South West LHIN

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January 2019 Exchange Newsletter

Greetings from LHIN CEO, Renato Discenza

The exchange of holiday greetings is one way we still manage to keep in touch with friends and family who we have not seen in a while. In these days of ubiquitous social media there still is something nice about getting a greeting card with a picture of family or a personalized note. I particularly enjoy the "year-end letters" that I get from the brave few friends who thoughtfully try to recap a year of activity within their letters.

Anyone who has ever tried to write a letter like that, reflecting on all the highs, lows, celebrations, sad times and change throughout the year will know how paradoxical the feelings are. A year sometimes can go by fast, or slow. Many things change and many things stay the same over the years, and so it is with the South West Local Health Integration Network (LHIN).

There were big changes in 2017 and 2018. The LHINs came together with the Community Care Access Centres and there was a new focus on integrating the patient experience. The government changed. Our leaders changed in the LHIN. What did not change, and in fact perhaps intensified, is the reliance of our community on the services that we coordinate and provide. This region's patients and communities are counting on us to help them have more care, closer to, and in the home.

The LHIN is tasked with making this possible. We are supported by a network of dedicated partners and providers. Each of us navigates a complex system and we work hard to work with each other. I am very impressed by the passion of employees and partners in the South West LHIN who are dedicated to providing care in a broad and diverse geography, to a broad and diverse group of neighbours.

Accreditation Primer Award

In the beginning of December 2018, the South West LHIN engaged in the evaluation stage of an Accreditation process. Accreditation is an ongoing process of assessing standards of excellence in organizations. It provides an independent third-party assessment using standards built upon best practices and validated by similar organizations around the world. I am pleased to report that we have been awarded our Accreditation Primer Award.

I was personally gratified to see this myself. I too have witnessed commitment and excellence, from observing front line interactions with patients, right to our senior leadership team, and all the way to our Board of Directors, we are on the right track. We not only are being seen as doing “the right thing” but there is ample evidence we are doing it in a quality manner.

Accreditation is not an end, but a means to continuously improve the effectiveness of our organization and our relationships with our partners.

Our journey forward

The new year will mark the continuation of this journey, with change always being part of our path towards improvement. In the South West LHIN, I have already began work with our senior team and providers to focus on the changes and bold steps we have within our control to deliver quality care in more innovative ways. The changes to the health care system will not change the crucial aspect of providing safe, quality care to all communities.

Our challenge will be to keep focus on the outcomes that we promised in our new 2019-2022 Integrated Health Service Plan and the strategies we know that we want to deploy. We will have to keep reminding ourselves that there are more things we can control and implement than there are things we can’t control.

My goal is to be the chief support officer to the South West LHIN team and our partners in moving forward on the bold moves and ideas. We know what we want as outcomes and we should be prepared to move forward once we can assess what new ideas can provide safe, high-quality health care to allow the people in our communities to live their lives with the highest quality of care no matter what stage of their journey they are on.

I want to thank you all for working with our neighbours who may face difficult challenges. We make real differences in the lives of Ontarians. We are here to provide comfort, healing and solace at critical times. The challenge in doing this every time makes these goals even more special. Thank you for being part of the team and network of the South West LHIN.

Staying healthy and knowing care options key to avoiding trips to the Emergency Department this winter

The winter season brings increased demand for healthcare. Influenza and seasonal injuries such as fractures drive this surge, leading to longer than usual waits for healthier

patients, or those who don't require immediate emergency care. Knowing where to go for care is key this time of year, especially with the early start to flu season, which may leave hospitals at, or over, capacity.

"By taking steps to stay healthy and by being prepared, people can avoid a non-essential emergency visit completely or greatly improve their experience if they need care," says Dr. Amit Shah, South West Local Health Integration Network (LHIN) Emergency Department Lead. "This helps to decrease the strain on the health care system, and also decreases your risk of contracting another illness while at the hospital."

Simple actions like getting a free flu shot, ensuring that you have all your prescriptions refilled, and washing your hands often can help you stay healthy. More tips to help you stay healthier this winter season are available at southwestlhin.on.ca.

Easy-to-access information on non-emergency medical services

We encourage members of the public to access SouthWesthealthline.ca when they are looking for help with non-emergency medical issues. SouthWesthealthline.ca is a free, comprehensive on-line resource featuring up-to-date information on services available for non-emergency medical needs across communities in southwestern Ontario.

