Upcoming Events

December 1

WWLHIN Board Meeting

6 p.m. to 9 p.m.

50 Sportsworld Crossing, Suite 220,
East Building, Kitchener

Rehab Review

The WWLHIN, in partnership with its health service providers, is undertaking a review of rehabilitation services in Waterloo Wellington. The purpose of the review is to identify opportunities to streamline the rehabilitation system to increase access to care and provide better outcomes for patients. Completing the review will require the input and expertise of those working in the field, as well as patients of rehab services and their families. This is your opportunity to help shape the vision for rehabilitation services in Waterloo Wellington.

Fill out a survey online to share your ideas. Visit *www.wwlhin.on.ca* and click on "current projects" and then "rehab review". For more information, contact: Rehab Review project coordinator Emmi Perkins at: *eperkins@gghorg.ca* or 519-827-7358.

Health Service Provider Profile

Trellis Mental Health and Developmental Services

Fred Wagner, Executive Director, Trellis

What type of services does your organization provide?

Trellis' mission, values and approach to service delivery is based on the philosophy of recovery/resiliency. This philosophy places the focus of care on helping people recover mastery over their lives and achieving fulfillment and meaning despite dealing with serious mental health challenges or developmental disabilities. Services are centered on the client and strive to help clients take charge of their lives, achieve optimal health, pursue their hopes and dreams, and contribute as full and valued members of the community.

When/How did your organization start?

Trellis Mental Health and Developmental Services was established in 1967. Trellis provides services for citizens throughout the catchment area of Guelph, Wellington, Dufferin and Kitchener-Waterloo.

The agency is sited across a network of offices in Guelph, and Branch offices in Orangeville, Mount Forest, Fergus and Kitchener. Visiting/satellite services are provided to Arthur, Erin, Palmerston, and Shelburne.

How can someone access your services?

Our services can be accessed through our central intake number 519-821-3582. Our mobile crisis service is accessed through Community Torchlight and outreach staff who work in the community.

What would your clients say is the best thing you do?

Clients expressed a high degree of satisfaction (75% or higher) in our recent client survey in the following areas. They reported that we: treated them with respect; honoured their unique background, situation or abilities; fully involved them in decisions about their care; did all we could to support their health and safety; communicated in ways that were clear; and protected their privacy

What is your favourite part about your work?

The variety and satisfaction from working with staff and community partners to find creative and innovative ways of making a difference in the lives of those we serve.

To read the full profile, visit *www.wwpartnersinhealth.ca* and click on Profiles.

Fred Wagner, Executive Director

For more information, contact Fred at 519-821-2060 ext. 260 or *fwagner@trellis.on.ca.*

LIVE AND LIVE WELL IN WATERLOO WELLINGTON

Waterloo Wellington Local Health Integration Network

50 Sportsworld Crossing Rd., Suite 220, East Building | Kitchener, ON N2P 0A4 | Tel: 519-650-4472 Toll Free: 1-866-306-5446 | Fax: 519-650-3155
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Veuillez communiquer avec nous pour obtenir un exemplaire de ce document en français.

Ontario

Waterloo Wellington **LHIN** *WWLHINformation*

October 2011

When being home is all that matters - 'Home First' gets you there

Philosophy helps patients go home from hospital with enhanced supports, reduces ALC Days

Gord Black was known for many things – his sense of humour, his love for his wife and daughter, blue plaid shirts, and the attachment he had to his family home in the country. 'Black's Ponderosa' as it's affectionately called, is surrounded by lush gardens, farm fields, and a sense of pure calm and relaxation.

The Black Family – Glenna, Debbie, and Gord.

In the middle of January, Gord had a sore throat. As a healthy 75 year old, his family didn't think too much of it. However, when after a week the swelling hadn't gone down, they took a trip to the emergency department at Groves Memorial Hospital in Fergus. An x-ray and further testing confirmed the worst, Gord had cancer.

"My dad was a fighter," shared his daughter Debbie. "After his first chemotherapy session he went snowshoeing in our backyard." After three rounds of chemotherapy, and radiation treatments, Gord's health began to rapidly decline. With a tumour in his neck, eating became difficult and he had a feeding tube installed. Shortly after, he was admitted to Groves Memorial Hospital for palliative care.

"My parents were married for 47 years, and they calculated that in all that time, they had only ever spent 17 nights apart," said Debbie. "My mom, Glenna, stayed in the hospital with dad, sleeping in a chair by his bed. This really upset my dad. He became very agitated and kept trying to get out of bed to be closer to her. Each day, all he said was that he wanted to go home."

Susan Klausen, the Black's Waterloo Wellington Community Care Access Centre (WWCCAC) Case Manager, and his palliative care doctor, Dr. Chris Lund, gathered Gord's family together to talk about the potential for Gord to go home. Local hospitals, in partnership with the WWCCAC, have implemented the 'Home First' philosophy which makes going home from hospital, where most non-acute patients want to go, the first option.

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This helps patients to receive quality care in the most appropriate place, while reducing alternate level of care (ALC) days in hospitals.

While Debbie and Glenna wanted him home, some of their family members were concerned. Glenna has Alzheimer's Disease and Debbie, as a result of a terrible accident in her twenties, is in a wheelchair. They weren't sure they could manage his care at home.

"Just then, dad woke up and said 'Go home, Go home, Go home'," said Debbie. "That was it; we all decided that we would do whatever it took to bring him home. Family and friends stepped up to offer assistance, and Susan was incredible. She arranged for nursing and personal support care, medical equipment, a hospital bed, and a pain pump."

On May 18th, two days later, Gord was able to go home. "When they took him out on the stretcher he smiled. When he saw the house he did a little wiggle happy dance. That made it all worth it," said Debbie. "That night, we all sat around with dad and listened to music and held hands. He relaxed as soon as he was at home."

