NIAGARA DISTRICT HEALTH COUNCIL

2002+2003 annual report

Report from the Chair, Donna Cripps

It is my honour to welcome you to Council's 28th Annual Meeting. It is also my pleasure to welcome Paul Jaggard, former Chair of the Central South Mental Health Implementation Task Force. We look forward to his keynote address on mental health reform in Ontario.

It is the role of the District Health Council to plan collaboratively with you to improve access to health care services, create networks of seamless services to better meet the needs of health care consumers, and to better address the determinants of health to create a healthier Niagara community.

This is my first address to you as Chair of the Niagara District Health Council. As Chair, I have a more complete understanding of the important work of the Council, and how volunteers working with our dedicated staff undertake evidence-based research and planning to formulate advice to the Minister and Ministry of Health and Long-Term Care. Clearly, our planning involves partnerships with you—health care agencies, providers and consumers.

In this light, you are instrumental in assisting us in our role as the local health system planner and advisor to the Minister of Health and Long-Term Care. In discharging our responsibilities, we also work very closely with the Central South Regional Office staff under the leadership of Narendra Shah, Regional Director and Monita O'Connor, who assumed his responsibilities during Mr. Shah's secondment in 2002/03. District Health Councils advise the Ministry and support local communities to develop and sustain locally responsive and accountable networks of services in mental health and addictions, long term care and hospitals.

District Health Council Operating Plans provide the Council and the Ministry with an accountability mechanism crucial in today's health care system. Council's planning reflects local values, community-initiated priorities and Ministry requirements, including French language service requirements. I would like to briefly highlight some our of key activities and accomplishments in 2002 -2003.

Mental Health

The Mental Health Committee presented the comprehensive Niagara Mental Health System Design report to Council in July 2002.

The Central South Mental Health Implementation Task Force Report was completed, with considerable staff support from Central South DHCs, and submitted to the MOHLTC in November 2002.

Staff prepared an issue summary and analysis of the Niagara Region Court Diversion Program Proposal, which was completed and presented to Council by representatives of the Niagara Court Diversion Committee in March 2003. Council supported the proposal and provided a letter indicating this to the MOHLTC.

The First Annual Housing Report Card for 2001-2002 was completed in conjunction with the Niagara Mental Health Housing Coalition and presented to Council in February 2003.

Long Term Care

The Long Term Care Committee developed an Environmental Scan of Issues, Trends and Challenges in the Community Long Term Care Sector in Niagara in September 2002; recommendations on improving access to data were subsequently submitted to the MOHLTC.

The Long Term Care Committee conducted a Review and Strategic Analysis of Long Term Care recommendations and presented a report to Council for information in December 2002, followed by submission to the MOHLTC.

French Language Services

A French Language Services (FLS) Regional Plan was recently completed and approved by the FLS Committee and Council for submission to the Ministry.

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Report from the Chair, Donna Cripps

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Hospitals
Council endorsed in March 2003 a proposal for cardiac catheterization in Niagara developed by the Cardiac Care Steering Committee.

The Integrated Planning Task Force completed a report on repatriation of primary/secondary services from Hamilton in September 2002.

Physician and Other Health Human Resources
The Physician Resources Planning Task Force (PRPTF) presented the Evaluation of the Niagara Physician Recruitment and Retention Program to Council in November 2002. Subsequently, funding was received from the Regional Municipality of Niagara, for which we are appreciative, for continued support of the program. Health Council also contributes considerable in-kind support.

The PRPTF also prepared a report on Physician Recruitment Incentives and Experiences Elsewhere in the Province.

Along with the 15 other health councils, staff participated on the Steering Committee for the Ontario DHCs Health Care Labour Market Survey, which resulted in a report produced by Decima Research, Inc. A Niagara Highlights report was also developed based on a Niagara Findings report.

In partnership with Niagara College Centre for Community Leadership and the Niagara Training and Adjustment Board, the Niagara District Health Council hosted a Forum on Increasing Health Human Resource Capacity and Utilization in late February 2003.

