN Calendar in Review

January

- The alignment of Ministry of Health and Long-Term Care, Long-Term Care Service Area Offices (SAO) with the LHIN boundaries is completed. Sheila Driscoll is appointed as the new NSM LHIN SAO Manager.
- On January 2, 2008, Dr. Mark Mensour joins the NSM LHIN in the newly-created role of Emergency Department (ED) Lead. The goal of this position is to improve wait times and the quality of emergency care locally and across the province.

February

- Marilynn (Lynn) Stevenson, Board member since 2006, is appointed as Board Vice-Chair.
- Hospital-Service Accountability Agreement (H-SAA) meetings take place between the LHIN and each of the LHIN hospitals. This is a first for the LHINs, as in the past agreements were negotiated between the Ministry and hospitals.
- The Board supports the voluntary integration initiative between Orillia Soldiers' Memorial Hospital and Muskoka Algonquin Healthcare for the position of Integrated Vice-President, Human Resources and Organization Development.
- The Board supports the voluntary integration initiative of Royal Victoria Hospital in participating in the Central Ontario Healthcare Procurement Alliance (COPHA). The intent is to establish a shared services organization for the purpose of procurement, invoice payment and contract management of medical/surgical supplies and contracted services.

March

- Ministry and LHINs undergo an Effectiveness Review. The purpose of the review is to compare what was to be implemented against the current state, processes and mechanisms that are in place and the outputs generated. It is not meant to be an evaluation of health outcomes or the relationship among LHINs and health service providers.
- The LHIN Board of Directors approves the integrated implementation of a centralized access to complex continuing care (CCC) beds throughout NSM LHIN.

April

- Dr. Alan Hudson, Lead, Access to Services and Wait Time Strategy visits the NSM LHIN to discuss



the status of the Ontario Wait Time Strategy within the NSM LHIN and throughout Ontario.

- Erica Curtis, long-time Barrie resident, joins the NSM LHIN Board of Directors.
- NSM LHIN Health Professionals Advisory Committee (HPAC) holds their inaugural meeting. Team building, providing background information on LHIN planning, setting context for meeting structure and the group's future work are the focus of this successful first meeting.
- NSM LHIN staff members meet the members of the newly-formed Aboriginal Secretariat, kicking off the next big step in our relationship.
- The LHIN Board of Directors meeting is held in Collingwood. The pre-Board education session entitled "Community Action Now for a Healthier Future" addresses how the LHIN plans to proceed with development of a local integrated health system within the Central West Simcoe sub-planning area of the LHIN.

May

- The NSM LHIN office holds its 3rd Annual Open House, well attended by the community.
- On May 14th the Ontario Medical Association (OMA) - LHIN Physician Engagement event is held at Horseshoe Resort. The objectives of this successful event are to understand the interdependencies between physicians, their patients and the LHIN, to seek input on the principles, processes and actions that will build an effective and inclusive partnership between physicians and the LHIN and to give the physicians an opportunity to learn about the NSM LHIN.
- May 16th sees the ground-breaking ceremony at Hospice House. Planning for this has been ongoing since 2004 and this is an emotional event for staff and friends of Hospice Simcoe.
- Lynda Coad is re-appointed to the LHIN Board of Directors. This will be Ms. Coad's second term as a member of the Board.

June

- Gail Paech, Assistant Deputy Minister, eHealth Program, MOHLTC visits the NSM LHIN to present the Ontario Renewed eHealth Strategy.
- Ruben Rosen is re-appointed as Chair of the NSM LHIN Board of Directors. This will be Mr. Rosen's second term as a member and Chair of the Board.
- NSM LHIN receives funding from the Ministry of Health and Long-Term Care for 18 seniors' health service proposals under the Aging at Home program. These first-year initiatives will provide health care services for NSM LHIN seniors and their caregivers.
- NSM LHIN receives six Dodge Caravans purchased by the Ministry. It is estimated these vans will provide 8,328 rides to appointments for NSM seniors this year.
- The LHIN's Annual Report 2007-08 is submitted to the Ministry for future tabling in the Legislature

August

- Dr. Gary Smith, Chief of Paediatric and Neonatal Medicine at Orillia Soldiers' Memorial Hospital is honoured with the Canadian Paediatric Society's Certificate of Merit award, a first for the province of Ontario. Dr. Smith is completing a Masters of Health Science degree with the University of Toronto and is working on his practicum experience with the NSM LHIN.

