Integrated Health Service Plan and Blueprint Project - Update 3

Welcome to the third and final update on the South West Local Health Integration Network (LHIN) Integrated Health Service Plan (IHSP) and Health Services Blueprint Project. In this issue, we discuss our engagement activities over the months of August, September and October 2009, and our IHSP and Blueprint directions and next steps. In November, the South West LHIN Board of Directors received final drafts of the IHSP and Health Services Blueprint for discussion and approval.

Engagement

The South West LHIN is committed to building and maintaining a vibrant dialogue with its health care providers, partners and residents of the South West LHIN area. In our last update, we reported on the Blueprint symposiums with health care providers and partners as well as our A *Healthier Tomorrow* community sessions that began in July.

From August to October, the South West LHIN continued it's *A Healthier Tomorrow* series of public engagement activities that included six additional community sessions, a phone survey and a web survey. Targeted engagements also occurred with health care providers and immigrant, aboriginal and francophone populations. Please find a brief summary of these engagement activities in the next section. For a complete summary of each of the community engagement activities highlighted below, please visit our website to view *Appendix C – Community Engagement Summary in the 2010-2013 Draft IHSP* (available November 30, 2009).

The *A Healthier Tomorrow* community engagement series was designed for residents of the South West LHIN area to help shape the future of health care in the South West as the LHIN worked to update its three-year Integrated Health Service Plan (IHSP) for 2010-2013. The objectives of the series were to:

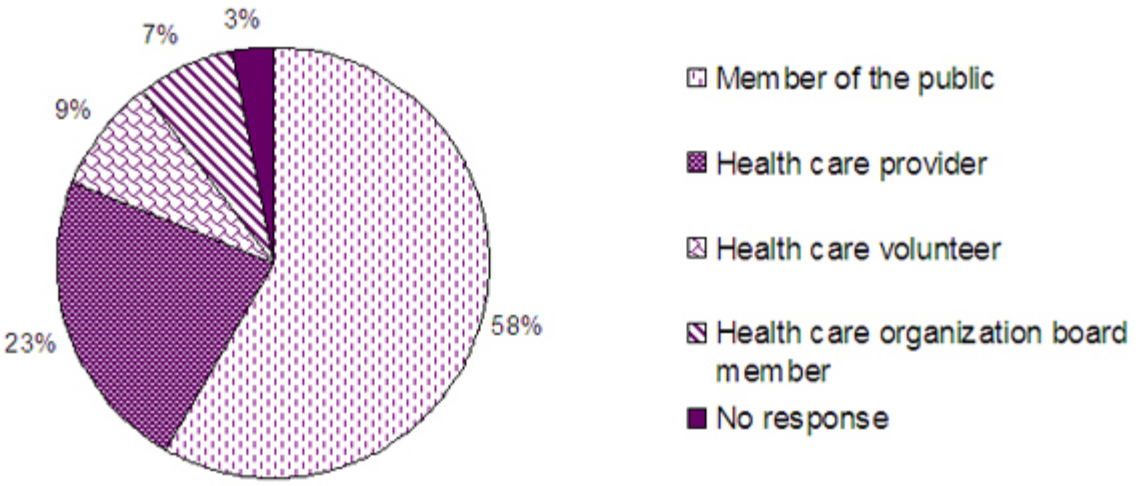
- **Share** information about current health trends and issues
- **Celebrate** recent enhancements to the health care system
- **Listen** to ideas and concerns from residents about the health care system
- **Receive** feedback from residents on proposed priority areas for improvements

The results of the series of community sessions have informed the 2010-2013 IHSP.

Public Engagement – Community Sessions

The LHIN held 17 community sessions across July and September 2009. In total, over 1,500 residents participated in the sessions. Participants also completed a *passport* to evaluate the session and provide input and feedback on what was shared by the LHIN. Figure 1 below illustrates the breakdown of who attended the community sessions.