A Blueprint for the Utilization of Nurses in Extended Roles was recently completed by the Extended Nursing Role Task Force.

Independent Health Facilities
Council supported two Independent Health Facility proposals for local expansion of three diagnostic services in September 2002.

Communication and Planning
Council held an information session and dialogue with Dennis Timbrell on population health needs in February.

To keep current in planning, staff participated in Evidence-Based Planning Workshops at the University of Toronto, Department of Health Policy, Management and Evaluation, which were sponsored by the MOHLTC in April 2002

To better inform you of our many diverse activities, we recently launched a new NDHC newsletter, the "Niagara Health Planner"– we hope you find it informative.

I also invite you to visit our recently enhanced website at www.niagaradhc.on.ca for a complete list of current activities and reports, past and present.

Council members and staff met on a regular basis with staff of the Central South Ministry of Health and Long-Term Care office to discuss operating plans, communications, and specific projects and issues as required. We value this dialogue and support as we endeavour to provide timely and useful advice and plans on issues important to the Niagara community. John Douglas, in his role as Regional Co-ordinator, is our key link to the Ministry staff and we appreciate his efforts and attentiveness. Ministry staff are most welcome participants in our planning activities.

Our involvement continues to increase with Central South and Central West DHCs in regional planning which ensures we benefit from each others experience. The provincial DHC Chairs and Executives Directors also met regularly to ensure dialogue on provincial issues of mutual concern. We appreciate our meetings with the Honourable Tony Clement, Minister, as we discussed systems issues and implications from the federal Romanow report directly with him on two occasions this year.

I would like to acknowledge and thank all Council members and staff for their ongoing support. Council benefited from stable membership this year and welcomed the addition of new members Karen Stearne, a provider from Niagara Falls and Mary Fickel, a consumer from Fort Erie. The listing of members and staff is found on the back page of this report.

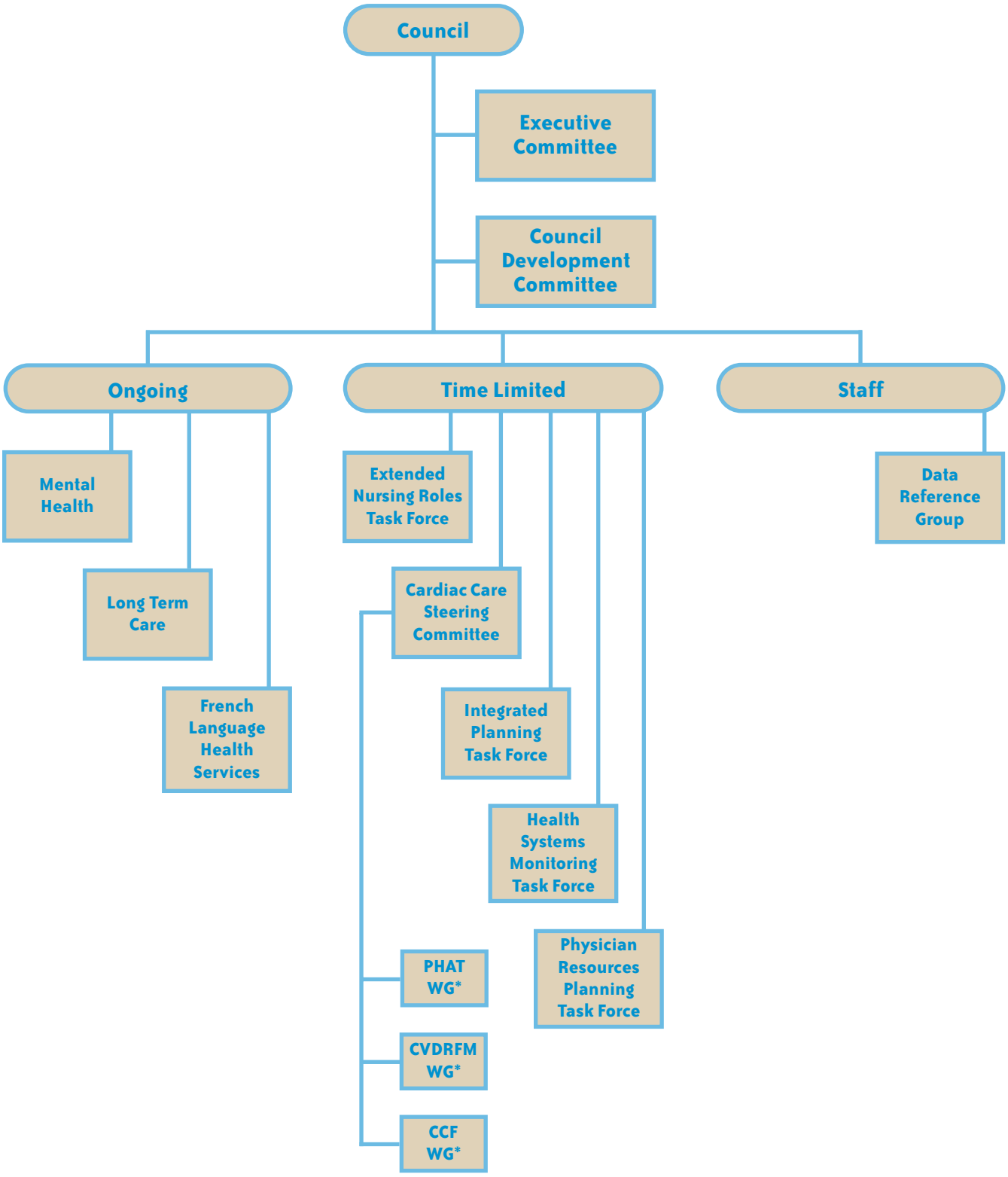
I encourage you to read the complete Annual Report for more details on the activities of our committees and staff.

