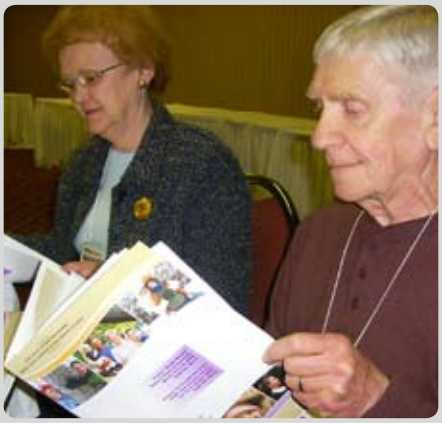
North East LHIN
NEWS
Spring 2008

Yvette Corbiere, RN, Program Manager (pictured at right), and Martina Pitawanakwat, RN, a Home Care Nurse, gave a presentation at the Seniors' Health Summit on Creating a Culturally Appropriate and Integrated Model of Care for Aboriginal/First Nation/ Métis Seniors. They work at the Wikwemikong Health Centre on the eastern side of Manitoulin Island offering services in eight main departments to band members of the Wikwemikong Unceded Indian Reserve. Their presentation noted that they view their elders in a wholistic manner in the Long Term Care/Home and Community Care Program. "Our actions are guided by our grandfather teachings," offered the presenters. "These include: respect, humility, compassion/bravery, honesty, trust, wisdom, and unconditional love." They are also guided by the Medicine Wheel with its four directions: east - vision, south - focus, west - introspection and north - strength. Their entire presentation will soon be available on the NE LHIN website.



Representatives of Sault Ste. Marie seniors' groups enthusiastically attended the NE LHIN's Seniors' Health Summit. Cathy St. Amand, President of Club 235 Steeltown Seniors Centre, and Robert Major, President of the Young at Heart Seniors' Club, were interested in the proceedings and contributed to discussion groups. The two-day summit offered expert speakers from across Canada who talked about potential models of geriatric care. After hearing the speakers, St. Amand concluded that she had a greater appreciation for the thinking that goes into planning. Major agreed it is a huge process. "Lot of work. This is a start though." A full report of the seniors' summit, including presentations by all speakers, will soon be posted to the NE LHIN website. More than 150 delegates attended the Aging @ Home Successfully summit March 18 and 19 to learn about successful and innovative service models that could support Aging at Home. Participants were updated on the Aging at Home Strategy, and explored best local approaches that help seniors age with dignity.

A Plan to Help Seniors Stay at Home - Healthy

Engaging seniors to share tea and health care ideas

The NE LHIN wants to help seniors stay healthy and live more independently—while staying in their own homes—through initiatives to integrate community-based services, as part of the Ministry of Health and Long-Term Care (MOHLTC) **Aging at Home Strategy**.

The NE LHIN's Aging at Home Detailed Services Plan was submitted to the Ministry of Health and Long-Term Care (MOHLTC) at the end of February, 2008. It maps aging at home activities to date, initiatives being implemented in 2008-09, and provides an update on planning and community engagement activities. (The plan is on our website under Aging at Home.)

The NE LHIN encourages seniors and caregivers to get involved in shaping seniors' health care planning. We believe that citizens of the North East want to help create health care and community solutions that matter to them. With that in mind, we have reached out extensively in the past months to meet and engage seniors and their families across our Northern communities. We have warmed the chilly days of late winter with 10 tea and chat sessions in communities ranging from Little Current to Parry Sound, and Sault Ste. Marie to Timmins.

In addition, the NE LHIN's seniors' health summit in Sault Ste. Marie on March 18 and 19—Aging @ Home Successfully—offered a two-day opportunity to hear from experts about geriatric care, and provided extensive opportunities for small group discussions by more than 150 delegates.