Figure 1. Participants' Relationship to Health Care System



The South West LHIN community sessions generated valuable input and validation to the LHIN's priority setting for the next three years. We asked participants to tell us whether or not they thought the proposed priorities would make a difference to them or people that they know. The three key priority areas, with two sub-components each, include:

1. Improve Support for People Who Have or Who are At-Risk of Developing Chronic Disease
   a) Implement chronic disease prevention and management strategies with an initial focus on the provincial diabetes strategy and spread to other chronic illnesses where relevant
   b) Implement enabling technologies with an initial focus on the provincial diabetes registry and include other enabling technologies where relevant
2. Provide People with the Supports they Need in their Own Homes and Communities
   a) Provide appropriate, safe and effective care in the most appropriate setting with a focus on returning people back to their own homes and communities with supports
   b) Increase community care and in-home service capacity
3. Make Sure that Services are There for You When You Need Them
   a) Strengthen and improve access to and use of emergency services
   b) Improve access to and enhance capacity of mental health and addiction services

The majority of participants indicated support for the proposed priorities (72% of participants agreed). We also asked participants to tell us if there were other priorities that the LHIN should consider that would make a difference to them and the people they know. The main additional priorities included: addressing human resource shortages, health promotion, funding, system navigation, and transportation.

We also asked participants to respond to the following question: *Based on emerging population and health care trends, do you see the need to balance the delivery of health services locally with more specialized services further away?* 70% of participants said "yes" or "somewhat".

This specific input and feedback heard from communities, in addition to what we heard from health care providers and other community partners, has informed the 2010-2013 IHSP.

Public Engagement – Targeted Population Groups

In addition to the community sessions above, the South West LHIN targeted population groups: immigrant and aboriginal populations and the francophone community. A similar approach to the community sessions was used for these groups. A presentation was delivered that provided the groups with information about the LHIN, about the 2010-2013 IHSP process, and our proposed priorities for the next three years. Groups were then given an opportunity to discuss the priorities and provide feedback verbally and on an evaluation form similar to the *passport* used at the community sessions.

Overall, participants in the francophone session supported the proposed priorities while noting the need for access to health services in French and an increase in cultural and linguistic competency in health care.

At the session with representatives of newly immigrated individuals, barriers such as language, interpretation, translation and navigation were noted as issues that people in the immigrant communities often face when trying to access health care. A challenge for newcomers can also be in knowing that they need to access health care – even before navigation issues arise. Issues similar to those identified in other sessions such as human resource challenges were brought up by the group as well, but the primary focus was on the difficulties that arise from language and cultural barriers. Equitable access is needed, as well as cultural sensitivity.

