



September/October 2009

Aging at Home Update: Year 3 Process

The South West LHIN has just confirmed a new targeted process for Year 3 of the Aging at Home Strategy. Aging at Home is a three-year \$700 million strategy launched by the province of Ontario in 2007 and is designed to fund programs that help seniors stay healthy and live with independence by avoiding unnecessary long-term care placement and hospitalizations.

The process to develop and approve the initiatives for Year 3 will build on the comprehensive planning already done through the Integrated Health Service Plan, Priority Action Teams, the Best Level of Care and Quality Steering Committee and will also align with the directions emerging from the Health System Design Blueprint Project.

The Year 3 process will allocate approximately \$10 million to the following 6 priority areas:

1. Develop and implement an integrated and targeted model of care for high risk seniors
2. Develop and implement a coordinated system of care for seniors with behavioural issues
3. Enhance access to Chronic Disease Prevention and Management peer support, caregiver support and self-management tools
4. Enhance services and supports for Aboriginal Seniors
5. Enhance the capacity and coordination of transportation services
6. Create additional convalescent care beds in the central and south areas of the LHIN

Work groups are being established to create business plans for the first five priority areas identified above. For the sixth priority area, a call for expressions of interest will be released by the South West LHIN to seek partners interested in establishing convalescent care services.

The timelines for the business plan development process are as follows:

October 2009	AAH Year 3 Approach Document released, work groups appointed
December 11, 2009	Proposals received
December 14, 2009 – January 12, 2010	Best Level of Care and Quality Steering Committee to Review and make Recommendations

January 27, 2010

South West LHIN Board Approval

January 30, 2010

Submit detailed plans to Ministry of Health and Long-Term Care for review

Work also continues on those initiatives approved in Year 1 and Year 2 of the Strategy. A comprehensive performance management approach ensures that they are performing to plan and achieving intended results. Several programs, such as Safe at Home, are exceeding targets for numbers of clients served. Perhaps most importantly, as an overall measure of health system impact, the South West LHIN saw a 29% decline in the number of Alternate Level of Care days, or ALC days, in area hospitals between July 2008 and July 2009.

For more details on the Year 3 process [click here](#)

Aboriginal Health and the South West LHIN

A little over a year ago, Lisa Tabobondung took on the role of Aboriginal Health Lead (AHL) for the Erie St. Clair LHIN and the South West LHIN, in partnership with the Southwest Ontario Aboriginal Health Access Centre, to reach out to the aboriginal communities within the two LHINs to work on aboriginal health care issues and needs.

Lisa is a member of the Perry Island Wasauksing Anishinabek in Northern Ontario and brings to her role an extensive background as a former aboriginal health care liaison with hospitals in British Columbia. Lisa's current accountabilities include:

- serving as the lead and primary resource for planning and community engagement with Aboriginal people in the Erie St. Clair and South West LHINs.
- providing insights into and managing community issues and concerns, providing support to other LHIN program areas in identifying and implementing appropriate communication and community engagement methods with Aboriginal people.
- providing project management and strategic direction to the LHIN planning and community engagement groups and liaising with the Ministry of Health and Long-Term Care and Aboriginal groups on health issues.

"One of my primary goals is to facilitate a process to improve relations between the health care system and the Aboriginal Communities", said Lisa. "Improved health outcomes for the aboriginal communities are achievable if a good working partnership can be established."

Engagement with our Aboriginal communities is a critical component of the South West LHIN's overall community engagement activity. Last Spring, we brought together leaders and health care providers from the aboriginal communities in our LHIN. The following goals were identified at the spring session:

- Increase engagement with aboriginal communities
- Increase cultural competence across the system
- Effective service delivery
- Increase investment in aboriginal communities

Cultural competence is a learning continuum that begins with cultural awareness and moves through to cultural safety. The provision of culturally safe care involves lifelong learning and continuing competence. Cultural safety is the outcome of culturally competent care.

