

North East LHIN News

November, 2007 Volume 1, Number 2

ALC – A long-standing issue for North East Ontario

NE LHIN – An organization working to mitigate the ALC Issue

Over the past decade, the ALC (Alternate Level of Care) situation in Northeastern Ontario has been building to a crisis point.

According to CEO, Rémy Beaudoin, "The NE LHIN has been working on resolving the ALC issue since the LHINs were born in the Spring of 2006." Mr. Beaudoin notes that short-term band-aid solutions will not work. "We have learned over and over again that one-time injections of money do not work over the long-term. The NE LHIN is focused on long-term solutions that will continue to mitigate this issue." These solutions, states Mr. Beaudoin, will not be found in any one area of the health care system, rather they will be found along the health care continuum. "A realignment of the health care system is needed in order to arrive at successful solutions to the persistent ALC situation," concluded CEO Beaudoin.

As the newest kid on the health care block, the role of the NE LHIN is to assess health care needs and fund health service providers to best meet those needs. The LHINs' focus on the integration of services and bringing health care providers together to deliver the best service possible for the local people. Such is the case with ALC.



Rémy Beaudoin, CEO, NE LHIN

The numbers of ALC patients was rising steadily long before the LHINs were born. Since 2006, the NE LHIN has made ALC a priority and has been working continuously to bring the right partners around the table. CEO Beaudoin feels confident that the NE LHIN approach is the right one. "Up until now, every attempt to resolve the ALC issue has fallen short. The NE LHIN has been actively working with the Ministry of Health and Long-Term Care (MOHLTC) and local stakeholders to identify specific strategies to address the ALC issue in our region. With commitment, patience and determination; we will succeed."

Continued on page 2

A few facts:

- ALC is a long-standing issue in Northeastern Ontario health care.
- The ALC challenge is not unique to any one Northeastern Ontario municipality – it is widespread across the region.
- ALC is a priority for the NE LHIN who has called upon its system partners through the ALC Summit, ALC Task Forces, and CEO Round Tables to find solutions to help ease the pressures resulting from increased numbers of ALC patients.
- The ALC challenge is one in which the solution must be found across the health care continuum; it is a system issue.
- The ALC issue will not be solved simply through funding. Strategies (such as the recently announced Aging at Home Strategy) which focus on increasing the overall mix and quantity of services and innovations are pivotal in solving the ALC issue within the Northeastern region.

In This Issue

- 1 - 2 ALC – Insight into a long-standing issue
- 2 - Board of Directors Meeting
- 3 - Aging at Home Strategy Update
- 3 - e-Health Tactical Plan Update
- 4 - Staff Profile
Carol Philbin Jolette
- 5 - Health Service Provider (HSP) Risk Register
- 5 - Rotman School of Management Call for Applicants
- 6 - Mental Health and Addiction Summit
- 6 - Governance/Stakeholder Forums Register Now!

Calendar At A Glance

- Nov. 19**
North Bay (Nipissing)
Governance/Stakeholder Forum
- Nov. 20**
Sudbury (Manitoulin - Sudbury)
Governance/Stakeholder Forum
- Nov. 26**
Timmins (Cochrane)
Governance/Stakeholder Forum
- Nov. 27**
Sault Saint Marie (Algoma)
Governance/Stakeholder Forum
- Nov. 29**
New Liskeard (Timiskaming)
Governance/Stakeholder Forum
- Dec. 3**
Parry Sound
Governance/Stakeholder Forum
- Dec. 3**
HAPS Meeting, Hospital CEOs
- Dec. 4 & 5**
Addiction & Mental Health Summit, Sudbury

A few highlights of NE LHIN actions with regards to ALC include:

Continued from page 1

- **May – August 2006:** Community engagement in support of the NE LHIN Integrated Health Services Plan identifies ALC as a priority.
- **February 2007:** NE LHIN CEO meets with representatives of Sudbury Regional Hospital to discuss increasing numbers of ALC patients. It is agreed that ALC Task Forces should be established in four urban centres to study issue.
- **March 2007:** ALC Task Forces formed in North Bay, Sault Ste. Marie, Sudbury and Timmins. ALC Task Forces meet over 7 months and conduct detailed analysis of ALC issue.
- **June 2007:** NE LHIN hosts ALC Summit in Sudbury which brings 125 stakeholders together to receive information and discuss strategies to mitigate ALC. Proceedings are developed and strategies identified.
- **August 2007:** NE LHIN holds series of meetings with CCAC senior management and hospital senior management (North Bay General Hospital, Sault Area Hospital, Sudbury Regional Hospital and Timmins and District Hospital) to discuss the FLO Collaborative and agree on partnership to implement the initiative beginning in September 2007.
- **August 28, 2007:** Aging at Home Strategy is announced by Province. NE LHIN immediately develops work plan to develop the first deliverable of a Directional Plan.
- **August 31, 2007:** NE LHIN submits Annual Service Plan in which ALC is identified as a priority and includes high level business cases based on submissions from health service providers. The business cases focus on the priority of ALC.
- **October 2007:** CEO Round Tables meet to review draft Aging at Home Directional Plan which includes high level strategies based on work of ALC Task Forces, ALC Summit and Annual Service Plan.
- **November 23, 2007:** ALC Task Force reports tabled at NE LHIN Board of Directors meeting.