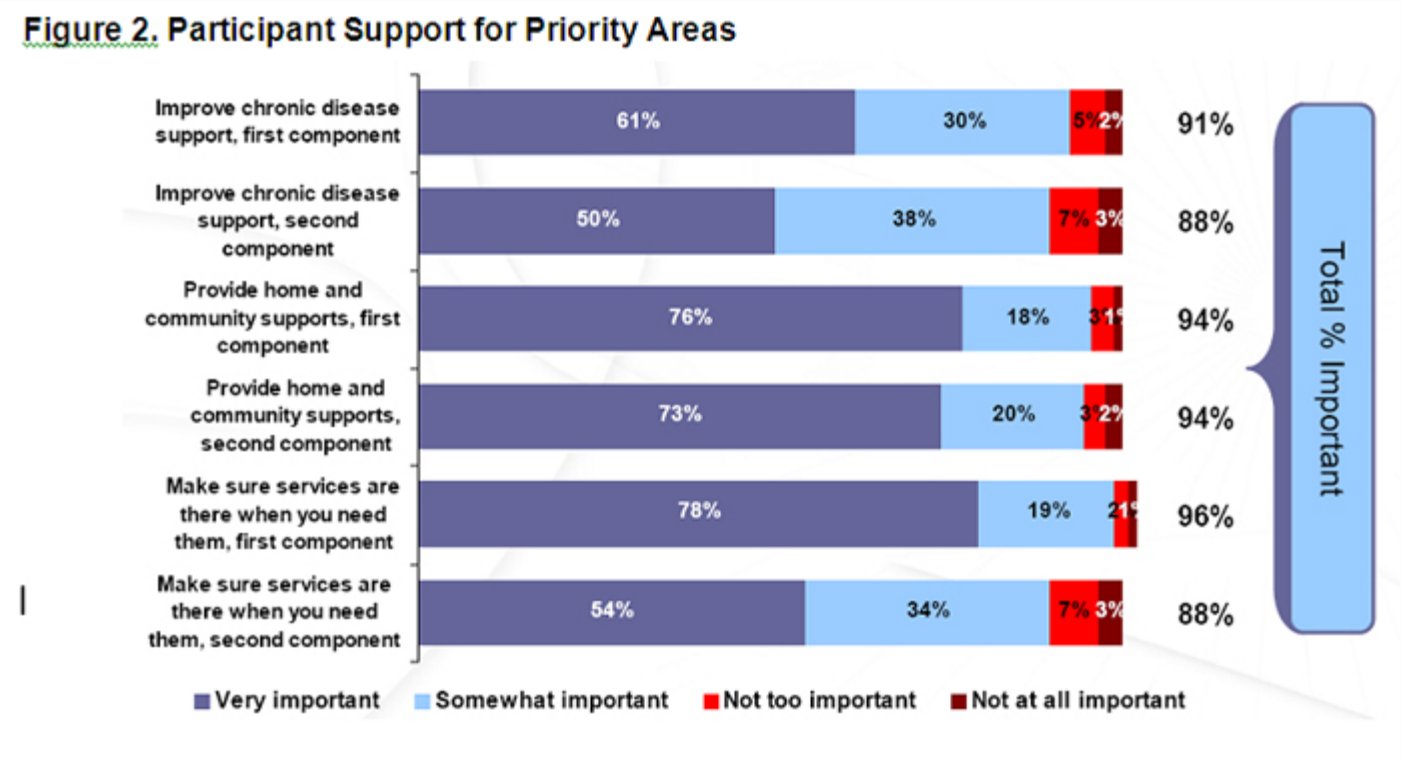
Public Engagement – Telephone Survey

The South West LHIN commissioned Pollara Strategic Insights to conduct a telephone survey to assess South West LHIN residents' awareness, familiarity and confidence with health system changes and the LHIN. The survey was designed to replicate key questions from the telephone survey used to collect information for the first IHSP in 2006 and to allow for a comparison of results between the survey and the online survey conducted for this IHSP.

From September 14 to September 20, 2009, Pollara Strategic Insights conducted a telephone survey among a randomly selected, representative sample of 605 adult residents of the South West LHIN area.

As shown in Figure 2 below, the three key priority areas (see page 2) received nearly unanimous support from residents of the South West LHIN area, with between 88% and 96% of residents describing each priority as "very" or "somewhat" important.

There was no consensus on any priority areas that may be missing from the South West LHIN's 2010-2013 Integrated Health Service Plan. The one area that was mentioned more than any other – and in fact was identified as a priority elsewhere in the survey – is the number/availability of doctors.