A public awareness campaign – #KnowWhereToGo – was launched to promote the site's Holiday Hours page which features resources that are open and available during statutory holidays including: crisis intervention assistance; Telehealth Ontario – available 24/7 by dialing 1-866-797-0000 for free, quick and easy confidential health education and advice from a registered nurse; medical walk-in clinics; community pharmacies; and, urgent care services. While the winter holidays have passed, these resources are still available throughout the year.

Do you know where to go if you are feeling sick?

The South West LHIN conducted a **Twitter survey** which asks, "Did you know SouthWesthealthline.ca shows what's open if you're feeling sick and need a pharmacist, doctor, or other health support over the holidays?" The South West LHIN will use the survey results to see if public awareness has improved.

The South West LHIN has also been working with Health Service Providers across the region to ensure patient care is optimized during the winter season.

Tackling home care challenges head on

The Home and Community Care Review by Donna Ladouceur, Executive Advisor to the South West Local Health Integration Network (LHIN), describes the challenges facing the home care sector and makes a series of recommendations related to modernizing service provider contracts, innovative models of care, the Resident Assessment Instrument (RAI) tool, Health Links, innovative uses of technology, shared services and the health human resources challenge.

Last summer, our senior leadership team also had the opportunity to visit all our offices across the South West LHIN and heard loud and clear from staff about the increasing difficulties they face on a daily basis getting services into the home.

The aim is to provide upstream support to patients to ensure that they are not going to the emergency room inappropriately and, if they are admitted to hospital, ensure proper supports are provided to return them to their home. This aligns with the Government of Ontario's focus on putting an end to hallway healthcare.

The primary research method for the Home Care Review was a consultation with a large number of stakeholders, a literature review, a study of existing models, and recent Home and Community Care reports. Engagement with front line staff, service providers, patients, system partners, primary care physicians and provincial leaders was completed to understand current gaps and opportunities to work differently together.

Home and Community Care Review

In Phase 1, we will share the document and encourage/listen to feedback. In Phase 2, we will develop and share an action plan that tackles the priority recommendations and encourages thoughtful discussion and engagement with a view to concrete action.

The successful implementation of the recommendations, or any other new ideas that emerge, will require a true partnership among frontline staff, service providers, hospitals, primary care physicians and provincial leaders. This review is a great opportunity to live up to our mission: *Working with communities to deliver quality care and transform the health care system*.

In short, the South West LHIN is committed to seizing the opportunity created by the Home and Community Care Review, to advance our mission and to demonstrate our values of courage and innovation.

Including the patient voice in health care planning and

delivery

The South West Local Health Integration Network (LHIN) Patient and Family Advisory Committee (PFAC) members have been working hard with the LHIN for well over a year now, and are continuing to embed the patient, family and caregiver voice into projects and priorities across the region.

Committee members are part of a number of advisory and working groups focused on system change throughout the South West LHIN and have made a significant impact on ensuring that patient engagement is part of health system planning.

Patient, Family and Caregiver Partners play a key role in South West LHIN Sub-region Integration Tables. These tables are focused on improving coordination of service planning and delivery for patients in each of the five sub-regions of the LHIN including: Grey Bruce, Huron Perth, Oxford, Elgin and London Middlesex. Each Sub-region Integration Table has three patient, family and caregiver partners who bring their perspective to discussions and decisions among the tables.

“I believe we are making a difference because the patient, family and caregiver experience is increasingly being included in the planning, design and evaluation of local health systems,” says Matthew Maynard, South West LHIN Patient, Family and Caregiver Partner. “We are working towards being part of the cultural shift needed in including patients as partners in care delivery.”

Matthew has a genetic bleeding condition, and has interacted with the health care system as a study participant, volunteer, personal and community advocate, and as an instructor to Emergency Room staff, nurses and medical students. He now works as a South West LHIN Patient and Family Advisory Committee member representing the Huron Perth sub-region.

“My learning as a Patient, Family and Caregiver Partner has been steep,” says Matthew. “I’m working hard to try to understand my experience in context with the constraints and opportunities for better care, as well the processes to bring improvement to systems and services.”

Beginning in December 2018, the South West LHIN underwent an accreditation evaluation process, and was one of the first organizations to have a Patient Surveyor as part of its evaluation.