September

- The NSM LHIN Board of Directors holds its annual retreat on September 15th. The goal of the retreat is to identify a small number of key priorities that will enable the NSM LHIN to effectively focus its efforts for the next Integrated Health Service Plan (IHSP) and to lead demonstrated improvement in the health status of the residents of the NSM LHIN. Cathy Fooks, Executive Director and Steven Lewis, Research Analyst from the Change Foundation attend the Retreat to assist the LHIN Board.
- The Board supports the voluntary integration of Muskoka Parry Sound Community Mental Health

Service and Addictions Outreach Muskoka Parry Sound.

- The Board supports the facilitated integration of Consumer Survivor Project of Simcoe County (My Friends' Place) and Krasman Centre for the purpose of enhancing the consumer survivor services in the Alliston area.

October

- On October 22nd, Dr. Bernard Lawless, Provincial Lead, Critical Care and Trauma, visits the LHIN to provide a brief overview of Ontario's Critical Care Strategy. Dr. Lawless informs members of the North Simcoe Muskoka Critical Care Strategy Committee, led by Dr. Giulio DiDiodato, and hospital senior staff representatives of the accomplishments made in our LHIN to date and proposed next major steps.
- The Board supports the integration of Penetanguishene General Hospital and Huronia District Hospital.

November

- The Board supports a voluntary integration between Canadian Red Cross Simcoe Muskoka (CRCSM) and Muskoka Seniors Home Assistance (MSHA). CRCSM, the lead agency for five of the six Aging at Home vans, allocates two of the vans to MSHA for use in transporting seniors to medically-related appointments in Muskoka.
- The Board supports a voluntary integration between Orillia Soldiers' Memorial Hospital and Muskoka Algonquin Healthcare for an Integrated Director of Information Systems.

December

- The LHIN bids farewell to Jean Trimnell, inaugural CEO of the NSM LHIN. A reception is held in her honour on December 15th which allows our Health Service Providers and the community to wish Jean well in her retirement. Jill Tettmann, Senior Director, Planning, Integration and Community Engagement will fill the role as CEO (Acting) until a new CEO is hired by the Board.
- December 1st sees the amalgamation of Huronia District Hospital and Penetanguishene General Hospital into one secular organization.
- December 15th sees the divestment of the provincially-run Mental Health Centre Penetanguishene (MHCP) to the new board of Mental Health Centre Penetanguishene Corporation. This move includes transfer of both the provincial maximum secure forensic and regional mental health programs and services to the public hospital system.

Aboriginal Health Conference - A Great Success!

The Aboriginal Health Conference entitled "Enhancing Aboriginal Health Status, Priorities and Plans for the Future", held November 12 and 13, 2008 at the Fern Resort, was a great success for the Aboriginal Health Circle (AHC). The conference helped promote the work of the AHC, thereby informing the local health sector of the role that the AHC can play in improving Aboriginal health status in the region. The conference also provided an update on relevant health initiatives that are occurring at the regional and provincial levels. Most importantly, however, the conference served to gain extensive input into the Aboriginal Health Service Plan at this critical stage in its development.



Some specific highlights of the conference's success include:

- A total of 137 delegates attended, including representatives from 4 different provincial ministries, 6 different First Nations, 2 hospitals, 3 Family Health Teams, and a large number of both Aboriginal and mainstream community support service providers.
- A total of 8 workshops were held over the course of the conference and 5 working groups were facilitated on the second day, which offered conference participants the opportunity to feed into the developing Aboriginal Health Service Plan.



The excellent partnership that has been developed between NSM LHIN and the AHC was highlighted in a variety of capacities, including, but not limited to: opening remarks from board member, Lynn Stevenson; a presentation on NSM LHIN and panel participation by Jill Tettmann; a presentation on the eHealth Strategy by Rodney Burns; facilitation of workshops and small group work by Alison Braun; a presentation on CHIGAMIK Community Health Centre by co-chairs Nena LaCaille and Ernie Vaillancourt.