Thank you to our planning partners for your ongoing support and contributions.

Niagara District Health Council *(clockwise):*
Mary Fickel, Alan McDooling, Wendy McPherson, William Smeaton, Donna Cripps, David Cashin, Ray Barlow, Dr. Suhas Joshi,Dave Eke.

Niagara District Health Council Committee Structure -

April 2003



*PHATWG - Prehospital/Ambulance Transfer Working Group

CVDRFMWG - Cardiovascular Disease Risk Factor Management Working Group

CCFWG - Cardiac Centre Feasibility Working Group

Long Term Care Committee

The main focus of the Long Term Care Committee (LTCC) is to develop plans for community long-term care services. In 2002/2003, work on a Multi-Year/Annual Plan for Niagara was delayed pending completion of a new LTC planning framework by the Central South Regional Office. While awaiting this planning framework, the activities of the LTCC included:

•Preparing for the development of future long term care plans. Conducted a community consultation on a draft Environmental Scan of Issues, Trends and Challenges in the Community Long Term Care Sector, reviewed and updated the status of previous long term care recommendations, developed recommendations to improve access to data in support of future long term care planning;

•Maintaining awareness of long term care related groups and activities, such as the Specialized Health Care for the Elderly and Dementia Care Networks, the Niagara Elderly Community Resource Group, and the T. Roy Adams Dementia Care Advisory Committee;

•Receiving pertinent reports and presentations including Ontario DHC Provincial Health Care Labour Market Survey and Niagara Findings, Status of CCAC Niagara, Alzheimer Society Caregiver Support Programs and Client Profile, and Regional Niagara Transportation Strategy.

