

exchange

The South West LHIN Integrated Health Service Plan is launched

THE SOUTH WEST LHIN'S Integrated Health Service Plan (IHSP) was finalized and shared with the Minister of Health and Long-Term Care in late October.

The Plan, one of 14 submitted by LHINs across Ontario, outlines strategic priorities for the South West over the next three years. Based on extensive engagement with providers, consumers, community leaders and the public, it is a bold vision for the future of health care, tailored to the unique environment and needs of our area.

To achieve integration, the South West LHIN's strategic priorities span traditional organization and sector boundaries, foster innovative, collaborative approaches to service delivery, support and shared accountability for health outcomes. "Integration will ultimately produce a more efficient health care system," says CEO Tony Woolgar. "More importantly, it will promote the well-being of individual patients, throughout their lifetimes and across the continuum of health services."

The Plan includes four "integration priorities," with detailed action plans

outlining in concrete terms what must be achieved over the next three years.

THE PRIORITIES ARE **Strengthening and** **Improving Primary Health Care**

The LHIN will support Family Health Teams and Community Health Centres, connect independent and small group family physicians with other primary health services, and place a special emphasis on people with mental health and addiction conditions.

Preventing and Managing **Chronic Illness**

The LHIN will develop and implement a comprehensive Chronic Disease Prevention and Management (CDPM) program to enhance wellness and ensure that patients are treated sooner and closer to home.

Building Linkages across the **Continuum: All Seniors and Adults** **with Complex Needs**

The LHIN will foster a seamless continuum of

care, provide rehabilitation across the continuum, and enhance Long-Term Care services.

Accessing the **Right Services, in the** **Right Place, at the** **Right Time, by the** **Right Provider**

The LHIN will focus on delivering the right mix

of services across our area including health services for children and youth and strong service delivery in rural communities. In addition, the plan includes two "enabling priorities" – e-Health and human resources. Finally the plan outlines a number of "implementation imperatives," such as transportation, health promotion, and education, research and best practice.

"We will be building on a strong tradition of collaboration and partnership in the South West," says Norm Gamble, Chair of the South West LHIN board. "The Plan provides us with a way to move forward together."

Interested in knowing more? Visit www.southwestlhinc.ca for a six-page summary or download the complete IHSP.





A Message from CEO Tony Woolgar

WELCOME TO THE THIRD ISSUE OF *EXCHANGE*,

which is intended to keep the people in the South West LHIN informed and engaged as we work together for improved access to local health care services and better health across our communities.

In this issue, you'll read more about the community engagement activities we have recently completed. I was really encouraged by the response we had to the invitation to attend local events in many communities across our area. It's evident that both providers and the public want to work with us to build an improved local health care delivery system.

On behalf of the Board and staff, I want to thank all of you who gave us your views and shared your experiences of the health care system. We were particularly pleased to hear so many positive comments about people's experiences of what works well. This confirms our view that health care providers are delivering excellent health care across the LHIN. Where there is best practice and excellence already, we want to ensure that this is shared and rolled out to all communities.

I can assure you that your input was invaluable to us as we finalized our first Integrated Health Service Plan. You can read more about the IHSP in this issue of *Exchange* and get the full text online.

Also in this issue, we introduce two new staff members, announce the appointment of Sandra Coleman as Executive Director of the new South West CCAC, and have a conversation with Dr. Michael Sharpe, intensivist and critical care lead for the South West LHIN.

Mission Critical

Under the leadership of Dr. Mike Sharpe, ICUs in the South West are working together to make critical care more accessible and better.

THE SARS CRISIS BROUGHT MANY HEALTH CARE ISSUES TO THE

forefront in Ontario, including the question of critical care capacity. "That's when we realized that we didn't really have any planning for surge capacity," says Dr. Michael Sharpe, Critical Care Lead for the South West LHIN. "We realize we had to make the system much better than it is."

Based on evaluation conducted over several years, the Ontario government announced its Critical Care Strategy in January 2006. The Strategy's goals are to improve access to critical care beds, improve the quality of critical care, and integrate the system so that it works more efficiently. There are seven key components: critical care response teams; critical care capacity; health human resources; system-level training; critical care information system; performance improvement collaborative; and ethical issues of access. "Part of the idea behind the strategy," Sharpe says "is to have individual physicians who understand the system and the nuances of their particular area help implement it."

All of the components are at various stages of implementation across the province. For example, London Health Sciences Centre recently introduced the Critical Care Response Team model, which brings together an intensivist, a critical care nurse and a respiratory technologist to provide specialized care for hospital in-patients who show sign of serious deterioration. "Early intervention has been shown to reduce mortality and ICU admissions," says Sharpe. In another initiative, training is being provided for health professionals in community hospitals who don't have specialized critical care training, so that they are prepared to assess and stabilize critically-ill patients.

Much remains to be done, and Sharpe and his colleagues across the province are excited by the opportunity to make real improvements to the system. Says Sharpe: "Finally we have physicians working at the bedside and going back to the Ministry with proposed solutions. The Ministry is listening and acting on our advice."

Taking the Pulse

The Community Engagement Process generated lots of excitement

"THIS IS AN OPPORTUNITY TO HAVE A VOICE
in our new health care system."