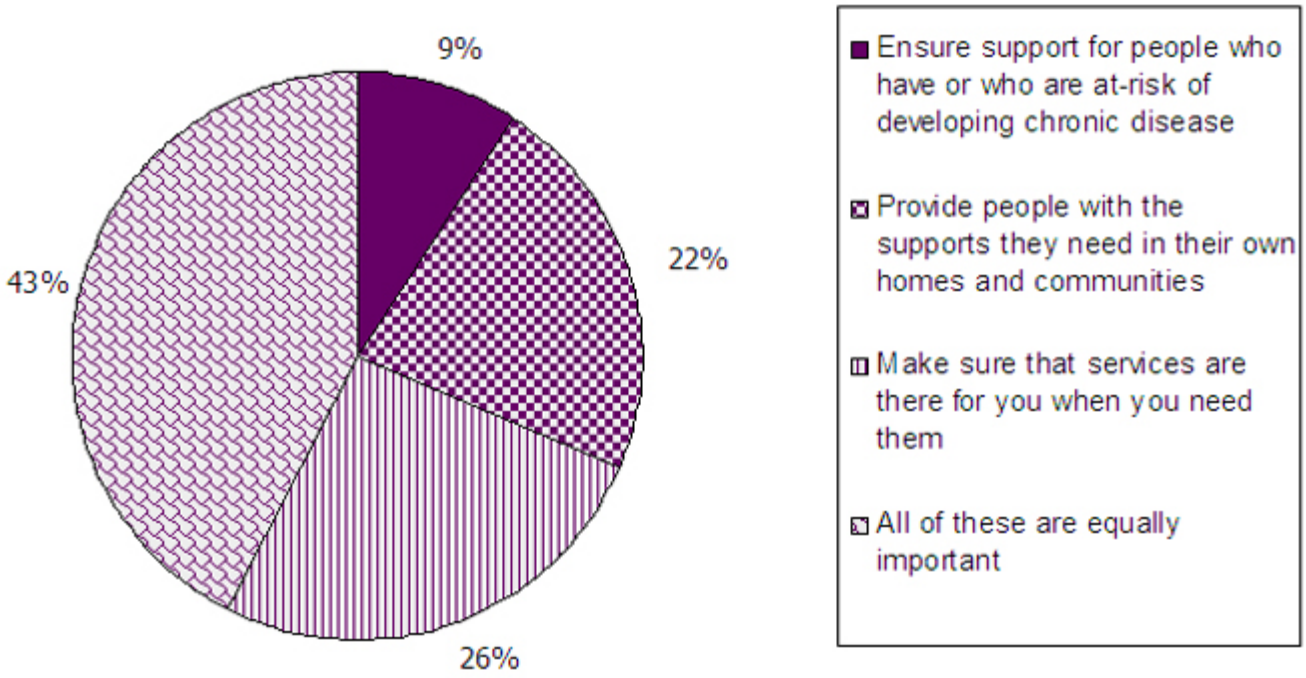


Public Engagement – Online Survey

From late August to October 7, 2009, residents of the South West LHIN had the opportunity to complete an online questionnaire to share their thoughts about the health care system in the South West LHIN and provide feedback on the priorities to be included in our IHSP. The questionnaire was available in English and French and 105 responses were received.

We asked respondents to tell us which one, if any, of the priority areas are most important to them or people they know. Figure 3 below illustrates the results.

Figure 3. Of the above three priorities, which ONE (if any) is the MOST important to you?



Targeted Engagement

During the period of August to early October 2009, the South West LHIN, in consultation with the Health System Design Steering Committee, focused on refining the Health System Design Blueprint models of care that were developed during the symposiums conducted in early June 2009. In parallel, the South West LHIN developed its draft IHSP, incorporating the Blueprint work.

As part of the refinement process for both pieces of work, the LHIN engaged targeted stakeholder groups such as health service providers, physicians, academic centres, and existing committees and advisory groups (e.g., Health Professionals Advisory Committee, Aboriginal Committee, LHIN Steering Committees and Area Provider Tables) within the South West LHIN area. These groups assisted us in ensuring the models of care address current service delivery challenges and respond to the needs of the population. These sessions were also used to discuss implications of the models and key steps required to implement the models of care. The approaches used to share the progress to date and obtain input and feedback included presentations and discussions at group meetings and verbal and written feedback on the final drafts in October.

Physician Engagement

In partnership with the Ontario Medical Association and Ontario College of Family Physicians, the South West LHIN hosted and facilitated four refinement sessions in various locations within the LHIN in order to further engage physicians in dialogue regarding the current issues and future models of care. Physician attendees reviewed specific models of care and shared their perspective on implications to current practice. They also discussed key implementation activities and physician engagement strategies.

Area Provider and Geographic Tables

The Area Provider and Geographic Tables were asked what mechanisms could be used to transfer knowledge and information related to the directions of the IHSP and Blueprint to service providers, health professionals and the public. Some of the ideas generated included the need for targeted and consistent messaging, tangible outcomes, engagement with physicians, and communication through successes.

Generally, providers agreed with the draft priorities, and their feedback during the sessions was incorporated into the IHSP as we progressed through its development. The consultations that occurred around the development of the Blueprint also provided feedback relevant to the IHSP.

Overall, the information and feedback collected from health service providers has helped to guide the development of the IHSP and our strategic directions for the next three years. Comments regarding the need for mechanisms to transfer knowledge and information to providers were also particularly valuable.