The graphic recording of the keynote address, shown below, can be accessed in a larger version by



clicking [here](#). For more information on the work of the Aboriginal Health Circle, you can access their new website by clicking [here](#).

For more information on Aboriginal health initiatives at the NSM LHIN, please contact Alison Braun at 705.325.7750 ext. 223 or by e-mail at alison.braun@lhins.on.ca.

Highlights of New Initiatives Underway in NSM LHIN Through the Year One Aging at Home Strategy

The Aging at Home Strategy is an investment of \$702 million across Ontario that will help seniors live healthy, independent lives in their own homes. For the three years (2008 - 2011), the NSM LHIN will receive over \$23 million to support seniors in our region.

Home At Last Program

The **Home At Last (HAL)** program helps make the transition from hospital to home safely, smoothly and comfortably. The program provides transportation and the services of a HAL Attendant. Once at home the HAL Attendant will provide assistance, that may include meal preparation, laundry, light housekeeping; pick up medications, groceries and/or medical supplies. The HAL Attendant will also provide the client with a package of community support services for immediate or future needs. Next day the HAL supervisor will follow up with the client to ensure his/her immediate needs are being taken care of and to refer to community support services if required.

Home At Last is available to NSM residents over 65 years of age who are able to direct their own care, able to transfer with one person assist and require the “settle in component” of the program. Settle in component refers to help getting home from the hospital - transportation, grocery purchases, medication purchases, cleaning and meal prep for the first 24 to 72 hours following hospital discharge.

Referrals can be self directed but mainly they are generated from the hospital. Referrals are faxed to the VON Simcoe County (705) 737-1903. Contact information: Mary Camley (705) 737-5044 ext 229. There is no charge for this service.

Mobile Seating and Mobility Clinic

The purpose of the ***Mobile Seating and Mobility Clinic*** is to provide mobility equipment prescriptions to senior living in the North Simcoe Muskoka LHIN at no cost to the client. A mobile team of Therapists and equipment vendors will host clinics within long-term care homes throughout the NSM LHIN area. Requests for an assessment can be initiated by anyone.

The person to be assessed must meet the following criteria:

- Senior living in the NSM LHIN area
- Valid OHIP card
- Assessed for a walker / wheelchair

Referrals can be made to Midland Physiotherapy, Nicole Robinson, P: 705-739-6881 ext 425 or email: n.robison@live.ca

The Mobile Seating and Mobility Clinic DOES NOT accept referrals for power mobility, scooters, custom fabricated seating or tilt wheelchairs (CAT 5).

Accessibility Resource Centre

The ***Accessibility Resource Centre*** has been established for senior residents of Simcoe Muskoka. The goal of this Centre is to enable seniors and others facing mobility limitations and other impairments, to remain safely in their own homes as they recover from illness, or as they age.

The new Centre will assist in finding solutions to meet accessible home renovation, vehicle modification and/or assistive device needs. This inclusive public service provides knowledgeable & experienced staff and volunteers who can educate and assist the public with identifying resources available to help them, as well as on the various funding assistance available, both provincial and local. With only 3 operational months, we have seen growth in the contact volume and interest from service clubs and community organizations to utilize the expertise in their benevolent decisions. Other health care providers have also been referring clients to this center for “hands on” guidance and support.

Feedback comments such as these below are both encouraging and affirming of our service:

“Thanks so much for those suggestions. I had no idea what to do or where to go before I called you”.

“It was great to talk to someone who understood my issues and who stuck with me to sort things through.”

The Accessibility Resource Centre can be reached through S.C.A.P.D. at 44 Cedar Point Dr in Barrie, by telephone 705-737-3263 x 239, arc@scapd.on.ca or at www.scapd.on.ca. Our partner organization, The Friends at 27 Forest St., Parry Sound, can also be called at 705-788-1429 x 22.