The next afternoon, cuddling with his wife and surrounded by his family, Gord passed away peacefully in his own home. Debbie and Glenna are extremely thankful for the support they received to bring him home.

"If we hadn't got dad home, where he wanted to be, I don't think we would have the peace of mind we have today," said Debbie. "Nothing feels as good as being home. When you're in your home, surrounded by all of the people you love, you feel comfortable, even in the most uncomfortable state. For dad, to be home was all that mattered and without 'Home First', it wouldn't have been possible."

ALC patients are those waiting in hospital for care in a more appropriate place such as home with supports, long-term care, palliative care, rehabilitation, mental health care, and more. This can increase wait times for other patients needing a hospital bed.

Supportive Housing Provides Foundation for Better Health

New Addiction Supportive Housing program reduces health system usage and ED visits

Addiction Supportive Housing Workers Liz Boston and Rachel Davies

For Mike*, holding down a job was extremely difficult. Struggling with an addiction to alcohol and related health issues prevented him from working, which resulted in him being frequently homeless. Being unable to focus on surviving and recovering at the same time left him in a hopeless cycle of crisis treatment and relapse.

In 2010, Stonehenge Therapeutic Community opened a pilot transitional housing program that would serve as a bridge for those who complete treatment and need a place to live while they find work and get back on their feet, and focus on staying clean and sober.

With funding from the Waterloo Wellington Local Health Integration Network, and through a partnership with Waterloo Regional Homes for Mental Health, House of Friendship, and the Canadian Mental Health Association Grand River Branch, local residents now have access to permanent and transitional Addiction Supportive Housing units.

Twenty-one units are currently open, three in Cambridge, eight in Guelph, and ten in Kitchener-Waterloo. An additional eleven units will open this fall, one in Cambridge, four in Guelph, two in Kitchener-Waterloo, and four in rural Wellington County.

The residents receive housing and other support services tailored to their needs. This can include addiction counselling, health teaching and lifestyle support, employment services, basic life skills, access to other health services, and more.

The program aims to provide those struggling with an addiction a safe, welcoming and supportive place to recover that will: increase overall health, increase housing stability, reduce the number of visits to the emergency department, reduce the number of readmissions to addiction treatment programs, and reduce use of police and ambulance services.

For Mike, access to safe housing was life-changing. He completed Stonehenge's long-term treatment program and moved into addiction supportive housing. There, he found a safe place with others he could relate to.

"After a few months, he was able to begin working again. He saved up money and moved to his own apartment where he is accessing after-hours community programs for continued support. Without housing he would have been forced to move into a non-supportive environment where his recovery would have been compromised. Instead, as a result of the addiction supportive housing, he is thriving on his own, working, and enjoying his life," shared Addiction Supportive Housing Worker Liz Boston.

** Note: Client's name has been changed to protect their privacy.*

Focusing on our
Integrated Health Service Plan

eHealth is a key enabler of success in achieving the goals in our IHSP

Online Patient Records Enhancing Care for Two Million Ontarians

Dr. Mohamed Alarakhia demonstrates the use of ClinicalConnect at the Centre for Family Medicine in Kitchener.

Dr. Alarakhia reviews a patient's information with RPN Shelley Schulz on ClinicalConnect.

More people across the Waterloo Wellington (WW) and Hamilton Niagara Haldimand Brant (HNHB) Local Health Integration Networks (LHINs) now have access to better quality and more efficient health care, thanks to an eHealth initiative that gives health care professionals access to real-time patient information.

ClinicalConnect, a secure online portal, which can be accessed across the two LHINs by more than 2,500 health doctors, nurses and pharmacists, allows health care providers to view patients' medical information online, including hospital admissions, allergies and lab results from 28 local hospitals and two Community Care Access Centres (CCACs).

This information allows health care providers to make better and more informed decisions on patient care. The portal can also help to reduce the need for repeat lab and diagnostic tests and the time hospital staff spend sending patient information and test results to primary care providers.

"ClinicalConnect helps me to provide safer and more efficient care for my patients. When one of my patients is hospitalized, I can go online and look at the tests they had, what medications they were put on, and what their discharge plan is. When the patient arrives in my office, I have all the information I need to care for them right away," said Dr. Mohamed Alarakhia, Centre for Family Medicine, Kitchener.

The WWLHIN, in collaboration with health service providers, is continuing to improve the quality of care local residents receive by expanding access to ClinicalConnect to an additional 2000 users and 60 healthcare providers.

For more information visit: www.wwlhin.on.ca and click on "eHealth".

Message from the Chief Executive Officer

The last few months have been filled with great news for the health care system in Waterloo Wellington, and especially for local residents.

In this edition of the WWLHINformation Bulletin, you will read about an eHealth initiative that has improved the safety and quality of primary care that more than two million patients receive. You will hear the story of the Black Family from Fergus and how the 'Home First' philosophy helped their dad to receive care where he wanted it most - in his home. You will also learn about a new Addiction Supportive Housing program that provides a safe and supportive environment for those struggling with an addiction to recover.

All of these accomplishments are a testament to what we can do when we work together. I would like to take this opportunity to thank our health service providers, their staff, volunteers, and physicians, for their ongoing efforts to improve the quality of, sustainability of, and access to care in our local health system. Together, we will continue this important work on behalf of local residents.

In partnership with our health service providers, we are making a real difference in the lives and health of local residents. If you have a story you would like to share, as a provider or patient/client/resident, please feel free to contact our office. We look forward to your comments and feedback.

Sincerely,

Bruce Lauckner,
Chief Executive Officer