The Aging at Home Detailed Services Plan identifies initiatives to be implemented in 2008-09 by NE LHIN planning area. Details on individual initiatives and the funding allocated for each will be released (and posted to the NE LHIN website) once the MOHLTC reviews the plan. The NE LHIN is also in the process of identifying strategies to implement new and innovative programs in our 2009-10 and 2010-11 Detailed Service Plans.

Ontario's Aging at Home Strategy is a $702-million investment over three years that will provide seniors and caregivers across the province with integrated, community-based services that enable them to stay healthy and live more independently in their homes. By 2011, the North East LHIN will have a base increase of $18.8 million to help fund aging at home programs and services across the North East.

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Providing health care in remote Ontario region brings challenge, opportunity and "the nicest people in the world"

Moose Factory chief of staff looks for constructive ways to solve issues

Dr. Murray Trusler of Moose Factory wants equity for all residents of Ontario and hopes the North East LHIN will play a positive role in making that possible for health care issues in his and other remote locations.

"There is a great need to provide equitable services and standards to First Nations communities in health care (especially public health), education, policing, water treatment, public infrastructure and housing," says Dr. Trusler, chief of staff at Weeneebayko General Hospital in Moose Factory."

He notes that LHIN 13 (North East Ontario) and LHIN 14 (North West Ontario) cover 85 per cent of the land mass of Ontario and serve as the home area of many Aboriginal peoples. Challenges in the remote Northern areas are many, but he's encouraged that the LHIN's "could take a role" in assisting in the coordination of health care, and in accessing services needed by remote-area residents. He encourages constructive collaboration among all players including: First Nations, federal and provincial governments, the Ontario College of Family Physicians and the LHINs. "So much can be done if we all work together to address the issues in the North."

Although born in Toronto, Dr. Trusler has spent his career living and learning in many areas of the world.

He's had a long association with native peoples, beginning his practice in 1967 on a reserve at Norway House in Manitoba. He then practised in Peterborough, Ontario for 26 years. He spent a locum year in Moose Factory in 1994, and began a nine-year work period in the Middle East in 1996 where he saw the "flip side" of the economic spectrum.

Along the course of his work, studies and travels, his family expanded to four children, one of whom is adopted from Moose Factory. Dr. Trusler returned to Canada in 2004, and specifically, to Moose Factory. He's been able to put his medical, business skills (he has an MBA from the University of Toronto), and knowledge of Aboriginal peoples (degree in Native Studies from Trent University, 1995) to very good use.

"I finished the tour in the Middle East and I'd had a good experience in Moose Factory. They offered an interesting job with breadth and depth, including some skills on the administrative side and a broad range of medicine. It's challenging but fun…I like the work, but I also like the people."

There are provincial differences in delivering health care in Ontario's north, according to Dr. Trusler. "Native patients have many socio-economic determinants of health that have contributed greatly to their shorter life expectancy (five years less for women and seven years less for men)," he says. "There are higher rates of diabetes mellitus , hypertension, atherosclerosis, renal failure, amputation, alcoholism, drug abuse and suicide."

Yet Dr. Trusler is hopeful that change will come through the collective work of the College of Family Physicians lobbying for provincial improvements, in collaboration with the LHINs and Aboriginal/First Nation/Métis communities. He notes that the challenges are both immediate and looming; with Aboriginal birth rates the fastest-growing in Canada.

Despite its size and remoteness, Dr. Trusler says opportunities abound in health care in his area. There's full-scope family medicine: family medicine clinics, hospital in-patient care, critical care, emergency medicine, obstetrics, trauma, coastal clinics and home visits. Skills upgrading is available in areas including ACLS and Emergency Ultrasound, and there's additionally "cultural experience with some wonderful patients."

Obstacles are similarly plentiful. "We're challenged by the severe poverty, lack of employment, poor education, illiteracy, poor infrastructure, overcrowded living conditions and the profound effects that these conditions are having on health status," says Dr. Trusler. "We're challenged by the lack of public health services, and by the need for better children's services in mental health and special needs (e.g. speech language pathology, FASD)."