Integrated Intensive Case Management (IICM)

The **IICM** program is an integrated service delivery initiative that targets frail elders providing comprehensive assessment and rapid access to specialized services. The program provides intensive case management emphasizing links with primary care while encouraging cross-sectoral care planning. The goal is to prevent unnecessary hospital admissions/ER visits and reduce acute care length of stay.

At risk seniors (at risk for hospitalization or early admission to LTC) will be referred to the NSM CCAC IICM program on recommendations by the Algonquin Family Health Team's Geriatric Care Team and with the consent of the client.

Karen Taillefer 705-726-0039 X2303 / Fax: 705-792-6294 or Erin Cunningham/Lead Client Care Coordinator 705-726-0039 x 3117

Re-ACT[®] - Remote Access to Care Technology

New technology helps seniors with chronic diseases monitor their health.

Seniors of North Simcoe Muskoka who are living with chronic diseases now have a new, easy way to monitor their vital signs, providing the comfort of knowing all is well or giving an early warning sign when further action is required.

Re-ACT[®] is as easy as a touch tone telephone. A wireless user-friendly "tablet" utilizes modern technology to measure up to 5 vital signs and transmits the results to a remote nursing monitoring centre in Barrie. Here, the results are tracked and the nurse facilitates interventions as appropriate. This could include a call to the user to review the information, a call to their family doctor or specialist, or a visit to assess the needs for additional care. Re-ACT[®] also provides customized diet, exercise plans and information videos.

The goal of Re-ACT[®] is to help those living with a chronic disease, such as diabetes, hypertension, post-stroke, arthritis, Parkinson's, cancer etc. to live a better quality of life by learning to self-manage their health problems. Some of the measurements that it can monitor are:

- Blood pressure
- Pulse
- Blood sugar
- Weight
- Oxygen level

Re-ACT[®] is a partnership between the North Simcoe Muskoka Community Care Access Centre, We Care Home Health Services and Healthanywhere. The program is an Aging at Home initiative funded through the North Simcoe Muskoka Local Health Integration Network (NSM LHIN).

Clients on Re-ACT[®] are telling us that they feel more motivated to care for themselves and more secure knowing that a nurse is "keeping an eye on them", even if they are living in the most remote corners of the region.

Client safety and independence is one of the benefits of the program. In addition, the monitoring function has been shown to decrease the number of unexpected ER visits and hospital admissions for people using the system.

“We are excited to be part of this partnership”, said John Schram, President and CEO of We Care Health Services. “It demonstrates how government and industry can work together to provide innovative, cost saving solutions to the challenges health care is facing today.”

Acceptance to Re-ACT[®] is based on your health care needs and not on your financial situation. There are no fees or costs to residents of NSM.

To make a referral or for more information please contact Florann Shaw, Director of We Care Home Health Services, Barrie at 705-734-2235 or 800-842-3757.

Navigation and Home Support Services to Deaf and Hard of Hearing Seniors in Muskoka

In October 2008, Deaf Access Simcoe Muskoka (DASM) and the Canadian Hearing Society (CHS) co-located in Bracebridge to offer part-time support to deaf and hard of hearing seniors throughout Muskoka. The program is modeled on our Barrie collaboration, offering seamless programming to all deaf and hard of hearing seniors and their families.

Hearing loss and deafness can be a critical barrier to understanding. Communication is imperative to quality of life, inclusion, self determination and independence. Our program is designed to support deaf, deafened and hard of hearing people stay in their community longer.

Our staff is fluent in sign language and are experts in technical devices related to hearing loss. The Bracebridge office houses the most complete display of technical devices in all of Muskoka. Seniors, caregivers, community partners are invited to tour the display and borrow some of the devices.

The program is being well received and is a positive enhancement to existing seniors programming and services in the area.

Anyone can make a referral to our team by contacting Sara Clipsham, the Hearing care Counsellor or Christine Cox, the general Support Service Counsellor located at 175 Manitoba Street, Bracebridge (open Tuesdays and Wednesdays) or by calling Voice- (705) 645-8882, TTY- (705) 645-6855 or toll free 1-877-840-8222.

