North Simcoe Muskoka **LHIN**
RLISS de Simcoe Nord Muskoka

North Simcoe Muskoka
Care Connections
Partnering for Healthy Communities

Simcoe Nord Muskoka
Connexions des soins
Partenariat pour des communautés en santé

NSM LHIN Leadership Council

Update #13-1 | January 9, 2013

Long-Term Care Homes

- Repatriation Agreement Update

- ***Tanya deVries Porter, Director of Resident Care, Trillium Manor***

In May 2010, the NSM Leadership Council approved the *Accountability & Collaboration Agreement for Reciprocal Inter-Facility Patient Flow* known as the Repatriation Agreement, which was signed by all NSM hospitals and the NSM CCAC. The Repatriation Agreement allows for the transfer of patients from one hospital to another, with the understanding that once a patient has received the care they need from a receiving hospital, that hospital will be able to transfer the patient back to the sending hospital.

In May 2012 NSM long-term care homes were asked to be part of the Repatriation Agreement, addressing the repatriation of residents back to long-term care homes once their acute episodic care had been taken care of in hospital.

The long-term care homes identified recommendations they felt needed to be implemented prior to signing on to the Agreement. Initiatives such as the NSM Behavioural Support System, enhancement of Nurse Practitioner Outreach Teams, streamlining of infection control procedures, addition of Ontario Telemedicine Network terminals in three of the long-term care homes, have addressed some of these recommendations. Ten recommendations still need to be moved forward.

Leadership Council acknowledged the amount of work Tanya and the long-term care homes had accomplished to date and thanked Tanya for their commitment.

Integrated Health Service Plan 2013-2016

Based on the comprehensive and collaborative engagement that occurred over the fall of 2012, the draft Integrated Health Service Plan (IHSP) details the North Simcoe Muskoka strategic priorities for the next three years. The work outlined within the IHSP builds on the commitment already demonstrated during the first two years of ***Care Connections***.

The draft IHSP was reviewed by Leadership Council at their meeting. With the addition of some minor edits, the Council recommended that the NSM LHIN Board of Directors approve the draft document.

Care Connections

In Home and Community Capacity Council (IHCC)

- ***Elisabeth Riley, Chair***

From 2010 – 2012, the work of the IHCC has been driven by the work of the ALC Project Steering Committee. With an increasing focus on community health services, the importance of community based leadership for IHCC was recognized. In addition, with identification of the need to shift the focus to root cause factors of Alternate Level of Care (ALC) and the role and care of seniors in our health system, a new IHCC structure needed to be drafted.

As a result, the OSMH Board of Directors passed a motion in late 2012 to step down as lead agency for IHCC in favour of a community based organization.

Two community organizations expressed interest in a joint leadership role – the NSM Community Care Access Centre (CCAC) and Independent Living Services of Simcoe County (ILSSC). The Boards of the CCAC and ILSSC have supported their roles and the Community Support Sector (CSS) Collaborative has endorsed the role of ILSSC as a CSS Collaborative representative.

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Numerous iterations of the IHCC structure have been proposed and discussed over the last year. Using *right person, right care, right place, right time* as a focus and considering the root causes underlying ALC, two steering committees are being proposed for the new IHCC Council:

- Seniors Care Strategy
- Community Capacity

As such the Leadership Council supported the following motions:

That NSM LHIN Leadership Council recommends to the NSM LHIN Strategy Oversight Committee that the North Simcoe Muskoka Community Care Access Centre and Independent Living Services of Simcoe County be jointly appointed as the new lead organizations for the In-Home & Community Capacity Coordinating Council, effective February 1, 2013.

That the NSM LHIN Leadership Council recommends to the NSM LHIN Strategy Oversight Committee support for the changes to the IHCC structure, effective February 1, 2013.

Surgery Council

- ***Linda Davis, Chair***

With the LHIN-wide musculoskeletal surgery initiative moving forward, Ms. Davis stated the Surgery Council has discussed its next area of focus. Three areas were identified: urology, ophthalmology, plastics. After much deliberation, the decision was to focus on plastic surgery, as much of the planning work has already taken place and a draft proposal developed over two years ago. Recruitment of manpower to NSM has also occurred.

