

North East LHIN

2011-2012 Annual Community Engagement Plan

April 1, 2011 to April 1, 2012



Ontario

Local Health Integration
Network

Réseau local d'intégration
des services de santé

Table of Contents

About the NE LHIN	3
Introduction	4
Keeping General Public Stakeholders Engaged and Informed.....	5
Focus Engagement Areas for 2011 – 2012	6
NE LHIN Community Engagements.....	7
Evaluation of the 2011 – 2012 Engagement Plan	11
Contact the NE LHIN	11

About the NE LHIN

The North East Local Health Integration Network (NE LHIN) is one of 14 crown agencies established by the Ministry of Health and Long-Term Care (MOHLTC) to bring together health service providers in different geographic areas of Ontario to improve access to care and coordinate health care services.

In Northeastern Ontario, the NE LHIN works with 186 health service providers including, 25 hospitals, 42 long-term care homes, 64 community support services, the Community Care Access Centre, six community health centres, and 48 mental health and addictions services. The NE LHIN operating budget for the 2011-2012 year is \$1.2 billion, which flows directly to front-line health service providers.

Governed by a nine-member Board of Directors from across Northeastern Ontario, decisions about local health care spending are made at public board meetings held in communities across the region.

The NE LHIN region is a unique part of Ontario both linguistically and culturally. Covering a massive 400,000 square kilometres of rugged, Northern landscape, it stretches from Parry Sound to the Hudson and James Bay Coasts, and from Sault Ste. Marie to Mattawa.

Most importantly, the NE LHIN is home to 550,000 residents. Close to 24% of Northerners are Francophone and almost 10% are Aboriginal/First Nation/Métis. Our residents are dispersed: 60% live in four urban centres and 40% live in 162 small cities, towns, townships, villages, municipalities, unorganized areas and First Nations. Significantly, 17% of the NE LHIN is aged 65 and over, compared to 14% for Ontario.

Our detriments to health are higher than the provincial average for: daily smokers, heavy drinkers, obesity and chronic disease. Along the Coast, there is a 24% incidence of diabetes, versus 9% in Ontario.

Fundamental to all NE LHIN initiatives is community engagement and its essential partner, communications. The purpose of community engagement is to inform, educate, consult, involve and empower stakeholders in health care planning to ensure the local health care system is reflective of the needs of Northeastern Ontarians. Communication plays a vital role in this effort to support the sharing and gathering of information.

The large NE LHIN region is divided into five HUB regions based on hospital referral patterns and planning areas. This allows the NE LHIN to better serve and engage its population and to foster a more enhanced local health care system. The HUB regions are:

- Sault Ste. Marie/Algoma
- Cochrane/Temiskaming
- Sudbury/Manitoulin/Parry Sound
- Nipissing
- James and Hudson Bay Coasts

The NE LHIN builds many bridges to enable community engagement: face-to-face meetings, public participation in Board meetings, newsletters and media releases, interactive website postings, and social media including Facebook, Twitter, and YouTube. Information is made available in both English and French and in a plain language style that increases transparency and trust.

In that spirit, and in accordance with provincial guidelines for community engagement, this document outlines the NE LHIN's Community Engagement Plan for 2011 – 2012.

Introduction

Community engagement is referenced as a requirement of the LHINs in the Local Health Systems Integration Act (LHSIA), 2006. Provincial guidelines for LHINs, approved by the Government in February 2011, ensure community engagement is approached consistently across the province.

Section 16.2 of LHSIA defines “community” as patients and other individuals in the geographic area of the network, health service providers and any other person or entity that provides services in or for the local health system, as well as employees involved in the local health system.

The NE LHIN is accountable and responsive to the public's contributions through the organization's communications and community engagement practices – reflected in the September 2010 NE LHIN Communications and Community Engagement Strategy (posted to www.nelhin.on.ca).

This plan is intended to provide a general overview of activities planned within the current fiscal year. It also outlines opportunities to receive and implement stakeholder input into the priorities identified in the [NE LHIN's current Integrated Health Services Plan \(2010 – 2013\)](#) and [Annual Business Plan \(2011 – 2012\)](#). This plan further outlines how the NE LHIN will:

- Engage with its stakeholders and members of the public and connect their efforts to NE LHIN planning and integration efforts.
- Enhance awareness of health care issues across Northeastern Ontario communities through mutual information sharing.
- Identify discussion items of mutual concern or interest.
- Evaluate the effectiveness of community engagement activities.

