Accomplishments: 2011 / 12

The Champlain LHIN brings communities and providers together to find innovative local solutions to local health care challenges. We ensure health care providers better connect their services to improve people's access to the right care, at the right place, at the right time. This year's highlights, below, fall under each of the LHIN's priorities outlined in our strategic **Integrated Health Service Plan 2010-2013.**

People with Complex Health Conditions

Assisted Living Services for High-Risk Seniors: The LHIN continued implementing this program, working with 12 community support services providers and the Champlain Community Care Access Centre (CCAC). The aim is to increase health services for seniors in their own homes. This relieves pressures on hospital emergency rooms and prevents premature admissions to long-term care homes, opening hospital beds for people who need them the most.

Funding for this program totals nearly $10 million, with 540 client spaces funded across the region.

By March 2012, providers offered services to 448 clients. Of these, 284 joined this program following an admission to acute care. By year-end, this program resulted in 470+ fewer emergency room visits by seniors.

Home First: This initiative was implemented in all Ontario LHINs to help hospital patients continue their recovery safely at home, while receiving enhanced home-care services. It involves all hospitals in Champlain and the CCAC and started in July 2010. The focus is to:

- *Support a shift to a "Home First" philosophy and approach across the LHINs, and*
- *Identify and promote the adoption of leading Home First practices across the province.*

This year, 1,766 patients were admitted to the program with 92% able to remain home after the enhanced services period had ended. There was also a 25% reduction in patients designated for long-term care home admission from hospital.

In Aug 2011, one urban and two rural hospitals (Queensway Carleton, Pembroke Regional and Hawkesbury & District General) were selected to participate in the Home First Performance Improvement Project. The goal is to expand the Home First philosophy to all levels of hospital care, from emergency room to patient discharge. Under this program, the three hospitals were able to discharge 331 patients with support from Champlain CCAC and the Assisted Living Services for High-Risk Seniors program.

People with Mental Health Issues and / or Problematic Substance Use

Supportive Housing: Through this innovative "intensive case management" program, people recovering from severe addictions are receiving the assistance they need. The program helped roughly 100 clients in Champlain this year. It serves some of the most marginalized people in our communities, reduces homelessness, and fosters independence, well-being and recovery among people who have had little autonomy in their lives.

Quick Response Treatment Program: Located at the Centre Royal Comtois in Hawkesbury, this program enabled 140 clients to access this quick response treatment that aims at improving access to services, as well as reducing emergency room visits and hospital admissions.

Transitional Youth Pilot Project: The aim of this initiative is to support youth transitioning to adult mental health services. By year-end, the project assisted in the transition of 62 young people in the Ottawa area. An additional 46 were in the process of transitioning, totaling to 108 youth served.

The project was successful in developing a partnership among 11 primary and specialized mental health and addiction services for children and adults. Initial evaluations indicate a high level of satisfaction from clients and their families. The model was also adapted for and implemented in Eastern Counties.

People with Pre-Diabetes or Diabetes

Foot care is a priority in the diabetes strategy, with a goal to reduce the number of people requiring hospitalizations for infections and amputations. The Diabetes Regional Coordinating Centre (DRCC) completed a comprehensive

inventory of foot care services in the region. In collaboration with an expert panel of foot care specialists, the DRCC developed an improvement plan. Two new chiropodists are working at various sites across the region, offering much needed foot-care services to people with diabetes.

Outreach to High-Risk Ethnic Populations: Four high-risk immigrant communities in Ottawa were engaged in a LHIN project to develop a multi-year strategy addressing diabetes. Community champions were identified and 130+ community members helped determine barriers to access, gaps and a plan for future diabetes work.

Living Healthy Champlain Chronic Disease Self-Management Program: This initiative was implemented regionally and is offered in several languages. More than 500 people participated in the programs and 500+ providers received self-management training and education.

Champlain Residents

Non-Urgent Transportation System: The LHIN announced additional annual funding to assist the Community Support Services sector to create a regionally coordinated and integrated system**.** Specifically, the program increased rides for people requiring dialysis treatments, attending adult day programs and needing caregiver respite. The Champlain Community Support Network leads the project, and Carefor Renfrew is the region's coordinator agency.

This year's funding was used to hire drivers, purchase additional vans, implement a regional electronic (SharePoint) scheduling system and develop standardized policies across Champlain. Thanks to these efforts, and since last year, the number of rides increased by 30+%.

Telemedicine Services: The LHIN received funding from the Ministry of Health and Long-Term Care to support the expansion of these important services across the province. Through telemedicine, patients and clients can 'visit' a physician specialist or other health professional through two-way video-conferencing. Our LHIN was awarded funding for 15 new telemedicine nurses.

Telemedicine is a key strategy to achieve the LHIN's overall health-care goals, and ensure quality health services are provided to patients and clients as close to home as possible. The program, overseen by the Regional Telemedicine Coordinating Committee, also aims to reduce client wait times for specialist appointments and reduce client driving distances.

Emergency Room Wait Times: The LHIN is focused on improving wait times in Champlain hospitals. Champlain hospital staff members are working hard to speed up access to care for Champlain residents visiting emergency rooms. In 2011/12, they implemented a variety of strategies to reduce wait times, including: increasing their staffing, revising processes to increase efficiencies, and expanding physician hours.

In 2011/12, the average Champlain emergency room patient waited 1.5 hours less for an inpatient bed compared to 2010/11. The 10% of patients who waiting the longest for an inpatient bed experienced a decrease of 2.7 hours, compared to the previous year.

eHealth

Diagnostic Imaging Repository: This project made significant progress in 2011/12. It facilitates electronic transfer of images and reports among 60+ diagnostic imaging departments in Northern and Eastern Ontario.

This eliminates the need for patients to transport images and reports between doctors on CDs, films, or by fax. Specialists at one facility can access the reports for images acquired at other hospitals, allowing for faster and more convenient information sharing between clinicians. At year-end, all sites in Champlain were integrated into this network, providing access to reports for all sites, and images from most.

Champlain LHIN Collaboration Space: This initiative is key to building an electronic infrastructure that allows secure information sharing, collaboration, and communication. The collaboration space was launched in April 2009 and was hosted by Winchester District Memorial Hospital. By the end of 2011/12, registered users had grown to 3,000, representing 400+ health-care organizations, including some from outside our region that collaborate with Champlain providers.

Users benefit from the space's ability to maximize resources and save time. It has a broad spectrum of applications, including sharing information and changing previously manual processes into automated ones. For example, non-urgent transportation providers were able to computerize scheduling rides, and analyze and report on ride activity.