Despite these issues, Dr. Trusler says: "The rosy picture is that we have the nicest people in the world here" noting that they tolerate conditions others might not.

Dr. Trusler provides sage counsel for other physicians who might be interested in serving the area. "Learn as much as you can about Native history, the treaties, the neocolonial events of the last three centuries including the reserve system, Native land claims, residential schools and current issues facing native people in Canada and the region in which you wish to practice," says Dr. Trusler. "Sharpen your clinical skills as you will need them."

His final advice: "When you arrive, learn from your patients. Be a good listener and hear their message."

The Weeneebayko Area Health Authority

A NE LHIN Board session held in Moose Factory on February 28, 2008 provided information about progress with the Weeneebayko Area Health Integration Framework Agreement. The WAHIF is an Agreement signed on August 31, 2007 between Health Canada, Ministry of Health and Long-Term Care (MOHLTC), the Town of Moosonee and First Nation Communities along the James and Hudson Bay Coasts. The Agreement will enable the establishment of the Weeneebayko Area Health Authority to amalgamate the federal and provincial hospitals; James Bay General Hospital and Weeneebayko General Hospitals respectively

As the primary, small Northern Ontario hospital, Weeneebayko General Hospital is 309 kilometres from the closest large health care centre—Timmins and District Hospital—and 1134 kilometres from its tertiary referral centre in Kingston, Ontario.

James Bay General Hospital is the Northern-most provincial hospital in Ontario, serving the communities of Attawapiskat, Fort Albany and Moosonee along the western shores of James Bay.

Recent meetings in Moose Factory demonstrate respectful, inclusive and productive dialogue between Aboriginal communities and the NE LHIN.

Health issues central to the James and Hudson Bay Coast areas were front and centre during a NE LHIN-sponsored community forum with health partners held at the Cree Village Ecolodge in Moose Factory on February 28.

The session provided information about progress with the tri-party Weeneebayko Area Health Integration Framework Agreement. The agreement merges the federal Weeneebayko General Hospital and the provincial James Bay General Hospital and paves the way for the integration of provincially funded health programs such as acute care emergency, dialysis, diabetes, community mental health and physician services with federally funded First Nation health programs such as primary care and community health services. The new Weeneebayko Area Health Authority will serve approximately 11,000 regional residents.

Wes Drodge, CEO of the James Bay General Hospital, and Pat Chilton, CEO of Weeneebayko General Hospital, as well as federal and provincial government representatives, outlined progress to date, challenges encountered, and next steps to move the agreement forward. These steps include the establishment of a Board of Directors expected to hold its first meeting by the end of April, the preparation of an integration schedule for health programs and services, and legal work which includes the development of a "Special Act" to legally validate the Agreement. Such an Act would be introduced to the province's legislative council by the local member of provincial parliament.

"This forum was all about gaining a better understanding of how we can all work together," noted Mathilde Gravelle Bazinet, Chair of the NE LHIN. "The North East LHIN will offer the support needed to facilitate the establishment of the Weeneebayko Area Health Integration Framework Agreement while working to ensure the delivery of quality health care services for all people living along the James and Hudson's Bay Coast."

The North East LHIN region is distinct and vibrant both culturally and linguistically with approximately 8% of the region's population being Aboriginal/First Nation/Métis. As the James and Hudson Bay Coast area is one of the NE LHIN's seven local planning areas, Moose Factory served as the site of the LHIN's public board meeting on Feb. 29. The North East LHIN's Board of Directors is representative of the vast geography of North East Ontario. Randy Kapashesit, Chief of the Moosecree Nation, is one of nine directors.

The North East LHIN's Integrated Health Service Plan guides the operations of the NE LHIN with a focus on seven priorities for 2007-2010, including Aboriginal health services. The NE LHIN wants to lay a foundation for the development of a respectful, inclusive and productive dialogue between Aboriginal communities and the NE LHIN. In this manner, access to health services, quality of care, and the health status of the Aboriginal First Nation and Métis population within the NE LHIN can and will be improved.