The Patient Surveyor met with the Patient, Family and Caregiver Partners to understand their experience working with the LHIN and how we could further embed patients, families and caregivers in health care planning and decisions. The Patient Surveyor identified several LHIN strengths including-the level of engagement and support for the Patient and Family Advisory Committee role and that members felt respected and valued as a part of LHIN committees. Future opportunities will include continuing to build the patient voice into new projects and initiatives and to evaluate the impact of embedding the patient voice in LHIN work.

To date, the Patient, Family and Caregiver Partners, including Matthew, have developed a Patient Engagement plan. This plan is focused on advising the LHIN on how to engage with patients and the

Patient and Family Advisory Committee members are starting to implement key activities within the plan to create a strong culture of patient engagement across the South West LHIN.

If you're interested in being part of a patient advisory committee for a health care organization, contact the Patient Engagement Lead, Rachel Stack to find out more. For further information on the South West LHIN Patients, Family and Advisory Committee, visit our website.

eShift can improve care in the community, and job satisfaction of nurses and personal support workers

One of the goals of the South West Local Health Integration Network (LHIN) is to treat patients in the location of their choice – at home. Hospitals also want to ensure patients receive the best care at home when discharged. But home care can present challenges: a shortage of nurses and personal support workers.

While most understand a nurse's role, many may not know that Personal Support Workers assist people with daily needs in their homes as they cope with the effects of aging, injury or illness. Duties can include help with bathing, dressing, feeding, mobility and reporting important information back to a Registered Nurse or Registered Practical Nurse. Personal Support Workers are highly valued but in short supply in the community.

The South West LHIN is working with Sensory Technologies and its eShift® digital platform to address resource challenges by lowering hospital readmission rates, using community nurses more effectively and improving the job satisfaction of Personal Support Workers. It does this by enabling real-time collaboration between all members of a treatment team, including those at the bedside and those directing care from a remote location.

One nurse can remotely direct workers in six different locations

More specifically, a single nurse using eShift can remotely direct Personal Support Workers in up to six different homes in a single shift providing them with constant access to clinical experience and expertise, and the increased confidence that comes with this kind of support.

Nurses can also direct Personal Support Workers to perform specific tasks based on real-time data being transmitted to the nurses through a digital dashboard. The nurse can instantly see and take action on changes in vital statistics, cognitive status and any challenges faced by the Personal Support Worker. By performing a greater number of tasks under the watchful supervision of a nurse, Personal Support Workers increase their skill set and job satisfaction.

Readmission rates cut dramatically

London Health Sciences Centre (LHSC) and the South West LHIN have been working with the eShift technology on the Connecting Care to Home (CC2H) Program, which aims to improve collaboration, and therefore continuity of care, for patients transitioning from acute care to community care, specifically in the areas of Chronic Obstructive Pulmonary Disease and Congestive Heart Failure.

London Health Sciences Centre and the LHIN are now considering how to extend this model to other services and how best to involve patients and families in care delivery while continuing to provide oversight from clinical staff. The technology has proven itself in other areas such as pneumonia, stroke, orthopedic, and complex pediatric patients and palliative care.

"eShift enables real-time data collection and provides nursing and other health care provider expertise to Personal Support Workers caring for patients in the community," said Laurie Gould, Executive Vice President, Chief Clinical and Transformation Officer, London Health Sciences Centre. "With the health care team working collaboratively through this technology, we have seen significant improvements. For example, some patients with Chronic Obstructive Pulmonary Disease saw their hospital stays reduced by 42 per cent. London Health Sciences Centre also had its 30-day readmission rates diminished by 42 per cent and emergency visits lessened by 50 per cent for this group of patients."

"eShift has been clinically proven to lower readmission rates, provide increased capacity with existing front-line nursing staff, and lower total treatment costs," says Donna Ladouceur, Home and Community Care, South West LHIN. "In Ontario, hospital readmission rates for complex end-of-life patients dropped from 50 per cent to under 2 per cent using this technology, decreasing the overall costs on the strained healthcare system and increasing the number of available hospital beds."

South West LHIN sees jump in online self-help peer support service: Big White Wall

Hundreds of local residents within the South West LHIN have registered for Big White Wall - an online moderated peer support service that can help people manage their own mental health around the clock - since last July (watch promotional video here: **Big White Wall**).

Of the 14 Local Health Integration Networks (LHINs), the South West LHIN is seeing the highest number of psychotherapy referrals from Big White Wall and the third highest uptake in new registrations. Interest is highest in courses such as *Manage Stress and Anxiety*, *Manage your Depression* and *Eat Healthy and Lose Weight*. The biggest users are 24-34 year-olds followed closely by 16-24 year-olds.