While this plan provides a structure for ensuring community engagement components in the work of the NE LHIN, it also provides flexibility to welcome and incorporate community engagement opportunities that arise over the course of the year. Community engagement activities related to individual projects will be identified in project-specific plans developed in-year and at a time that is appropriate to meeting project objectives.

This plan will be complemented by our use of the [Physician Community Engagement Toolkit](#) that is posted to our [community engagement web page](#). The NE LHIN will be seeking opportunities to work with the local chapter of the Ontario Medical Association (OMA) to distribute relevant project-specific materials to primary care providers (Home First initiative), orthopaedic surgeons across the North (joint assessment work), and our medical leads for access improvement projects for both hospital emergency departments and critical care.

Our Communities

Health Service Provider Community

Engagement of the health service provider community is active and ongoing in the NE LHIN.

In 2011 – 2012, the NE LHIN is responsible for 186 health providers:

- 25 Hospitals
- 42 Long-Term Care Homes
- North East Community Care Access Centre
- 6 Community Health Centres
- 48 Community Mental Health and Addictions Services
- 64 Community Support Services

In addition to funded service providers, the NE LHIN territory is home to:

- 533 family physicians
- 27 family health teams
- 4 public health units
- 6 nurse practitioner-led clinics
- 16 nursing stations.

These primary care providers are an essential part of the NE LHIN health service provider community and critical to ensuring alignment of the health delivery system.

Northeastern Ontario Communities

- The NE LHIN region covers 400,000 square kilometres and is home to 550,000 residents.
- 24% of residents are Francophone.
- 10 % are Aboriginal, First Nation or Métis.
- 60% of people live in four urban centres; 40% live in 162 small cities, towns, townships, villages, municipalities, unorganized areas and First Nations.
- 17% of the NE LHIN is aged 65 and over, compared to 13% for Ontario.
- By 2030, the number of people age 65 and over in Northeastern Ontario is expected to rise to 30%.
- The NE LHIN region is challenged with youth out-migration and a decline in population (between 1996 and 2006, the NE LHIN population declined by 5.2% compared to the province which increased by 13.1%).

Keeping Public Stakeholders Engaged and Informed

In a process of continuous improvement, the NE LHIN will work throughout the year to ensure that its messages are being received and understood, and that the NE LHIN as an organization is providing ample opportunity to adjust its efforts when needed in order to ensure that the public's interests, related to accountability and transparency, are being met.

In its ongoing effort to keep our communities informed, the NE LHIN will continue to use, among others, the following communication vehicles:

- On-going dialogue through newsletters, communiqués, on-line chat rooms, community presentations, proactive media liaison.
- LHIN 101 education sessions, presentations and round table discussions with community groups.
- Web posting of public accountability reports such as the NE LHIN Annual Report and Annual Business Plan
- Public meetings of the Board of Directors, at locations across the Northeast.
- Use of Facebook, Twitter and YouTube

Any member of the public can provide input and feedback to the NE LHIN at anytime. We have a [community engagement webpage](#) on our site and an e-mail address engagingwithyou@lhins.on.ca, or people can call 1-866-906-5446.

Focused Engagement Areas for 2011 – 2012

This fiscal year, the NE LHIN will concentrate on engaging with our health service providers by looking at the 25 hospital communities – that is those communities in which a hospital is located – as well as the larger geographic area the hospital serves. While the NE LHIN will conduct other engagements during the year ([see page 7](#)), our main focus will be community engagements by HUB region.

Close to 64% of the \$1.2 billion NE LHIN budget is allocated to Northeastern Ontario's hospitals. Two situations are happening at the same time. There is an economic restraint on public purses, and there is a significant shift in demographics taking place in Northeastern Ontario. The latter involves a renewed desire to care for people, notably the frail elderly, either at home or in the community. The time is right to hold discussions on how best to allocate the NE LHIN investment in our communities.