The following motion was supported:
On the recommendation of the Surgery Coordinating Council the NSM Leadership Council supports Plastic Surgery as the next area of focus for the Surgical Coordinating Council and for the Council to begin work immediately on a LHIN-wide Plastic Surgery service.

Ms. Davis commented that the Surgery Council had had a fair amount of conversation on how to continue maintaining five viable acute care hospitals in our LHIN. It was recognized that surgery is a specialty with an elective component. Without surgery, other providers and areas are impacted . Ms. Davis requested this topic be tabled for discussion at a future Leadership Council meeting.

Coordinating Councils Quarterly Reports

Governance Council

- ***Bob Morton, Chair***

Susan Plewes reported on behalf of the Chair that work continues with the boards of the 77 LHIN-funded health service providers. Focus this quarter is on the governance component to the five community planning discussions taking place during January.

Maternal, Newborn, Child & Youth Health Council

- ***Elisabeth Riley, Chair***

The first geographic site meeting took place in Orillia in December. Information pertaining to maternal child services in Orillia and surrounding area were presented. On December 17th an interministerial meeting between the LHIN, Child and Youth Services and Education took place. Further work will be forthcoming from this meeting.

Medicine Council

- ***Janice Skot, Chair***

Ms. Skot noted the Integrated Vascular Steering Committee's Percutaneous Coronary Intervention (PCI) business case is in final stages of development and will be going to the RVH board in January. PCI is more commonly known as coronary angioplasty and is a standard of care that currently is not available in NSM. The committee is looking to establish an inter-LHIN PCI service in partnership with Southlake Regional Health Centre.

Revised Medicine Council terms of reference were presented to Leadership Council by Ms. Skot, which were subsequently approved .

Ms. Skot reported that Dr. Onlock will be stepping down as the LHIN's Emergency Department Lead and Dr. Didiodato's term as LHIN Critical Care Lead will end March 31, 2013. Work has begun on recruitment for both positions.

Mental Health & Addictions Council

- ***Carol Lambie, Chair***

Ms. Lambie commented on the amount of work that has been undertaken by this council and its three project steering committees. The committee responsible for the Schedule 1 bed distribution is now working on the implementation of a LHIN-wide program and the associated protocols and processes.

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The Child and Adolescent Mental Health committee has created a workplan and over 30 recommendations are moving forward.

The ministry's provincial focus on children's mental health has been very good in helping the committee address issues that span other areas including Child and Youth Services and Education.

System Navigation Council

- ***Karen Taillefer, Chair***

The System Navigation Lead began work on October 22nd. Work continues on linking the Chronic Disease Prevention and Management website to the NSM Healthline site.

The Council will be working to support the new primary health care initiative known as Health Links.

Presently the Council is reviewing the possibility of Community Connections/Healthline acting as the LHIN-wide inventory for all mental health and addictions services in North Simcoe Muskoka.

Health Links Update

Susan Plewes provided the Health Links update. The ministry's new Health System Transformation Secretariat is responsible for the roll-out of this initiative, led by Associate Deputy Minister, Helen Angus.

Health Links will see a collaboration of providers working together to serve populations of up to 50,000 people. The 19 early adopter Health Links, 2 of which are located in NSM – Barrie Community Health Link and South Georgian Bay Health Link – will be focused on the 5% high needs users of the health care system. Ensuring patients have a primary care physician and coordinated access to quality, effective care will be a priority.

Business plans for NSM's two Health Links must be submitted to the LHIN by February 18th and then moved on to the ministry by February 22nd. The plans must outline implementation objectives to ensure significant improvements in care for this 5% of the population.

The Health Link model follows that of Behavioural Supports Ontario in that early adopters will take the lead on rolling out the initiative, providing feedback to others that are interested in being designated as Health Links.

In order to keep moving Health Links forward in North Simcoe Muskoka, the LHIN has been in discussion with organizations in Orillia, Midland-Penetanguishene and Muskoka.

The Aboriginal Health Circle will be discussing the opportunity to act as a LHIN-wide Health Link serving Aboriginal and First Nations populations.

The Couchiching Family Health Team and their existing partners would serve the Orillia area.

The District of Muskoka is looking at a Health Link that would serve the six townships that make up the District.

Next Meeting

- Wednesday, February 13, 2013 - 4:00 - 7:00 p.m.

Questions? Please feel free to contact the LHIN at northsimcoemuskoka@lhins.on.ca.