Members of the Long Term Care Committee

Jocelyne Gagné (Chair), Jocelyne Blais-Breton, Bill Bloor, *Donna Cripps, *Jennifer D'Alessandro, Camilla D'Uva, *Susan Farmer, *Marguerite Hanratty, Charlene Macdonald, Wendy McPherson, Susan Norton, Dan Oettinger, Valerie Sciarra, Noel Steckley, Wendy Walker,
Ex-officio: Jane Blums
Staff: Julie Darnay, Joanne Manson

**Resigned*

Mental Health Committee

The Mental Health Committee provides advice and guidance on the unique service needs of our community in order to build a comprehensive, effective system of support for individuals with serious mental illness. During 2002/2003, members contributed their time and hard work to complete the following tasks:

•Finalized Niagara Mental Health System Design 2002, which was subsequently endorsed by Council, forwarded to the Ministry of Health and Long Term Care, and Central South Mental Health Implementation Task Force, and released to the general community;

•Planned and hosted a planning forum for community-based mental health service providers to discuss 2003/2004 operating plans and system implications;

•Reviewed 2003/2004 community-based mental health operating plans and provided comments and advice to MOHLTC;

•Committee representatives participated in the review of 2003/2004 substance abuse operating plans and provided comments and advice to Ministry of Health and Long-Term Care.

Members of the Mental Health Committee

Mariea McNelis (Chair), *Peggy Allen, Bob Barkman, *Donna Birrell, *Steve Bottaro, Barb Chrysler, Anne Fox, *Jean-Pierre Galipeault, *Margaret Maynard, *Jim Nicholls, Myra Quinonez-Alfonso, *Sylvana Sgro, Jeanette Smith, Ann Tassonyi, Judith Thompkins, Lynn Williamson
Ex-officio: Mike Barker, Dr. Carol Vipari
Staff: Vicky Guertin

**Resigned/Term Completed*

Mental Health Housing Coalition

The Mental Health Housing Co-ordinating Committee of the Niagara District Health Council (NDHC) was disbanded in March 2002 after completing its three year commitment as a sub-committee of the Mental Health Committee. A new Community-based Niagara Mental Health Housing Coalition was formed to fulfil the local mental health housing strategy. The focus of the Coalition is to mobilize community partners to improve mental health housing and supports in Niagara. The NDHC continued to provide support to the Coalition during 2002/2003.

Accomplishments of the Niagara Mental Health Housing Coalition in 2002/2003 include:

•The production of a Niagara Housing Report Card in conjunction with the Niagara District Health Council (October 2002);

•The achievement of new Mental Health Rent Supplements in Niagara for persons with SMI who are currently accessing a case management program;

•The successful design, funding and implementation of the Mental Health Central Housing Registry in collaboration with Niagara Regional Housing;

•The production of a Housing Advocacy Strategy;

•The review, analysis and compilation of Mental Health Housing Best Practices;

•Progress on the development of a Niagara Discharge Planning Handbook; and

•Active discussions with ODSP and OW regarding mental health access issues.

Niagara Mental Health Housing Coalition Sub-Groups

Steering Committee -
George Kurzawa (Chair)
Research Working Group -
George Kurzawa (Chair)
Advocacy Working Group -
Trudy Bretzler and John Opczypko (Co-Chairs)
Implementation Working Group -
Adrienne Jugley (Chair)

Niagara Cardiac Care Steering Committee

Advanced Cardiac Services Working Group

Cardiovascular Risk Management Working Group

Pre-hospital Ambulance Transfer Working Group

In response to community concerns regarding significantly high rates of morbidity and mortality due to cardiovascular disease and long waiting time for cardiac catheterization, the DHC established a Niagara Cardiac Care Steering Committee (NCCSC) and three associated working groups. The mandate of the NCCSC is to provide advice to the Health Council on local cardiac care needs and the range of services and linkages required to meet these needs.

The primary purpose of the Advanced Cardiac Services Working Group was to develop a proposal for siting advanced cardiac services in Niagara, commencing with cardiac catheterization. The proposal, which was completed in March 2003, has since been approved by the Board of Niagara Health System (NHS) and integrated into NHS capital and strategic planning processes.