In Northeastern Ontario, the forecast is that the population aged 65 and older – currently 17% – will soar to 30% by 2030. It is also a reality that many of our communities are challenged with some of the highest rates of ALC (alternate level of care) patients. These are generally the frail elderly who remain in hospital after acute care as they await placement to another setting within the community or a return home under the Home First philosophy. In addition, many of our communities are challenged with youth out-migration, a dampened local economy, and a decline in population (between 1996 and 2006, the NE LHIN population dropped 5.2% while Ontario grew by 13.1%).

Engagements this Fiscal year will focus primarily on two areas.

Focus #1 –Conversations with Health Service Providers

Putting the focus on improving patient access to local care

The NE LHIN will continue its dialogue, resulting in action, with health service providers across the region. Between May and June, 2011, engagements will focus on:

- Where are the opportunities for horizontal or vertical integration within your area?

- What are the benefits of better aligning clinical services into a more integrated system?
- Are there opportunities to reduce administrative burden and divert more resources to direct patient care?
- What can be done to improve access to health care programs and services for people served by your organization in your area?

Focus #2 – Conversations with Communities

Putting the focus on local health care planning and decision-making

The health care system is fundamentally a structure that is all about people and their care. When it comes to transforming the system, the NE LHIN wants to make certain that local voices are heard. It is, indeed, a challenging endeavor to provide the right care, in the right place, at the right time, at the right cost, given our huge geography. In a spirit of patient-centered care, the NE LHIN wants to ensure that its investments are being made in the right places to effectively meet the health care needs of people living in our communities. Transparency in NE LHIN communication is intended to foster the public trust that is essential for productive dialogue. Engagements will focus on these topics:

- Are NE LHIN health care investments in your community aligned with the needs of people living here?
- Are there opportunities for your local health service providers to better coordinate their services in a more integrated and patient focused way?

NE LHIN Community Engagements

Important note: *As the year progresses, this list will be expanded as new opportunities arise. The most current list of community engagement activities will also be posted to www.nelhin.on.ca.*

April 2011

Network 13 (Health service providers from across the Timmins District)

April 13, Timmins

Health Service Provider Engagements

April 11-13, New Liskeard, Englehart, Kapuskasing

Engagement with HUB leaders (CEOs and Chairs from region's four large hospitals and NE CCAC)

April 13-14

Timmins

NE LHIN ALC Community Steering Group Meeting

April 21, 8:30 to 10:30, Sault Ste. Marie

North East LHIN Health Human Resources Steering Committee

April 21, 1:30 to 3:00, Web Conference

North East LHIN Health Human Resources Steering Committee

April 21, 1:30 to 3:00, Web Conference

North East and North West LHINs Leading Quality Session with Long Term Care Homes

April 28, 12:30 to 1:30, Webinar (collaboration with Health Quality Ontario)

Engagement with Family Health Team Executive Directors

April 29, Sudbury

May and June 2011

Engagement with Health Service Providers in Cochrane/Temiskaming Hub (Temiskaming region only)

May 3, 1:30 to 3:00, Englehart

NE LHIN and NW LHIN Northern Telemedicine Forum

NE LHIN CEO Keynote Address

May 6, 8:15 to 4:30, Sault Ste. Marie and Thunder Bay

NE LHIN Community Support Services Forum

May 11, 8:30 to 4:00 and May 12, 8:30 to 3:10

Sudbury

NE LHIN CEO Keynote Address

Federation of Northern Ontario Municipalities

May 11-13, Timmins

Sudbury ALC Community Steering Group

TBD, Sudbury

NE LHIN Board Meeting

May 31, 2:00, Teleconference

Parry Sound ALC Community Steering Group

June 21

HBAM – Health Based Allocation Model Workshop With Hospitals

June 9th, 1-4:00 pm

Sudbury

Engagements by HUB – Tentative Schedule
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Parry Sound

May 17 – Community (Parry Sound Rotary Club)

HSPs (Parry Sound Health and Social Service Committee)

Cochrane – Four Engagements

Dates TBD

1. MICs – Matheson, Iroquois Falls, Cochrane Hospitals
2. Timmins
Community (Tentative June 8th, evening)
HSP (Network 13, 10:30 am-1:00 pm)
3. Kapuskasing, Hearst, Smooth Rock Falls
4. Combined meeting with stakeholders 1 to 3 above.