Demographic factors having an impact on ALC:

The NE LHIN...

- Covers a large geographic area of approximately 400,000 square kilometres. The total population of 561,883 (Census 2006) in the North East region has an older age structure, with a relatively high proportion of First Nations, Aboriginals, Métis and Francophones.
- Has a higher proportion of the population age 65+ than the province i.e. 16.3% and 13.5% respectively (2006 Census). Seniors age 65+ account for approximately 91,842 of the total population which is 561,882.
- Has approximately 7,700 people currently with Alzheimer disease or related dementia. This number is expected to rise by 30% to just under 10,000 by 2016 (North East Dementia Network Coalition, June 2007).
- Has more than 23,000 older persons living alone. Overall, 65% of seniors live as a family, 4% live with relatives, and 30% live alone. James Bay Coast area residents show the highest percentage of older persons living as families at 77% compared to 65% in the NE LHIN as a whole.
- Has a higher percentage of unemployment, low-income rate, daily smokers, adults who are obese, overweight, relative to the province.
- Has one of the highest ALC utilization rates in the province at approximately 14-18.8% of all acute inpatient days between 2003/04 and 2006/07.

Board of Directors Hold October Meeting

The October meeting of the nine member NE LHIN Board of Directors was held via teleconference on Friday, October 26, 2007. Highlights of the meeting include:

- A presentation on Northern Health Travel Grants;
- Approval of the Aging at Home Directional Plan which was subsequently submitted to the MOHLTC on October 31, 2007;
- Approval of 15% of the total Year 1 funding of the Aging at Home Strategy to Aboriginal, First Nations and Métis populations; and
- Receipt of an Alternate Level of Care briefing note.

The full board agenda and supporting documents can be viewed at www.nelhin.on.ca. The next Board meeting will be held in Sault Ste. Marie on November 23, 2007. All meetings are open to the public and individuals are most welcomed to attend.

For more information on NE LHIN Board meetings, please contact:
Lianne Bettiol, lianne.bettiol@lhins.on.ca. Tel.: 1-866-906-5446, ext. 213.



Mathilde Gravelle Bazinet
Chair, NE LHIN
Board of Directors

Here is a Northern Ontario e-Health Tactical Plan Update

In the Summer of 2007, Northern Ontario health service providers help to complete an e-Health Tactical Plan that identifies priority projects necessary for the implementation of the e-Health Information and Communication Technology Blueprint. Within this Plan, sixteen priority projects were noted. The following is a status report on five of those projects:

Priority Project	Update
Establish a Project Management Office (PMO) for the Northern Ontario e-Health ICT Tactical Plan.	A PMO is established and is responsible to plan, implement and monitor e-Health initiatives in the NE and NW LHINs.
Develop a regional ICT infrastructure, including the development of an ICT framework and architecture standards.	A Northern Ontario Technical Advisory Group is being established with IT experts from across the North.
Enable Smart System for Health Agency (SSHA) connectivity.	A partnership is underway with SSHA and the PMO to conduct a network refresh on all major SSHA connected sites. A plan will be developed to connect all other health service providers in Northern Ontario.
Implement the Pan Northern Ontario PACS Project (PNOPP).	A Project Manager is hired and the goal is to share diagnostic images between sites regardless of where the image was taken within the North.
Develop the Northern Ontario Directory of Services (DOS).	The DOS project is complete and the NE and NW CCACs and 211 North are exploring the feasibility of expanding the English and Francophone database across the North to include all health service organizations in a single database.

Within the next several weeks health service providers will receive a survey to help the PMO determine whether your organization has project management capacity, e-Health projects or outstanding ICT questions and/or issues. The goal of the survey is to be able to better support health service provider ICT initiatives, minimize the number of vendors in each sector, increase shared purchasing power, and improve IT integration for large and small providers.

For more information please contact **Laura Boston**, Project Manager, 705.541.2300 or boston_l@ghc.on.ca

Aging at Home Strategy An update



The Aging at Home Strategy was announced by the Province in August, 2007. The Strategy aims to reinforce the ability of community support services to allow seniors to live healthy, independent lives in their own homes. The three-year \$700 million initiative translates into just over \$33 million over three years for the North East LHIN as follows:

2007/08 planning dollars:	\$202,000
2008/09 initial investment:	\$4,290,570
2009/10 base increase:	\$10,662,643
2010/11 base increase:	\$18,831,868
Total:	\$33,785,081

The Strategy will impact how services are delivered. Its goal is to provide more equitable access to health care, matching the needs of local seniors with appropriate supports. These supports could include enhanced home care and community support services such as meals, transportation, shopping, snow shoveling, friendly home calling, adult day programs, homemaking services and caregiver supports.