The South West LHIN has now established an Aboriginal Committee whose mandate is to review issues and concerns of the aboriginal communities and to work with the LHIN to seek resolutions. The committee is currently

developing a business case submission to address one of the key aging at home priorities of the South West LHIN – enhancing services and supports for Aboriginal Seniors.

The LHIN Board of Directors held its August 2009 meeting at Kiikeewannikaan Healing Lodge to further establish the relationship with the aboriginal community and enhance cultural awareness. More information can be found in the Board meeting article in this newsletter.

Significant Increase in Long-Term Care Homes. New Long-Term Care Homes in London and Area Will Bring New Capacity to the System

The first new long-term care homes in London since 2006 will open over the coming months providing significant new capacity to the long-term care home system, helping to improve access to care for individuals waiting for placement.

In total 608 new beds will open in the coming two years. 3 new homes are providing 416 new beds in total and are scheduled to open in 2009 and 2010 are

- 64 bed home in the Oneida Nation on the Thames, Southwold, just south west of London scheduled to take its first residents in December 2009
- 192 bed home “Village of Glendale Crossing” by Oakwood Retirement Communities near Wonderland and Southdale
- 160 bed home “Oakcrossing Road” by People Care Inc. near Sarnia Road and Hyde Park

The final phase of the long-term care bed expansion in London will be a 192 bed home, Henley Place Limited, that will open in south east London in the fall of 2011, bringing the total expansion of beds in London to 608.

Several times in 2008 and 2009, transfers were restricted to London hospitals from other facilities in the region because of a shortage of beds for new patients, a direct result of the inability to discharge patients who had finished their acute-care treatment, many of whom were waiting for long-term care home placement.

“This new capacity will have a real, positive and lasting impact on the system by helping ensure people have access to the service they need,” says Michael Barrett CEO of the South West LHIN. “London hospitals are the most severely impacted by alternate level of care pressures in the South West LHIN. These beds will help provide additional capacity that will work in concert with the other initiatives being put in place by the LHIN and health service providers to help move patients through the system, ensuring they get the right level of care.”

Some statistics about long-term care:

- Currently there are about 75,000 long-term care beds in Ontario with about 6800 in the South West LHIN
- The overall provincial wait list is about 25,000 and the wait list in the South West LHIN is about 1800 people.
- Approximately 150 people get placed every month in the South West LHIN
- The South West LHIN has an average of 81 days to placement beating the provincial average of 99 days and falling into the middle of the range for all LHINs. The shortest wait is 43 days in Central West LHIN and the longest is 143 days in the Champlain LHIN.
- The 608 new beds will bring London’s bed count to about 7400, very close to the provincial average of 100 beds per 1000 residents over the age of 75.

Retirement homes

In addition, the new capacity in the system also includes significant increases in retirement living. While not funded

by the government or the LHIN, retirement homes are an important part of the overall system and can be excellent options for elderly residents. In London, 300 new units have opened this year and over 200 more will open for occupancy in 2010/11. Across the LHIN there are several other new housing complexes in development as well, such as the Chartwell complex being built in Strathroy.

South West LHIN Concludes Successful Series of Community Sessions on Health Care

The South West LHIN has concluded a successful series of 17 community sessions across the South West in July and September to help shape the future of health care. The goals of the sessions were to:

- Share information about current trends and issues
- Listen to your ideas and concerns about the health care system
- Celebrate recent enhancements to the health care system
- Get feedback on proposed priority areas for improvements

The feedback will be incorporated into the South West LHIN's second Integrated Health Service Plan (IHSP) that will be in effect for 2010-2013.

The sessions were hosted by LHIN Board members and LHIN staff were on hand to make presentations, take questions and record community concerns, ideas and general feedback. At most sessions, to facilitate dialogue and allow smaller groups to engage on different issues in an organized manner, an "open house" style format that guided the public to move through a series of stations was used. At each station a LHIN staff member supported the discussion, however, at some venues crowd size or room layout prevented this and a more traditional "town hall" format was used.