In July 2002, the Cardiovascular Risk Factor Management Working Group produced a Discussion Paper intended to support implementation planning for Cardiovascular Risk Management Services. This paper describes the linkages and partnerships needed among local organizations funded to provide cardiac rehabilitation, stroke prevention and diabetes care in order to deliver an integrated, systematic approach to the primary and secondary prevention of cardiovascular disease.

The mandate of the Pre-hospital/Ambulance Transfer Working Group is to facilitate efforts to prevent delays in transferring patients to out-of-district cardiac centres. This group meets on an ad hoc basis.

Membership:

Niagara Cardiac Care Steering Committee
Natalie Diduch (Co-Chair), Angelo Presta (Co-Chair), Dr. Karen Berti, Don Gibson, Dr. Sven Pallie, Don Shilton, Karen Stearne, Dr. Bill Shragge, Patty Welychka, Ellen Wodchis
Ex-officio: Maria vanDyk, Gary Zalot

Cardiovascular Risk Management Working Group
Don Gibson, (Chair) Dr. Karen Berti, Barbara Dixon, Diane Gwartz, Susan Dolan, Cathy Lanteigne, Shari Noell, Ellen Wodchis

Advanced Cardiac Services Working Group
Gloria Kain, Dr. Sven Pallie, Angelo Presta, Don Shilton
Staff: Shirley Stewart

Physician Recruitment Planning Task Force

The Physician Recruitment Planning Task Force (PRPTF) develops strategies and recommendations to address the physician resource requirements in Niagara. Its main activities in 2002/2003 included:

- Continuing to oversee the Niagara Physician Recruitment and Retention Program (including recruitment/retention initiatives, coordination and community development activities, status of communities with respect to physician recruitment, community visits and involvement with medical education);
- Developing report on the Evaluation of the Niagara Physician Recruitment and Retention Program, November 2002;
- Reviewing/monitoring the status of recommendations in the "Blueprint for Physician Recruitment and Retention into the Next Millennium," May 2000;
- Reviewing/monitoring the status of provincial programs, such as the Underserviced Area Program and Family Health Network initiatives;
- Developing report on Physician Recruitment Incentives and Experiences Elsewhere in the Province, September 2002
- Reviewing/monitoring the status of other health human resource initiatives, such as the development of a blueprint for extended nursing roles and the Ontario DHC Labour Market Study.

Members of the Physician Recruitment Planning Task Force:
John Carter (Chair), *Dr. Marion Frendo, Dr. John (Jack) Luce, Councillor Ann-Marie Noyes, *Jay Orchard, Angelo Presta, Dr. Richard H. Railton, Dr. Jeffrey Remington, Dr. Roger Rose, Regional Councillor Bob Saracino, Dr. William Shragge, Dr. Robin Williams, Dr. Scott D. Wooder
By invitation: Joan Hatcher
Ex-officio: John Douglas, Michelle Hunter, Jenny Simpson, Gary Zalot
Staff: Joanne Manson

**Resigned*

Integrated Planning Task Force

The mandate of the Integrated Planning Task Force (IPTF) is to support regular collaboration and co-ordinated health system planning among Niagara and Hamilton-based health system stakeholders in order to improve access to and co-ordination of clinical services.

In September 2002, the IPTF produced a document providing an overview of the hospital utilization patterns of Niagara residents. The purpose of this report was to support hospital efforts to identify opportunities for the repatriation of Niagara residents receiving primary/secondary and post-tertiary care in Hamilton, as appropriate.

Additional planning priorities identified by the IPTF, included:

- Identifying the barriers and options for improving access and co-ordination of clinical services between Niagara and Hamilton.
- Identifying appropriate tertiary care referrals and opportunities for improving Niagara residents' access to tertiary care in Hamilton.