On October 31, the NE LHIN submitted a Directional Plan for the Strategy to the MOHLTC. The Plan spoke to the issues and recommendations for a North East strategy. The next deliverable is a detailed implementation plan which will be submitted to the MOHLTC by January 31, 2008. NE LHIN staff will continue to build on the work of the ALC Task Forces and work directly with the CEO Roundtables to prepare the next plan.

An Aging at Home information page can be found at: www.nelhin.on.ca within the Health Service Providers section.

Staff PROFILE

Carol Philbin Jolette, Senior Consultant, Performance, Contract and Allocation



Prior to joining the North East LHIN, Carol Philbin Jolette worked in the health care sector for 15 years with the Near North Community Care Access Centre as Director of Client Services, Program Manager for the School Health Support Services and Project Manager and with the North East Mental Health Centre as Director of Communications. Carol has extensive experience in organizational amalgamation/realignment and integration of service delivery models. She has also been involved in establishing and maintaining local, regional and provincial networks in the health, social, children and mental health sectors. She holds a Bachelor Degree in Social Sciences from Ottawa University.

What is your role at the NE LHIN?

I am primarily responsible for managing, monitoring and evaluating health service provider performance in accordance with accountability agreements and Ministry defined roles. I also provide advice on financial and funding matters related to health service providers. Currently, I am assigned to the Nipissing and The James Bay and Hudson Bay Coast planning areas.

What do you see as the main challenges of your position?

Only being in the position for six months, I am still learning the many processes related to this position. At the same time as the MOHLTC is devolving responsibility to the LHINs, we are juggling with the need to develop and implement processes to carry out this responsibility. Although a balancing act, I enjoy the challenge of managing this environment of transition.

What are some of the opportunities of your position?

I believe the Local Health Integration Networks are a key component of Ontario's plan to make the health care system more client-focused and responsive to local health care needs. Being part of the NE LHIN, I am in a position to truly make a difference in how we plan, implement and sustain our local health care system. In recent months, we engaged Health Service Providers through the ALC Task Forces, ALC Summit, Governance Forum and the CEO Round Tables. We are in a position to hear from the stakeholders and use that information to make decisions on delivering health care to the communities across the North East region.

What do you hope to achieve in your role as a Consultant at the NE LHIN?

Among the many things I would like to accomplish, I hope to establish and nurture a relationship of mutual trust and respect between Health Service Providers and the NE LHIN. In so doing, we will be able to create a system that is truly responsive to the needs of our communities.

After NE LHIN hours, how do you like to spend your time?

My main hobbies are running, swimming and home renovations. I energize by spending as much time as I can with my family and friends engaging in outdoor activities.

Carol can be reached at: carol.philbinjolette@lhins.on.ca; 1-866-906-5446, ext. 203.

Newest NE LHIN Recruit



Cynthia Stables has joined the NE LHIN as a Senior Corporate Advisor. In this position, Cynthia is responsible for leading all of the organizations internal and external communications activities and for implementing the NE LHIN Strategic Communications Plan.

Cynthia brings with her close to twenty years of experience from both the private and public sectors. For the last four years, she has been consulting privately with clients across Ontario, notably the Northern Ontario School of Medicine where she led the School's communications initiatives during their inaugural year. Prior to returning to Northern Ontario, Cynthia worked primarily for the City of Ottawa where she held a number of senior positions in corporate communications.

Cynthia can be reached at:
cynthia.stables@lhins.on.ca
1-866-906-5446, ext. 224.

Health Service Provider (HSP) Risk Register

As part of the Risk Management Framework, the NE LHIN issued a HSP Risk Register to be completed on a quarterly basis. The Risk Register is a tool for documenting identified risks. It should be a dynamic log that will inform and facilitate future risk analysis for HSPs.

Risk reporting is designed to be a communication vehicle to allow the NE LHIN to report on risks that affect HSPs individually and collectively. The timely disclosure of risks is necessary to ensure appropriate management strategies are implemented and the stability of the health system in the NE LHIN is protected.

How does the NE LHIN use the risk information?

- NE LHIN Consultants review the risk registers on a quarterly basis. The risks are assessed based on the NE LHIN expertise, judgment and knowledge of the local health system.
- The NE LHIN submits a report to the MOHLTC on a quarterly basis highlighting risks that may jeopardize the achievement of the IHSP priorities and the objectives outlined in the Ministry-LHIN Accountability Agreements (MLAA), as well as risks that may impair delivery of service and/or sustainability of an organization(s) or sector.