Key themes

Overall the key themes that emerged were:

- There was general agreement by participants with the LHIN's proposed priorities.
- Consistent issues were raised around emergency services, health human resources, mental health and addictions, access to health information and access to services including transportation and navigating the system.
- The recognition and acknowledgement by the LHIN that it has many partners that contribute to the health of overall residents in the south west and that it needs to ensure it engages with those partners (e.g. physicians, ambulances, other ministries and municipalities). In this manner the LHIN can share the information it has received from its engagements with the appropriate agencies to help ensure a stronger public voice in all processes

Attendance by site:

Listowel	52
Woodstock	83
St. Thomas	89
Markdale	78
Strathroy	33
Hanover	99
Seaforth	88

South London	75
Owen Sound	129
Wingham	55
Tillsonburg	47
West Lorne	23
Lion's Head	115
Kincardine	445
North London	43
Goderich	31
Stratford	27
Total	1512

Completing the process

Additional activities related to the overall community engagement process for the Integrated Health Service Plan included an online questionnaire, telephone survey, targeted engagement with aboriginal partners, the francophone community, provider staff that work with new Canadians, and physicians.

The information, perspectives and feedback gathered from all these sources is being incorporated into the Integrated Health Service Plan that will be released at the end of November.

South West LHIN eHealth Strategy

Southwestern Ontario is considered a leader in eHealth initiatives due to its success in many initiatives, including the Picture Archives Communication System (PACS) and physician/hospital portals which allow family physicians to access lab and diagnostic imaging results and transcribed reports from the hospitals in Grey Bruce.

Recent provincial and local events focused on eHealth have provided the South West LHIN with the opportunity to reflect and reassess its direction and strategy on eHealth initiatives. As a result, the South West LHIN is moving forward to create a permanent Chief Information Officer (CIO) / eHealth Lead position that will work with our eHealth Steering Committee to lead our eHealth strategy. We believe that positioning this role within the LHIN office will ensure our eHealth strategy is comprehensive with no geographic or sector biases, and that it is more closely connected to overall LHIN priorities and strategies. We intend to have this position filled in the next 6 months.

In the interim period until the permanent CIO / eHealth Lead is hired, the South West LHIN has issued a Request for Services to retain an Interim CIO / eHealth Lead. This interim position will be responsible for leading the development of an eHealth Strategic Plan for the South West LHIN, putting a plan in place to hire the permanent CIO, hiring tactical leadership for existing eHealth projects, and creating a better reporting process for the South West LHIN Board of Directors.

Board Meeting at KiiKeeWanNiiKaan

The South West LHIN Board of Directors held its August 26 meeting at the KiiKeeWanNiiKaan South West Regional Healing Lodge on the Munsee-Delaware Nation southwest of London, Ontario (<http://www.swrhl.ca>)

KiiKeeWanNiiKaan, which means "Healing Lodge" in the Lenni Lenape language of the Munsee-Delaware people, provides residential and counseling and treatment services to families. Their vision statement reads: *"For the coming generations, KiiKeeWanNiiKaan will be a healing lodge for the recovery of Indigenous family values and structures. Through the provision of culturally-based human development programs concentrated on rebuilding and empowering*

individuals and families active on the Red Road, with a balanced lifestyle and a foundation of the original Teachings."
The Lodge provides residential counseling and crisis intervention services for southwestern Ontario.



The South West LHIN's Board recognizes the importance of moving its monthly meetings to different communities on a regular basis. This ensures that it has visibility in local communities and allows people and organizations the opportunity to attend. In the past the Board has had meetings in Tobermory, Kincardine, Port Rowan and Stratford, to name just a few, and the opportunity to meet and engage with our First Nations partners at KiiKeeWanNiiKaan continues that process.



At the meeting there was a presentation about the Lodge, its history and current programs. As well, Lisa Tabobondung, the Aboriginal Health Lead for the South West LHIN did a presentation on profiles of the aboriginal communities in the LHIN and their challenges, priorities and key steps moving forward. See the additional article for more information on aboriginal health initiatives



Bob Antone,
Executive Director



Peter Linklater,
On-Site Elder

HealthForceOntario: A Year in Review

As part of a provincial government strategy to increase the number and mix of health professionals in the province, HealthForceOntario Marketing and Recruitment Agency (HFO MRA) is playing a leading role in helping to ensure that goal is met. HFO MRA now has a presence at the community level with the introduction of the Community Partnership Program, an initiative designed to integrate and coordinate physician recruitment in the province.