Two Interim Aboriginal Health Planning Groups were established in October 2007. One has representatives from the James and Hudson Bay Coast planning area; the other larger group has advised the NE LHIN on priorities and allocations to Aboriginal/First Nation/Métis communities for Year One of the Aging at Home Strategy. These groups are interim planning processes while waiting for the legislated Local Aboriginal Health Planning Entities (LAHPEs) to form.

Register Now! Aboriginal Summit - The New Health Environment

Registration is now available for the upcoming **Aboriginal Health Summit – The New Health Environment.** The two-day, no registration fee, event will explore how to use technology in health care planning and delivery and work towards identifying appropriate health planning bodies and processes within the NE LHIN while waiting for the development of the Local Aboriginal Health Planning Entities (LAHPE).

Wednesday-Thursday
May 14-15, 2008
Clarion Resort Pinewood Park
North Bay

Registration Information. Please stay tuned as more details will be posted to www.nelhin.ca in the weeks to come!

For more information:
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Staff of the Ecolodge in Moose Factory treated North East LHIN Board of Directors and staff to an energizing two-day visit in February 2008. From left to right: Lorraine Jolly; Andrea Jolly; Pam Corston; Cindy Sutherland; Celeste Rickard.

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Inaugural Health Professionals Advisory Committee (HPAC) Meeting

The North East LHIN's 12 inaugural members of its Health Professionals Advisory Committee (HPAC) met for the first time on March 28 to begin their crucial role.

Governed under a regulation of the Local Health System Integration Act, 2006, the committee will serve as a collective voice of health professionals. Members represent different health professions, health sectors, and geographical areas of our region. It is expected that each committee member will serve to represent the region as a whole while providing strategic advice to support the work of the North East LHIN.

Three remaining positions on the HPAC will be filled once the committee has reviewed gaps in membership. Inaugural members include:

Dr. Richard Benedict	College of Physicians and Surgeons of Ontario	Sudbury
Guylaine Bourget	College of Nurses of Ontario	North Bay
Sheila Damore-Petingola	College of Social Workers and Social Services Workers	Sudbury
Karen Hill	College of Nurses of Ontario	Iroquois Falls
Bev Lafoley	College of Physiotherapists of Ontario	Sudbury
Irene Lees	College of Dieticians of Ontario	Sault Ste. Marie
Jeff Lewicki	Ontario College of Pharmacists	North Bay
Dr. Derek Ng	College of Physicians and Surgeons of Ontario	North Bay
Yves Raymond	College of Physicians and Surgeons of Ontario	Timmins
Hélène Studholme	College of Respiratory Therapists of Ontario	Kirkland Lake
Cheryl Yost	College of Nurses of Ontario	Birch Island
Dr. Patricia Zehr	College of Physicians and Surgeons of Ontario	Sault Ste. Marie

The HPAC Chair will be selected at the next meeting which will be held in late May or early June.

NE LHIN envisions Healthier Francophones, community by community

French language health services update

The NE LHIN aims to ensure a continued consultation and participation process for the development of French language health services planning in the North East.

Partners with responsibilities for planning and improving French language health services in the North East worked with the NE LHIN to develop an interim collaboration plan based on a committed partnership and the optimal use of resources. Partners include: Réseau francophone de santé du Nord, Réseau de santé du Moyen-Nord and the Northern office of French Language Health Services. This interim collaboration plan will form the basis for supporting activities of the French Language Services Planning Entity.

Our vision is healthier Francophones, community by community.

Our objectives:

- Continuous improvement of quality, access, accessibility and integration of French language health services.
- Community empowerment and continued community engagement in order to impact the overall health system and improve health status.
- Accountability of health service providers to their community.

The Ministry of Health and Long-Term Care (MOHLTC) is also moving forward with the implementation of French Language Health Planning Entities. These will be advisory to the LHINs and will assist them in engaging the Francophone communities on matters related to the LHINs' mandate.