Membership of the IPTF and its working group:
CEOs, Senior Management, Chiefs of Staff and Decision Support Staff from: CCAC Niagara; Hamilton CCAC; Hamilton Health Sciences; St. Joseph's Healthcare – Hamilton; Hotel Dieu Hospital; Niagara Health System; West Lincoln Memorial Hospital
Ex-officio: Niagara DHC, Hamilton DHC, Ministry of Health and Long-Term Care
Staff: Shirley Stewart

Extended Nursing Roles Task Force

The mandate of the Extended Nursing Roles Task Force (ENRTF) was to provide recommendations for both expanding the utilization of current extended nursing roles and implementing new extended roles in Niagara. In the course of its deliberations during 2002/2003, the ENRTF:

- Explored the current status of extended nursing roles;
- Reviewed relevant literature and data;
- Created a model for the optimal use of extended nursing roles;
- Developed a Blueprint for the Utilization of Nurses in Extended Roles.

Members of the Extended Nursing Roles Task Force
Scott Gibson (Chair), Carole Course, *Cindy Gabrielli, **Diane Gwartz, *Sheila Hamilton, Allison Kissner, Hilda McCann, Roseann Norton, *Kathy Propedo, Laurel Satov, Jo Anne Shannon
Staff: Penny Pomeroy, Joanne Manson

*resigned before completion of task force work
***replaced Sheila Hamilton*

French Language Services Committee

The French Language Services Committee (FLSC) provides advice on the planning and implementation of French language health services in Niagara. During 2002/2003, the Committee engaged in the following activities:

- Provided input to the French Language Services Office of the Ministry of Health and Long Term Care (MOHLTC) about the newly developed provincial Self Assessment Tool for Agencies Identified to Provide French Language Services;
- Developed a standardized process to identify new agencies or programs proposed for identification to provide French Language Services in Niagara and added one community agency and four hospital programs to the list;
- Reviewed the Niagara Inventory of French-Speaking Health Human Resources as changes occurred;
- Re-considered the Health Services Restructuring Committee (HSRC) Final Directions as they relate to French Language Services in Niagara.
- Received a Status Report on the Niagara Health System (NHS) French Language Services Implementation Plan, which included an assessment of the NHS's ability to provide services in French as identified by the HSRC;
- Sent participants to a consultation on the implementation of French Language Service Networks in Ontario;
- Reviewed the DHC French Language Services Compliance Plan;
- Provided input into the development of the DHC French Language Services Regional Plan.

Members of the French Language Services Committee:
Gérard Holmes (Chair), Robert Bisson, Julie Cordasco, Father Jacques Fortin, Chandra Furney, Astrid Quenneville, Bill Rashleigh, Robin Springer, André Tremblay, Cheryl White
Ex-officio: Jocelyne Blais-Breton, Gérard Parent
Staff: Penny Pomeroy

Local Health System Monitoring Task Force

In 2002, the Niagara District Health Council convened the Local Health System Monitoring Task Force (LHSMTF), with expertise in population health and health service planning, to develop a Health System Monitoring Report for Niagara. This report is intended to provide a comprehensive description and interpretation of Niagara's demographic, health status and health system performance indicators. Its main purpose is to monitor and evaluate health system performance within the context of local population health needs as a basis for facilitating system change and integration.

The intended audiences for this report are: The Ministry of Health and Long Term Care: This report will provide local 'health intelligence' to the Ministry to inform planning and decision-making at regional and provincial levels.

Local health organizations: This report will provide local 'health intelligence' to local health care organizations and health care planners, to support evidence-based strategic and program planning in Niagara's health sector.

The Niagara DHC. This report will highlight important planning needs and strengthen the ability of the DHC to affect system change and integration in order to enhance local health system performance, (i.e., improved accessibility, efficiency and effectiveness of service in the local health system).

In order to avoid the unnecessary duplication of existing sources of information, (e.g., 1996 Census and health survey data readily available on websites and in the Niagara Regional Public Health Department's 'Community Health Profile'), and to co-ordinate the LHSM report with the release of 2001 census data in May 2003, Council was advised by its LHSMTF to defer this report to the 2003/04 fiscal year.