In just over a year, the Community Partnership Program has made significant inroads in the South West LHIN in supporting physician recruitment and retention.

Community Partnership Coordinators work within LHIN areas, and support communities and employers to increase their “recruitment readiness” by providing information and education on effective recruitment tools, strategies and resources.

This past year the South West LHIN Community Partnership Coordinator, Laurie Roberts, has met and worked with physician recruiters, family health teams, hospitals, and community stakeholders and helped them access various HFO MRA programs and services, including;

- **HFOJobs**, www.healthforceontario.ca, a free online employment portal for physician and nurse postings across the province;
- **The Rural Family Medicine Locum Program (RFMLP)**, which is currently supporting 17 communities in the region. The RFMLP provides financial assistance to locum physicians who choose to work within one of our eligible communities.
- **The Emergency Department Coverage Demonstration Project (EDCDP)**, which draws from a pool of Emergency Department physicians who provide temporary ED coverage in six South West LHIN hospitals.
- **The Access Centre**, a one-stop shop that provides information, counseling, referrals, support and programs to internationally educated health professionals who are living in Ontario – primarily those pursuing licensing or registration in one of Ontario’s 23 regulated health professions

The Agency is also responsible for recruiting Physician Assistants (PAs). PAs have been identified as a valuable resource in reducing emergency room (ER) wait times and in improving patient access to primary care. Currently, PAs have been recruited to two hospitals in the South West and efforts continue to recruit for the additional vacancy. The positions in the South West LHIN exist in hospitals located in Wingham, Hanover and Goderich.

Regional Progress

To date the South West has experienced significant success recruiting family physicians and/or ER physicians. This success is largely attributed to the tireless work of our dedicated physician recruiters and the community/hospital committees that support physician recruitment and retention locally through various approaches, including the engagement of local youth into healthcare careers; identification of work/life balance opportunities for new families;

and initiatives that support spousal employment needs within communities.

New Family and/or Emergency Medicine physicians have made formal commitments to London, Ingersoll, Tillsonburg, St. Thomas, North Middlesex, Stratford, Kincardine, Walkerton, Owen Sound, Southampton, Saugeen First Nations, Lion's Head, and Clinton. Connections have been established between the South West CCAC Care Connectors in the region to ensure they can match as many registered patients in their program to a new physician in their community.

The Agency and regional recruitment focus has been on building direct linkages with medical schools in the province, working in collaboration with the International Medical Graduates (IMG's) and repatriating physicians from the United States.

We look forward to building on the great work and success that has already been achieved.

If you have any questions or would like to know more about the work of the HealthForceOntario Marketing and Recruitment Agency in the South West LHIN, please contact Laurie by e-mail at l.roberts@healthforceontario.ca, by phone at 226-268-7371 or visit the HealthForceOntario website at www.healthforceontario.ca.

Staff Announcement



Debra Woods joined the South West LHIN team on October 13th as the new Planning and Integration Lead focusing on Chronic Disease Prevention and Management and Primary Care. Debra has an MA and PhD in Applied Social Psychology and 16 years of practical experience in quality improvement methods, planning, and analysis in health, education and community settings. Most recently, Debra held the position of Quality Improvement Specialist at the Barrie and Community Family Health Team. Debra was also involved as a member of the planning team for the Flo Collaborative with the Ontario Health Performance Initiative (OHPI) with the Ministry of Health and Long-Term Care, as well as the Health Quality Council in Saskatchewan where she was part of the planning team for the Saskatchewan CDM Collaborative involving 150 family physicians.

As part of her role within the South West LHIN, Debra is now the Planning and Integration geographic lead for Grey Bruce.