Engagement – Thank You

The South West LHIN would like to thank all who participated in the community sessions, our telephone survey, online survey and targeted stakeholder engagement sessions. We sincerely appreciate everyone's contribution and doing their part to build A Healthier Tomorrow for people in the South West LHIN. We look forward to a continuing dialogue with communities and groups about ways to strengthen the health care system.

Blueprint and IHSP Directions

Over the past year, the LHIN has had the benefit of working on the current and future state assessment and the Blueprint framework as the Integrated Health Service Plan for 2010 – 2013 was also being developed.

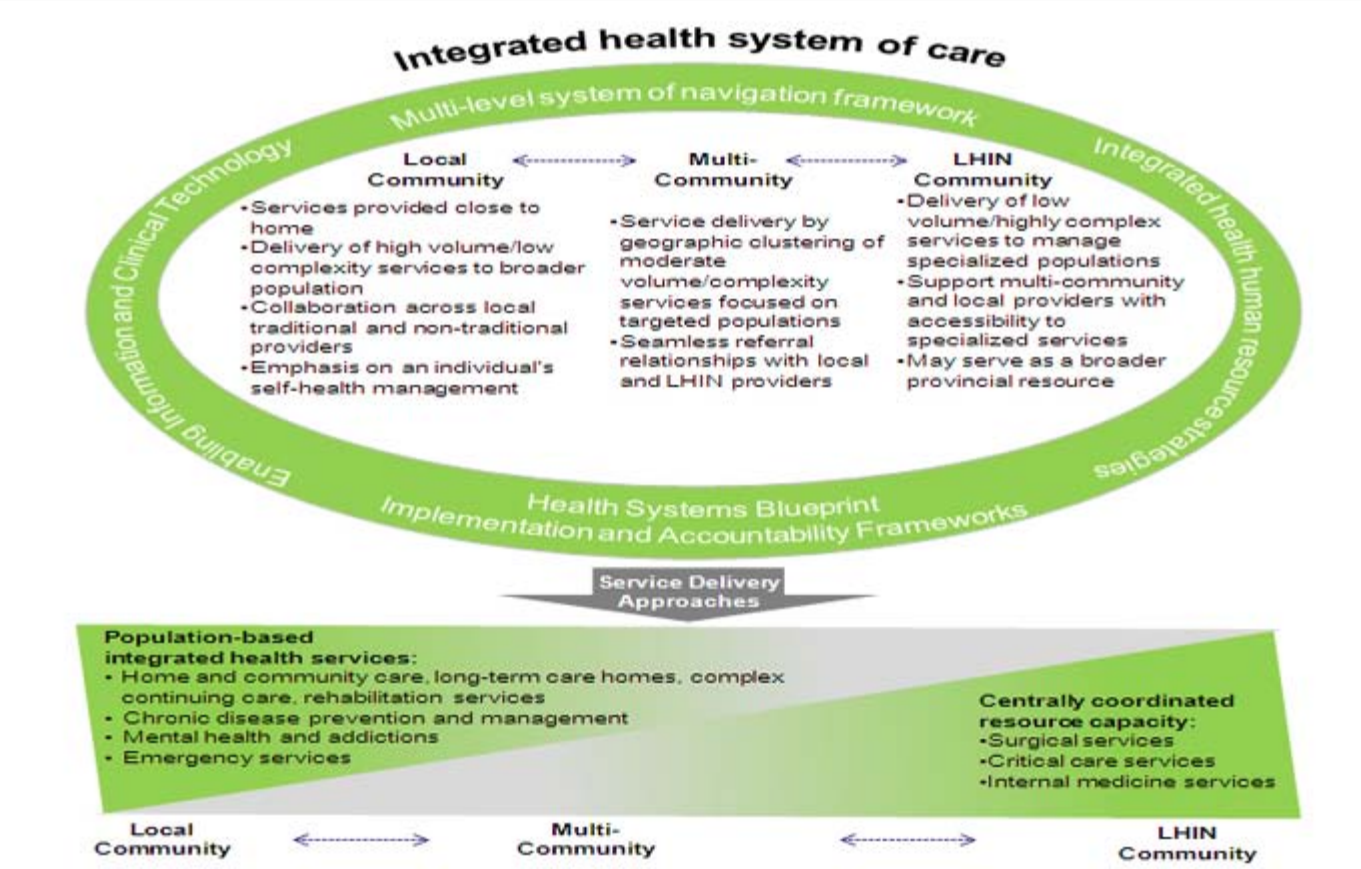
Creating the Blueprint framework now has allowed us to engage the public and health service providers about where we need to get to, based on known practices and trends in health care today, and understand our health care needs 12 years into the future. The IHSP prioritizes our steps for the first 3 years of the 12-year journey so that we can achieve our Blueprint goal of an Integrated Health System of Care by 2022.