"Studies have shown that young people are eager to adopt technology to manage their own health and the initial results for Big White Wall bear this out," says Dr. Paul Gill, Clinical Digital Lead, South West LHIN. "We believe residents within the LHIN, in general, are open to using technology to manage their health and

we are encouraged by the relatively broad participation in Big White Wall."

While the online tool seems to cater to young people, participation is occurring across all age groups (except those greater than 75 years of age) and across all walks of life – students, full-time employees, part-time employees, caregivers, retirees, and the unemployed or people who are unable to work.

"In the last decade, mental health visits to emergency rooms have jumped significantly, as have hospitalizations for depression, anxiety and eating disorders," says Dr. Paul Gill. "More work needs to be done to intervene before people end up in the Emergency Department in crisis. The South West LHIN is reaching out to health care providers and the general public through social media, but we invite everyone to share and talk about Big White Wall."

Residents of the South West LHIN can now access two free self-help psychotherapy services: Big White Wall and Bounce Back.

Big White Wall is an online peer support and self-management tool for people who are 16 years old and up. Online users have 24/7 access to guided support courses, they can talk anonymously with other people about their emotions in a moderated chat room, or they can display their feelings on a digital online art wall. Anyone can access the service at: **bigwhitewall.ca**

BounceBack is a telephone coaching program that is grounded in Cognitive Behavioural Therapy. Adults and youth can work with a coach during telephone sessions and go through workbooks on their own, at their own pace. To access BounceBack, please talk with your physician.

The South West LHIN also leads in referrals among the seven LHINs that make up the Wave 2 implementation of Bounce Back.

Using the client voice to improve mental health and addictions care across the LHIN

Using client feedback, data-driven decision-making and collaboration to help shape quality mental health and addictions care

Engaging people with lived experience is critical to improving services and the overall care experience for individuals and families accessing mental health and addiction systems. With this in mind, many mental health and addictions providers across Ontario have started using a common survey tool, the ***Ontario Perception of Care tool for Mental Health and Addictions (OPOC-MHA)***, to gather client feedback on the services they receive. Approximately 70 per cent of mental health and addictions providers funded by the South West LHIN are now using the Ontario Perception of Care tool for Mental Health and Addictions, with the feedback supporting their efforts to improve service quality.

Using a common tool also allows organizations to compare their services to similar services in other areas of the province, and speak a common language with their regional partners.

Supported by the Centre for Addiction and Mental Health's Provincial System Support Program, several organizations in the South West LHIN have come together to openly share their Ontario Perception of Care tool for Mental Health and Addictions data. The ***South West Continuous Quality Improvement Collaborative (SW CQIC)***, initiative aims to use client feedback to identify and address opportunities to improve mental health and addictions services across the LHIN.

The South West Continuous Quality Improvement Collaborative officially started in September 2017. Partners include representatives from 14 organizations that provide mental health and/or addiction services and five community members with lived experience. Aligning with other sources of evidence and regional priorities, the partners' Ontario Perception of Care tool for Mental Health and Addictions data identified service transitions as an initial area for improvement. In response, Continuous Quality Improvement Collaborative partners are now working towards implementation of a person-oriented transition bundle that includes:

1. The Patient-Oriented Discharge Summary (PODS), a simple tool that provides clients with key information to support their success after discharge
2. Effective education of clients and their supporters
3. Welcoming supporters as partners in care
4. Post-discharge follow-up

The transition bundle aims to improve the experience of transitions for clients and their supporters; confidence of clients and their supporters to manage care after discharge; experience of care for providers; and, continuity of care between services.

"Sunny days are beautiful. Cloudy days aren't as easy to handle. The Continuous Quality Improvement Collaborative *has been working on a transition project. As we work, I feel that more sun is shining. As a person with healing experience from difficulties in hospital, it is hopeful to be part of a group of people gathering with such caring intentions to help people transition," says Melanie Knapp,* Continuous Quality Improvement Collaborative *partner.*

"Diversity is helping everyone to share. Strong leadership makes the group refreshing and educational. I'm thankful I can see the sun shine more often. This group is truly a blessing."

For more information on either the Ontario Perception of Care tool for Mental Health and Addictions or the Continuous Quality Improvement Collaborative, please contact Deanna Huggett, Implementation Specialist, Centre for Addiction and Mental Health by email or at: 519-858-5158, ext. 20166.