Algoma – Four Engagements

Dates TBD

1. Wawa (June 28)
2. Hornepayne (June 29)
3. Blind River, Thessalon, St. Joseph's Island (June 30)
4. Sault Ste. Marie

Nipissing – Four Engagements

Dates TBD

1. Nipissing District
2. Mattawa
3. West Nipissing
4. Powassan

Sudbury-Manitoulin – Six Engagements

Dates TBD

1. Espanola and Manitoulin Island (June 27)
2. Chapleau
3. Elliot Lake (June 15)
4. Sudbury (mental health sector)
5. Sudbury (community support services sector)
6. Sudbury East (June 10th)

Hudson and James Bay

Dates TBD

Ongoing Engagements

- **Anchor Agency** -- In October 2010, the NE LHIN supported the creation of an Anchor Agency in Algoma which will bring together 18 service providers and 129 mental health and addiction services. Planning for this integration continues. Engagements with Algoma mental health and addiction providers and consumers will continue throughout 2011. – [Algoma Anchor Agency webpage](#).
- **Rural Health Care** -- In September 2010, the NE LHIN held a Rural Health Care Summit in Sault Ste. Marie which brought together the region's 22 rural hospitals and its four larger hospitals, in addition

to the North East CCAC and the Northeast Mental Health Centre. In 2011, rural health care summits will be held by HUB area in the fall.

- **Engaging with Physicians** -- The NE LHIN will engage with primary care providers through its work on Home First, Surgical Optimization, the North East Hip and Knee Replacement Program, the Health Human Resources Steering Committee, and through our two primary care leads for emergency departments and critical care. As other physician engagement opportunities arise, they will be considered throughout 2011.
- **North Shore Rural Health Model** – The North Shore Rural Health Model Committee was established in 2010 to facilitate the development of Lake Huron’s North Shore Algoma Area Rural Health Model. In 2010 and the first part of 2011, the NE LHIN supported community engagement sessions throughout the Lake Huron North Shore Algoma area to discuss proposed models and the ongoing work of the committee. Engagements will continue in 2011.
- **Aboriginal Specific** – Regular meetings will be held with the NE LHIN Local Aboriginal Health Committee to share information and receive advice and recommendations on improving access to care for our Aboriginal population group.
- **Francophone Specific** – There will be regular meetings and work with the Réseau du mieux-être francophone du Nord de l’Ontario – an entity created in July 2010 to support the Francophone engagement needs of both the NE and NW LHIN geographic regions.

And:

- Bi-monthly meetings with 22 small and rural hospitals.
- Regular (approximately quarterly) meetings with regional HUBs group – CEOs and Board Chairs of four large hospitals and the NE CCAC.
- Bi-monthly engagement meetings with the region’s long-term care homes.
- Quarterly meetings with Community Health Centres
- Regular NE LHIN-led ALC Community Steering Group Meetings with groups in Sudbury, North Bay, Sault Ste. Marie, Timmins and Parry Sound -- members represent primary care, community support services, long-term care, hospital administration, municipalities and others.
- Regular Health Professional Advisory Committee Meetings -- members represent a wide range of professions across the health care sector in Northeastern Ontario.
- Monthly meetings of the NE LHIN eHealth Advisory Council and Health Professional Advisory Committee.
- Regular communication with MPPs and one-on-one meetings as needed (NE LHIN has nine MPPs).

Evaluation of the 2011 – 2012 Engagement Plan

Participants involved in community engagement activities will be invited to evaluate and offer suggestions for overall enhancement of the NE LHIN approach to community engagement. Generally, the NE LHIN will issue a survey to capture vital information.

Feedback, comments and suggestions received in relation to any NE LHIN community engagement activity or consultation conducted by the NE LHIN will be documented, tracked and considered by the NE LHIN. A summary of general feedback, comments and suggestions related to this annual plan will be posted to the NE LHIN website.

Contact the NE LHIN

For information on the NE LHINs community engagement efforts, or to provide comments on this plan, please contact:

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North East Local Health Integration Network

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