The NE LHIN will provide an update on the French Language Health Planning Entity once information is available.

Healthy Francophones in our Communities: Achieving Health… Together

More than 175 people gathered in Timmins, April 1-3 for a regional summit on the health of Francophones in North East Ontario.

Organized by the Réseau francophone de Santé du Nord de l'Ontario in collaboration with the NE LHIN, the Summit focused on three themes:

- The management and prevention of chronic diseases
- Health for Francophones and the importance of cultural competency
- Citizen engagement and participation.

Among the distinguished list of guest speakers was: Minister of Health and Long-Term Care, Honourable George Smitherman (via videoconference) Minister of Community and Social Services and Minister Responsible for Francophone Affairs, Honourable Madeleine Meilleure and Ontario's French Language Services Commissioner, Francois Boileau.

Summit proceedings will be posted to **www.nelhin.on.ca** over the next few months.

More than 175 delegates gathered at the Francophone Health Summit in Timmins, April 1-3. Left to right: NE LHIN Board of Directors members Marc Dumont and Johanne Labonté; Honourable Madeleine Meilleure, Minister of Community and Social Services and Minister responsible for Francophone Affaires; NE LHIN Board Chair, Mathilde Gravelle Bazinet; and NE LHIN CEO Rémy Beaudoin

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North East Seniors' Residential / Housing Options - Capacity Assessment and Projections

The NE LHIN's ALC Task Force Report (December 2007), ALC Action Plan (December 2007) and Aging at Home Strategy Directional Plan (October 2007) all point to the need for adequate and appropriate housing options for seniors across the North East.

As a result, the NE LHIN is undertaking a comprehensive study (to be completed by the end of August 2008) assessing the current seniors' housing system within the NE LHIN and outlining future requirements at the local level for the range of housing services/options needed.

A number of key goals have been identified for this project:

- Analysis of Long-Term Care Bed Requirements: To develop a regional plan for future LTCH beds and associated resource requirements.
- Retirement Home/Assisted Living Options: To investigate collaborative models to increase access to retirement home/assisted living environments.
- Supportive Housing Options: Given the close relationship of seniors' supportive housing to LTCHs and retirement living, to assess the potential for expanding the role of seniors' supportive housing in meeting the accommodation and care needs of the seniors' population.
- Other Options: To investigate potential requirements for secondary services, including convalescent care beds and residential hospice beds.

The study findings and recommendations will be at the level of the seven LHIN planning areas (i.e. Algoma, Cochrane, James/Hudson Bay Coasts, Manitoulin-Sudbury, Nipissing, Parry Sound and Timiskaming) and sub-planning areas where appropriate.

Over the next few weeks, a Project Committee will be established and a consultation strategy will be developed to ensure that a broad range of input into the project is received. Please visit the Aging at Home section of **www.nelhin.on.ca** or contact **philip.kilbertus@lhins.on.ca** for more information.

North East CEO Round Tables come together for first time…

On March 26 and 27, the North East LHIN's CEO Round Table members met in North Bay for a two-day retreat. Since being formed in March of 2007, this was the first time the membership of the Round Tables were brought together to discuss common issues. The goals of the two-day meeting were to:

- Take stock and reflect on the past year's Round Table achievements;
- Discuss and come to an agreement on key issues of common interest to all of the Tables;
- Build a decision making framework that would assist all Round Tables;
- Provide an opportunity for Round Table members to network with one another; and
- Continue to build a strong network of heath service provider CEO's across the North East.

Round Tables are comprised of CEOs from health service provider agencies and institutions. Their role is to assist the NE LHIN to implement the strategic directions of the NE LHIN's Integrated Health Service Plan at the local planning area level. Tables provide health system advice and implement strategies to meet the NE LHIN strategic directions. Investments made into the North East health care system is reviewed and endorsed by the CEO Round Tables before being brought forward to the NE LHIN Board of Directors.

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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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