North East **LHIN**
RLISS du Nord-Est

North East LHIN
2012-2013 Annual Community Engagement Plan

… Realigning Northeastern Ontario health care providers in an effort to increase access to quality care for Northerners and ensure a more patient-centered and community-based system...

June, 2012

Ontario
Local Health Integration Network
Réseau local d'intégration des services de santé

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) in 2006. LHINs bring together health service providers in different geographic areas of Ontario to improve local access to care through a more integrated, patient-focused and sustainable system of care.

Governed by a Board with Directors from across Northeastern Ontario, decisions about local health care are made at public board meetings in communities across the region.

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 people 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 include Algoma, Cochrane, Sudbury/ Manitoulin/Parry Sound, Nipissing/ Temiskaming, and James and Hudson Bay Coasts.

Community engagement is enabled by: face-to-face meetings, public Board meetings, newsletters and media releases, interactive website postings, Facebook, Twitter, and YouTube. Information is made available in both English and French.

NE LHIN Stats, Facts and Figures

- The NE LHIN works with 185 health service providers, including: 25 hospitals, 42 long-term care homes, 63 community support service providers, the North East Community Care Access Centre (CCAC), 6 community health centres, and 48 mental health and addictions service providers.
- In addition to the 185 health service providers who receive directing funding for patient care by the NE LHIN, people may also receive services from: 538 family physicians; 27 family health teams; 5 public health units; 6 nurse practitioner-led clinics; and 16 nursing stations.
- The NE LHIN budget for 2012-2013 is $1.4 billion, which flows directly to front-line health service providers.
- The NE LHIN region covers 400,000 square kilometers and is home to just over 550,000 people, of which: 24% are Francophone and almost 10% are Aboriginal/First Nation/Métis.
- 60% of people live in four urban centres and 40% live in 162 small cities, towns, townships, villages, municipalities, unorganized areas and First Nations.
- The NE LHIN region is challenged with youth out-migration and a decline in population. Between 1996 and 2011, the NE LHIN population declined by more than 5% while the province of Ontario grew by almost 20%.
- 17% of the people are age 65 and over, compared to 14% for Ontario. By 2030, the 14% is expected to rise to 30%.
- Northeastern Ontario has more daily smokers, heavy drinkers as well as higher rates of obesity and chronic disease. Along the Coast, there is a 24% incidence of diabetes, compared to the provincial average of 9 %.

Introduction

This document outlines the NE LHIN's Community Engagement plans for 2012 – 2013.

Community engagement is referenced as a requirement of the LHINs in the Local Health Systems Integration Act (LHSIA), 2006. 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 to the public's contributions through the organization's communications and community engagement plan. This plan is intended to provide a general overview of activities planned within the fiscal year. It also outlines opportunities to receive and implement

stakeholder input into the priorities identified in current Integrated Health Services Plan and Annual Business Plan .

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 decision making.
- 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 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 is complemented by our use of the *Physician Community Engagement Toolkit* that is posted to our community engagement web page. The NE LHIN's Primary Care Lead will be instrumental in developing primary care engagements and integrations within this fiscal time period.

In January 2012, the Minister of Health and Long-Term Care issued a vision for health care – to make Ontario the healthiest place in North America to grow up and grow old - *Ontario's Action Plan for Health Care* The Action Plan outlines the need for system transformation and highlights three priorities:

1. Keeping Ontario Healthy
2. Faster access and a stronger link to family health care
3. Right care, right time, right place.

Ontario's Action Plan speaks to the need to transform health care so that it is obsessively patient centered and health care investments are made where patients need them most. The NE LHIN will continue to ensure its 2012-2013 community engagement activities are aligned with the Action Plan.

Keeping Public Stakeholders Engaged and Informed

In a process of continuous improvement, the NE LHIN works 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 to ensure that the public's interests are being met.

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

- Dialogue through newsletters (LHINgage), communiqués, media releases, on-line discussion boards, community presentations, and 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 held at locations across the Northeast;
- Use of technology: virtual coffee breaks (audio-teleconferences), town hall meetings, blogs, as well as interactive social media including twitter, Facebook, Youtube.

Anyone can provide input and feedback to the NE LHIN at any time. We have a community engagement webpage on our site, an e-mail address engagingwithyou@lhins.on.ca, or people can call 1-866-906-5446.