First Link™

An innovative approach to linking individuals diagnosed with Alzheimer's disease or a related dementia and their caregivers to a community of coordinated learning, services and support.

The **First Link™** program is an innovative health care initiative that has the potential to significantly impact the quality of life of individuals



living with Alzheimer's disease or a related dementia (ADRD) and their family members. First Link™ is a direct referral and early intervention program that links the person with ADRD and their family members/caregivers to coordinated learning, services and support throughout Simcoe County and Muskoka from the point of diagnosis and through the continuum of the disease.

The collaborative efforts of the Alzheimer Societies of Greater Simcoe County, Muskoka and North East Simcoe County secured funding from the North Simcoe Muskoka Local Health Integration Network for this valuable program through Year One of the Aging at Home Strategy. The program was launched in January 2009 in conjunction with the Alzheimer Awareness Month campaign.

First Link™ is a best practice initiative that is raising the benchmark for the delivery of services by Alzheimer Societies across the region. The *Progressive Learning Series* for persons with ADRD and their families will be presented as a standard educational program in this region. The Alzheimer Society chapters have also increased their capacity for the delivery of supportive counselling services. Referrals can be made by physicians, allied health professionals, and community service providers; self referrals are also accepted.

Contact information: To learn more about the First Link™ program please contact the First Link Coordinator, Mary Perry-White 1-866-971-2462, E-mail: firstlink@csolve.net

Regional Transportation Program Initiated



NSM LHIN-funded transportation service providers came together in January 2009 for the first meeting about the development of a Regional Transportation Program. NSM LHIN funded transportation services include; Canadian Red Cross, Helping Hands, Muskoka Seniors, Barrie and Area

Native Advisory Circle. Using six vans the Ministry of Health and Long-Term Care funded in 2008-09 and Year One Aging at Home funding, the group is assessing the challenges of providing adequate transportation to the residents of our LHIN. A key priority will be to determine ways to increase accessibility to transportation. Access to appropriate transportation has been shown to be a key determinant of health for all ages but significantly so for seniors. In the last year NSM LHIN has experienced:

- a 20% increase in the client age group of 90+ years,
- a 6-7% increase in clients' requests for transportation to 'day-out' programs
- limited resources to provide transportation for social or personal needs, as resources are used primarily for medical appointments, and
- demand for accessible vehicles to transport vulnerable clients to health services both within and outside of the NSM boundaries.

Transportation to medical appointments outside of the NSM LHIN remains a priority issue. Often, people with complex disabilities need to rely on family to travel to Toronto for medical appointments. While Canadian Red Cross Simcoe is able to assist with some transportation requests, they are often unable to meet the needs of individuals in the Muskoka region particularly those with limited mobility.

By working together, LHIN-funded transportation service providers will have the opportunity to begin to develop solutions to these issues, and then to join the larger community of transportation providers to work together to better meet the transportation needs of NSM residents. For more information on the Regional Transportation program contact Lynn Huizer at lynn.huizer@lhins.on.ca or by phone at 705.326.7750 ext 231.

NSM LHIN Balance of Care (BoC) Project

As part of its Aging at Home strategy, the North Simcoe Muskoka Local Health Integration Network (NSM LHIN) is implementing a Supportive Living initiative in 2009/10. The goal is to allow a greater number of seniors to age successfully in their own home. The outcomes of this initiative will be to provide more home and community care options to seniors rather than hospital or institutional care.

As a first step in providing further home and community care options, the NSM LHIN has teamed up with key partners in NSM such as Community Support Service agencies, NSM Community Care Access Centre (CCAC), Hospitals, Long Term Care Homes, Supportive Housing and physicians to better understand the specific needs of people who are on Long-Term Care home wait lists and who could be provided with more appropriate care in their homes.

The Balance of Care (BoC) is a policy planning tool which seeks to set evidence-based benchmarks for the most appropriate mix of community-based and institutional resources at the local level needed to support an aging population.

The strength of the BoC is that it integrates the real life knowledge and insights of experienced decision-makers and front-line case managers who understand needs at the local level, as well as local capacity to meet needs. BoC projects convene panels of local experts from across the care continuum (including community supports, CCACs, supportive housing, community health, residential LTC, and hospitals) to review the needs of seniors and construct care packages that would allow them to remain as independently as possible in the community.