Members and Key Informants of the Local Health System Monitoring Task Force:

NDHC:
Julie Darnay, Vicky Guertin, Joanne Manson, Penny Pomeroy, Gary Zalot

Local health system stakeholders:
Marlene Armstrong, David Bird, Bill Bloor, Linda Boich, Mary Lou Decou, Natalie Diduch, Cathy Esposito, Cathy Hesch, Brent Kerwin, Angelo Presta, Patty Welychka

Staff: Shirley Stewart

NDHC Staff
(left to right):

bottom - Gary Zalot, Shirley Stewart, Mary Szabo; middle - Vicky Guertin, Joanne Manson, Penny Pomeroy; back - Julie Darnay, Jeannette Wilcox, Linda Dickinson.

Niagara District Health Council

Council Members:

Ray Barlow, Provider member - Fort Erie

David Cashin (Vice-Chair), Consumer member - Niagara-on-the-Lake

Donna Cripps (Chair), Provider member - Grimsby

Dave Eke (Immediate Past-Chair), Regional representative - Niagara-on-the-Lake

Mary Fickel, Consumer member - Fort Erie

Dr. Suhas Joshi, Provider member - St. Catharines

George Marshall, Regional representative - Welland

Cameron McCallum (Treasurer), Provider member - Fort Erie

Alan McDooling, Provider member - Grimsby

Wendy McPherson, Provider member - Niagara Falls

William Smeaton, Regional representative - Niagara Falls

Karen Stearne, Provider member- Niagara Falls

Staff :

Julie Darnay, Senior Health Planner

Linda Dickinson, Receptionist/Secretary (Maternity Leave Contract Position)

Diane Fortier, Senior Bilingual Secretary (On Maternity Leave until January 2004)

Vicky Guertin, Health Planner

Joanne Manson, Senior Health Planner

Penny Pomeroy, Senior Health Planner

Jenny Simpson, Physician Recruitment and Retention Coordinator

Shirley Stewart, Senior Health Planner

Mary Szabo, Administrative Officer

Jeannette Wilcox, Senior Bilingual Secretary

Gary Zalot, Executive Director

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For more information about the Annual Report, please contact:
ppomeroy@niagaradhc.on.ca

Niagara District Health Council

Financial Highlights for the Year Ended March 31, 2003

STATEMENT OF OPERATIONS

	2003	2002
REVENUE		
Ministry of Health and Long-Term Care		
Operating grants	$ 840,862	$ 838,381
One-time funding	14,965	10,846
Interest Income	1,695	2,192
Amortization of deferred grant	16,199	20,444
TOTAL REVENUE	**$ 873,721**	**$ 871,863**
EXPENSES		
Salaries and benefits	620,190	611,032
Administrative costs	218,921	230,639
Total	**$ 839,111**	**$ 841,671**
One-Time Expenses	14,965	10,846
TOTAL EXPENSES	**$ 854,076**	**$ 852,517**
DUE TO MINISTRY OF HEALTH AND LONG-TERM CARE	**$ 19,645**	**$ 19,346**
ASSETS		
Current	158,169	138,124
Capital assets, net of accumulated depreciation	42,564	58,763
TOTAL ASSETS	**$ 200,733**	**$ 196,887**
LIABILITIES		
Current		
Accounts payable and accruals	4,086	3,686
Due to Ministry of Health and Long-Term Care	154,083	134,438
TOTAL LIABILITIES	**$ 158,169**	**$ 138,124**
Deferred grants for capital assets	42,564	58,763
	$ 200,733	**$ 196,887**

Ontario Public Sector Salary Disclosure Act, 1996 – The following full-time employee of the Niagara District Health Council received a salary of $100,000 or more in 2002. Gary Zalot, Executive Director, Salary - $102,500; Taxable Benefits - $924.

Financial statements for the Niagara District Health Council for the fiscal year ended March 31, 2003 have been prepared by Council's auditors and an unqualified auditors' report has been issued.