Areas for Focused Engagement 2012 – 2013

In 2011-12, the NE LHIN held extensive engagement sessions with hundreds of Northerners. The information gathered directly contributed to the NE LHIN's 2012 operational plan priorities (Appendix A), which formed the basis of the ***Report to Our Communities 2012.***

This fiscal, the NE LHIN will build on the results of community engagement sessions by further validating the input received and priorities derived. Engagements will center on three main areas focused on how best to realign NE LHIN investments to ensure patient-focused care and system sustainability.

Focus #1 – Moving Forward with a Refresh of the NE LHIN's Integrated Health Service Plan (IHSP)

Engaging with Fellow Northerners to Develop the 2013-2016 IHSP

Each Ontario LHIN is expected to produce an Integrated Health Service Plan (IHSP) for the period 2013-2016 which reflects local priorities. A draft copy of the IHSP must be submitted to the Ministry by November 30, 2012.

The IHSP is essentially a strategic plan for the NE LHIN which outlines the organization's priorities and approaches to achieving goals within a three-year time frame. IHSPs are developed through extensive engagement with stakeholders to ensure the LHIN's priorities are reflective of what people need from their local health care system.

The 2013-16 IHSP will be aligned with the priorities of the Ministry of Health and Long-term Care Action plan -- *Keeping Ontario healthy; Faster access and a stronger link to family health care; and Right care, right time, right place*.

The NE LHIN first published an IHSP in 2006 which outlined the 2006-2009 priorities for health system transformation in Northeastern Ontario. The second IHSP built on the first, covering further transformation of our local health care systems from 2010-2013.

This year, the NE LHIN will develop its third IHSP to cover 2013-2016. The NE LHIN is fortunate to have gathered input from thousands of fellow Northerners in recent years which have been the foundation for the 2012 NE LHIN priorities and will be the basis of the next IHSP.

Additional feedback will include:

- Aboriginal/First Nation/Métis– efforts will be made to secure these with the assistance and guidance of the NE LHIN's Local Aboriginal Health Committee (LAHC)
- Francophones – Working collaboratively with the Réseau du mieux-être du Nord de l'Ontario
- Working with our Primary Care Lead to engage further with Primary Care providers
- Focussing on key stakeholders, such as District Socical Services and Administration Boards (DSSABs), Emergency Medical Services (EMS), and municipal partners.

Comments will be solicited using electronic, print, and face-to-face methods. Some IHSP-related plans and dates include:

- Previewing this Communications and Community Engagement Plan at the June 12 Board meeting, in order to inform and bring Board directors on-side as helpful ambassadors for 2012 engagement efforts;
- A virtual coffee break (town hall teleconference) on June 19 to review how the NE LHIN is making health change happen in Northeastern Ontario, and to invite comment on 2012 priorities;
- Development of an IHSP comment card/survey which invites stakeholders to 'validate' LHIN priorities via a short questionnaire. This same comment card/survey would be made available online, and referenced in LHIN tweets and blogs;

- Ongoing NE LHIN events such as the 2012 Chronic Disease Forum, conferences and community presentations, HUB specific meetings.

Focus #2 – Working Collaboratively with Fellow Northerners to Take Conversations with Communities to the Next Level

Putting local health care decision-making into action to enhance patient access to care through a more integrated system of care.

In accordance with Ontario's Action Plan, and input received through NE LHIN 2011 community engagement efforts, the NE LHIN will continue to work with our health system partners and community stakeholders to realign health care services in the interest of building a more community-based, patient-centered, and integrated *local* health care system. Further engaging with partners to implement initiatives to strengthen our home and community based programs will lessen our region's reliance on its 25 hospitals (currently close to 70% of the $1.4 billion NE LHIN budget is allocated to hospitals).

In February and March 2012, the NE LHIN held 19 engagements in nine communities with close to 1,000 people in the Temiskaming and Cochrane Hub districts. The objective was to ask Northerners for their input and solutions to realign health care services within each area in order to increase access to care for people living there. The input received is being considered in the drafting of two proposed realignment plans which will go to the NE LHIN Board in June 2012.

Focus #3 – Improving Primary Care Access and Integration

Stepping Up Our Dialogue on Primary Care

Planning for primary care was brought under the LHIN umbrella in early 2012. Primary care is the first point of contact between a patient and the health care system so it is a very important part of the continuum of care. Our fellow Northerners have made this very clear to the NE LHIN in engagements held to date.