How does the MOHLTC use LHIN risk information?

- Risk information provided by the LHINs to MOHLTC is integrated into the Ministry's planning, budgeting and performance measurement processes. It supports key Ministry and government decisions that impact on the LHINs:
- Ministry planning, budgeting and performance reporting;
- Ministry reporting to the government;
- Funding decisions for healthcare system incentives and efficiency reinvestment programs; and
- Future policy decisions.

It is very important that risks be identified and accurately assessed in a consistent manner. The NE LHIN is currently working on a communication process to simplify the submission of the Risk Register. Correspondence on this process will be distributed shortly.

In the meantime, please contact the NE LHIN Consultant assigned to your planning area if you have any questions or concerns about reporting risks.

Rotman School of Management Seeking Applicants

Advanced Health Leaders Program

The Rotman School of Management (University of Toronto) Advanced Health Leaders Program is an executive education program targeted at current and soon-to-be members of executive teams in the health system and is focused on the development of the next generation of Ontario's health leaders. It seeks to improve their understanding and skills in the areas of Leadership, the Management of Change, Emotional and Political Intelligence and Integrative Thinking.

Building on the success of the previous offerings, this program has been redesigned to reflect recent changes in the Ontario health system (e.g., the new Accountability Framework; establishment of the LHIN architecture; restructuring the CCAC network; establishment of the Health Quality Council; the new Stewardship model and the enhanced role of Public Health).

Ministry funded scholarships will enable up forty-two participants to attend. Participants, or their organizations, will be responsible for their travel and accommodation costs only.

This year, three health service provider individuals within the NE LHIN were chosen for a scholarship including, **John Stenger**, Chief Financial Officer at St. Joseph's General Hospital in Elliot Lake, **Peter Istvan**, Director of Corporate Services for the West Parry Sound Health Centre, and **Ben Petersen**, Vice President and CFO for Hôpital Régionale de Sudbury Regional Hospital. Rotman School of Management chose the 42 candidates from over 200 applications.

Details of the program, including course descriptions, dates and application instructions are available at http://ep.rotman.utoronto.ca/open/health_leadership/.



Addiction & Mental Health Summit December 4 & 5, 2007 Radisson Hotel – Sudbury

The preliminary program and registration form for the NE LHIN Addiction and Mental Health Summit is now posted to www.nelhin.on.ca. **Coming Together – Developing an Integration Addiction & Mental Health Services System for North East Ontario**, will be led by keynote speaker Dr. David Mee-Lee, MD who is a psychiatrist based in Davis, California with over twenty-five years of experience in treatment and program development. His presentation will review the obstacles to integrated services and offer solutions to the clashes between the mental health and addiction treatment cultures.

The Summit's learning objectives are to:

- Identify the major ideological differences that divide addiction and mental health systems;
- Describe the negative clinical implications for people with co-occurring disorders; and
- Apply unifying principles and strategies to resolve fragmentation and improve outcomes.

For more information or to register, please visit www.nelhin.on.ca or contact:

Frank McGoey, frank.mcgoey@lhins.on.ca
Tel: 1-866-906-5446 ext. 207

Mike O'Shea, mike.oshea@lhins.on.ca
Tel: 1-866-906-5446 ext. 202

Governance/Stakeholder Forums November – December, 2007 Locations Across North East Ontario

Registration deadlines are nearing for the upcoming Governance/Stakeholder Forums. **Managing Health Care in a New Environment, Part II ... Bringing Health Care Closer to Home**, is a series of forums to provide Health Service Providers, stakeholder representatives, and health care consumers and their families with the opportunity to:

- Learn more about the NE LHIN Integrated Health Services Plan (IHSP);
- Discuss respective roles and responsibilities within the health system;
- Discuss details related to current and future Governance and Stakeholder Forums; and
- Meet with health care service providers and stakeholders across the region.

Dates/Locations:

Nov. 19	North Bay (Nipissing)
Nov. 20	Sudbury (Manitoulin - Sudbury)
Nov. 26	Timmins (Cochrane)
Nov. 27	Sue Saint Marie (Algoma)
Nov. 29	New Liskeard (Timiskaming)
Dec. 3	Parry Sound

For more information or to register, please visit www.nelhin.on.ca or contact: **Colette Whitehead**, 1-866-906-5446, ext. 227
colette.whitehead@lhins.on.ca

Registration must be received one week in advance of the preferred forum. All Forums will be held from 4:00pm to 8:00pm.

NE LHIN Staff, Ready to Serve you...

Staff of the NE LHIN are responsible for providing leadership in addressing the local health care needs of the many communities of North East Ontario. A staff member is assigned to each of the seven geographic planning areas. Please contact the individual assigned to your area with any questions, comments, concerns or information you may have that will help to better serve you.

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