That's how Heather DeBruyn, Executive Director of the Elgin branch of the Canadian Mental Health Association, explained her involvement with the South West LHIN Community Engagement Process. DeBruyn attended two sessions – one for consumers of mental health services, and one for providers in Elgin County. "It's important that we have a voice so that the system is truly responsive to local needs," she adds.

Building on previous input, the South West LHIN developed a draft Integrated Health Service Plan outlining four key integration priorities and two enabling priorities. To gather input on the plan, we held a total of 68 engagements in 28 communities across the South West, involving a total of more than 2,500 people. The meetings, which ran from July to early October, were an opportunity for us to provide education about the LHIN and the IHSP, collect input from local communities, and build consensus and commitment. In addition to the general public and health care providers,

meetings were held with Aboriginal leaders and First Nations communities, mental health consumers, new Canadians, and representatives of the Francophone and Deaf communities.

"The VON is very committed to the LHIN and the integration process," said Gord Milak, Executive Director of VON Elgin/Middlesex at a provider event in St. Thomas. "This is about our future." Milak was impressed by the proposed priorities, which he described as "comprehensive," and "representative of the realities in our area." DeBruyn agrees. "These are changes we've been working toward for a long time," she says. "It builds on the work of the District Health Council. Ultimately we're moving to a more holistic approach to health that embraces everyone."

LHIN facilitator Marg McAllister was delighted with how the sessions went. "We heard some very passionate expressions about what's unique in each community," she says. "We also got a sense of validation for the integration priorities." Kelly Gillis, Senior Director, Planning, Integration and Community Engagement agrees

that the sessions were very valuable. "This was an opportunity for people to get excited about the potential for change. There was a lot of energy at every session."

In addition to the in-person sessions, the LHIN conducted a telephone poll with more than 600 randomly-selected participants, and an online poll involving some 200 people. In the telephone poll, 85% of participants said they were satisfied with the overall quality of health care in the South West and 60% were confident that the system could be sustained. Participants in both surveys expressed strong support for the draft integration priorities.

"We listened carefully to our communities," says LHIN Board Chair Norm Gamble, "and our plan is better for it. Many of the ideas we heard were incorporated into the final plan, which will guide us over the next three years."

"This is not the end of community engagement," says CEO Tony Woolgar. "It is only the beginning of an ongoing process. We will continue to respect and respond to the wisdom of our communities. We are truly working together for better health."

- In total, more than 3,500 people helped to shape the IHSP
- Nearly 2,000 people participated in 31 Public Forums
- More than 300 people participated in 10 Provider Forums and three Area Provider Table meetings
- Nearly 200 people participated in seven forums with mental health consumers
- Almost 800 people participated in telephone or web surveys



South West CCAC Executive Director appointed



Another important step has been taken on the road to aligning Community Care Access Centres within LHIN boundaries. The Executive Directors of the new organizations were appointed in late October. Sandra Coleman, Executive Director of the CCAC of London and Middlesex, will be Executive Director of the South West CCAC.

Sandra Coleman grew up on a farm in Huron County. She completed a BA in Business Administration at Wilfrid Laurier University and a law degree at the University of Western Ontario, placing at the top of her graduating class. After practicing at Lerner & Associates for 13 years, Coleman joined the CCAC as Director of Strategic Alliances and Legal Counsel. In 2002, she became Executive Director.

Under Coleman's leadership, the CCAC has implemented many innovative and integrative services, including the Advanced Home Care Team, the Emergency Department Team and the Early Ortho Program.

"With the new organization, we have an opportunity to create capacity to better serve our clients," says Coleman. "We will broaden the CCAC's mandate as a system navigator and realize the untapped potential of community care. This is a unique moment in the history of health care in Ontario and I am thrilled to be part of the transformation."

The South West CCAC will bring together the CCACs of Huron, Perth, Oxford, Elgin, London-Middlesex, and parts of Grey-Bruce and Haldimand-Norfolk, following the boundaries of the South West LHIN.

"Sandra is a strong leader who has already worked closely with the LHIN on several projects," says LHIN CEO Tony Woolgar. "I'm delighted that she will be at the helm of the new organization, which will be an important partner as we move forward with our integration priorities."

Sandra can be reached at sandra.coleman@sw.ccac-ont.ca

The South West LHIN welcomes two new staff members.

Mark Brintnell and **Julie Girard** have joined the South West LHIN team.



Mark is our new Performance Consultant. He previously worked as a Hospital Consultant and a Regional Planning Coordinator, and has provided project management and strategic direction to several local, regional and provincial initiatives focused on e-Health, primary care and Ontario's wait times strategy.



Julie brings to her role as Integration Consultant more than 20 years experience in a wide range of health care settings, including community service agencies, Long-Term Care homes and a District Health Council. For the past ten years, Julie has worked in the Southwest Regional Office of the Ministry of Health and Long-Term Care.

The South West LHIN is delighted to welcome Mark and Julie to the team, and looks forward to benefiting from their energy, creativity and commitment to the future of health care in our area.

Watch for the **next issue of Exchange in January**. We'll be profiling two of the South West's innovative care networks, which are models of regional integration. If you have comments or ideas for future issues please contact Kelly Gillis at 519-672-0445, ext. 206 or email kelly.gillis@lhins.on.ca

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