With the NE LHIN's newly appointed Primary Care Lead, the NE LHIN will provide the support needed to develop and implement a primary care engagement strategy in 2012-13. The strategy will seek to hold focus groups with primary care providers to ensure their input and solutions are part of ensuring integration of primary care within the full heath care continuum.

We will continue to nurture our relationship with the Ontario Medical Association and the Northern Ontario School of Medicine (NOSM) to enhance dialogue to improve access to primary care.

Engagement on primary care will focus on efforts to ensure greater integration of primary care services with other health sectors and will include, but not be limited to:

- Engagement with primary care providers to receive input on how to enhance primary care in Northeastern Ontario and ensure it is well integrated within the full continuum of care.
- Additional joint communication efforts between the NE LHIN and the OMA.

Ongoing 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.

Throughout the year, the NE LHIN holds ongoing engagements with both fellow Northerners and health service providers. These include:

- Regular meetings held with the NE LHIN **Local Aboriginal Health Committee** to share information and receive advice and recommendations on improving access to care for the Aboriginal population group.

- Regular meetings and collaborative work with the **Réseau du mieux-être francophone du Nord de l'Ontario** to support Francophone engagements.
- Meetings with regional **HUBs Group** – CEOs and Board Chairs of four large hospitals and the NE CCAC.
- Bi-monthly meetings with 21 **small and rural hospitals**.
- Bi-monthly engagement meetings with the region's 42 **long-term care homes**.
- Quarterly meetings with the 6 **Community Health Centres.**
- 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.**
- Regular meetings with the **Health Human Resource Steering Committee.**
- Regular communication with **MPPs** and one-on-one meetings as needed (NE LHIN has nine MPPs).
- Regular meetings with **health service providers** in each HUB to discuss opportunities for collaboration and integration.
- Meetings with the **Community Support Services Sector.**
- Regular meetings with **End-of-Life Regional Network.**
- **Monthly meetings with the Regional Assisted Living Steering Committee** -- Assisted Living providers, CCAC, DSSABs and Housing services to support the implementation of the Assisted Living for High Risk Seniors Policy 2011. (Note that HUB-specific meetings are also held).
- **North East Behavioural Supports Working Group and Governance Committee** --provides local leadership, advice, guidance and support for the development of the LHIN-wide Action Plan.
- Quarterly meetings of the **Surgical Optimization Steering Committee** to work on the implementation of the surgical optimization work plan (i.e. consolidation of general surgery services, call schedule). The membership is comprised of medical administrative staff and physicians.
- Regular meetings of the **Regional Mental Health and Addiction Consultation Group**
- Quarterly meetings of the North East **Emergency Department Network** and its small hospitals and Pay for Results sub groups.
- Monthly meetings of the North East **ED/ALC Leadership Committee**
- **Family Health Team** meetings.

Evaluation of the 2012 – 2013 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 will be documented, tracked and considered by the NE LHIN.

Our website traffic is measured using sophisticated analytics that provide us with valuable insight into the health care interests of all visitors to www.nelhin.on.ca. Just as we must all hold our local health care systems accountable, we hold ourselves accountable. This is achieved in part by acting on feedback we receive.

We will continue to actively listen to the people we serve in Northeastern Ontario to ensure our vision of "*quality health care when you need it"* becomes a reality.

NORTH EAST LHIN OPERATIONAL PLAN, 2012-2013

Ontario's Action Plan For Health Care

Better Patient Care Through Better Value From Our Health Care Dollars
With a focus on: Keeping Ontario Healthy; Faster Access and a Stronger Link to Family Health Care; Right Care, Right Time, Right Place.

North East LHIN Overarching Goal:

To Realign Northeastern Ontario health care providers in an effort to increase access to quality care for Northerners and ensure a more patient-centred and community based system.

2012-2013 Priorities

- Increase Primary Care Coordination
- Enhance Coordination and Transitions of Care
- Facilitate Realignment and System Transformation
- Make Mental Health and Addiction Programs and Services More Accessible

Enablers

- Targeting the needs of special population groups
  - Francophones
  - Aboriginal/First Nation/Métis
- Expanding eHealth Opportunities
- Enabling Recruitment and Retention of Health Care Professionals
- Accountability Agreements
- Local Health System Integration Act (LHSIA)

Outcomes/Metrics

Performance Indicators of the Ministry/LHIN Performance Agreement