The Project will be carried out over the months of February and March with a final report due April 15, 2009. For more information on BoC contact Lynn Huizer at lynn.huizer@lhins.on.ca or by phone at 705.326.7750 ext 231.

Emergency Room / Alternate Level of Care

North Simcoe Muskoka LHIN's Emergency Room / Alternate Level of Care Plan (ER/ALC) was submitted to the Ministry of Health and Long-Term Care (Ministry) on December 16, 2008. A presentation of the Plan was made to staff of the Ministry on January 8, 2009.

The Plan outlines strategies for:

- reducing the number of visits to emergency rooms
- reducing alternate level of care days in the hospital
- enabling seniors to continue living in their homes;
- better management of chronic diseases, such as diabetes;
- more home care; and
- improving community-based mental health and addiction treatment.

Currently, ER/ALC Leads are being hired by LHINs to guide plans to achieve common goals across the province.

We are pleased to announce that Brenda MacPherson, Senior Director Strategic Planning and Integration

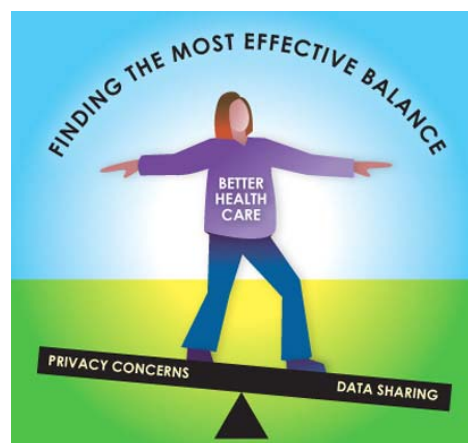
with the North Simcoe Muskoka CCAC has been seconded to lead this initiative over the next three months.

eHealth and NSM LHIN

Approximately four years ago, the Government of Ontario began to transform the province's health system to become the foundation for a client-focused, results-driven, integrated and sustainable delivery system of health services.

The 14 Local Health Integration Networks (LHINs), Ontario's Wait Time Strategy, and Family Health Teams, and the Ontario Network for eHealth represent some of the initial building blocks that are now in place and the foundation to continue the transformation process.

The government will continue to focus on reducing wait times, with an emphasis on hospital emergency departments, and improving access to family health care over the next four years. Both the Wait Time Strategy and the Family Health priorities are supported by the LHINs, eHealth, Information Management and a provincial Equity Policy.



In May 2008, the Government of Ontario approved a provincial eHealth Strategy. The Strategy is to develop a patient-focused, secure, and private electronic system that will change the way Ontarians receive care. eHealth will drive transformation of Ontario's health care system and work towards the creation of an electronic health record for all Ontarians by 2015. eHealth will also enable the government to meet its commitment to other key priorities such as supporting patients aging at home, prevention and management of diabetes and other chronic diseases.

An initial deliverable of the eHealth Strategy and the government's **Diabetes Strategy** in 2009 is an online registry to support people living with diabetes. The registry will serve as an access point for electronic tools that will help people with diabetes and their providers better manage their care. Other initial deliverables include an **eHealth Portal** which will bring together an individual's health information from various clinical systems and provide a secure single access point for up-to-date information such as lab test results, drug history and diagnostic imaging reports. **ePrescribing** will also be introduced through two pilot projects linking the community physicians and retail pharmacists. Georgian Bay Family Health Team (GBFHT) in Collingwood has been chosen by the province as one of the two provincial pilot projects. Electronic prescribing of medications has demonstrated improved patient safety through reduction of medication errors and adverse drug reactions. The experiences and lessons learned through the demonstration projects will inform the provincial Drug information Strategy which will include a province-wide e-prescribing capability.

When fully in place, all Ontarians will have an individual electronic health record (EHR) with their complete, current, personal health history available to authorized health care providers anywhere across the system. This will enable the right care at the right time in the right setting and ultimately improve the overall health status of our communities.