An **Integrated Health System of Care** is the future vision of the South West LHIN health system which unifies all health programs and services within a single, integrated health system of care that will allow individuals/families to seamlessly access and receive health services as required during the course of their lifetime. This future system of care will be delivered through two integrated service delivery approaches, **population-based integrated health services** and **centrally coordinated resource capacity**.

- **Population-based Integrated Health Services**: Service delivery approach which is tailored to the collective needs of a local population and its health service providers. It enables local communities to support the health and wellness of its residents and surrounding communities, enabling them to better manage their own health and maintain their functional independence. Throughout an individual's life, one may access primary care, home and community care, complex continuing care, long-term care, palliative care, rehabilitation, chronic disease prevention and management, mental health and addictions services, and emergency health services through this service delivery approach.
- **Centrally coordinated resource capacity**: Service delivery approach focused on a LHIN-wide approach to the coordination of access and management of specialized health service resources. Throughout an individual's life, he or she may access medicine, surgical, and critical care inpatient and ambulatory services coordinated through this service delivery approach.

The Blueprint follows the important work of the Priority Action Teams which helped define what an Integrated Health System of Care should look like at a population or program level based on the priorities identified in the first IHSP. The Blueprint takes these directions one step further by integrating common elements and creating a shared approach to service delivery that can be realized across priority populations and programs at local community, multi-community and LHIN community levels.

The figure below illustrates the South West LHIN's vision of an Integrated Health System of Care.



The Blueprint describes in detail what we want health service delivery to look like by 2022 and why we need to take active steps today to make that happen.

The Integrated Health Service Plan for 2010-2013 is a three year local strategic plan that continues the implementation efforts of our first IHSP and prioritizes our action steps to achieve our Blueprint goal of an Integrated Health System of Care by 2022. The chart below provides a simple sketch of how our IHSP implementation efforts over the next three years align to our Blueprint directions and System Level Goals.

System Level Goals				
Healthier South West LHIN Community	Equitable Access to Services	Quality of Care and Service	Integration of Health Care Delivery	Sustainability of the South West Local Health System
Blueprint Integrated Service Delivery Approaches, 2010-2022				
Population-based Integrated Health Services Centrally Coordinated Resource Capacity				
Integrated Health Service Plan Strategic Directions, 2010-2013				
Enhance capacity and integration of primary, specialized and community-based care, with a focus on the following populations:			**Enhance access and sustainability of hospital-based treatment and care related to:**	
• Seniors and Adults with Complex Needs • People living with Mental Health and Addiction Challenges • People living with or at risk of Chronic Disease(s)			• Emergency Services • Medicine, Surgical and Critical Care Services	
Key Enablers				
Multi-level System of Navigation Information and Clinical Technology Integrated Health Human Resources Strategies Implementation and Accountability Framework				

Next Steps

Early in the month of November, the draft Health Services Blueprint and IHSP was presented to the South West LHIN Board of Directors for discussion and approval. Both documents will be available on the LHIN website on November 30, 2009. The next LHIN newsletter will focus on highlights of the Blueprint and IHSP release and our communication strategy as the LHIN continues to work collaboratively with health system partners towards *A Healthier Tomorrow*.

This is the final issue of the IHSP and Blueprint Project Update. Further information on this work will be communicated in South West LHIN e-Exchange newsletters and through other communication opportunities.

For more information on the South West LHIN's IHSP or the Health System Blueprint project contact:
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IHSP and Blueprint Update 2

IHSP and Blueprint Update 1