

North East LHIN Board Highlights

Meeting of February 7, 2018

Our Meeting Opener

The North East LHIN Board of Directors met by teleconference on February 7th. Vice Chair Kim Morris presided over the meeting in Chair Ron Farrell's absence. The Board thanked Director **Toni Nanne-Little**, whose term is ending, for her three years of exemplary service on the NE LHIN Board and acknowledged the contributions of **Tamara Shewciw**, Chief Information Officer, who retired at the end of January and who during her decade with the NE LHIN, advanced digital health in Northeastern Ontario to improve the patient experience.

Patient Story

The meeting opened with a patient story about a 65-year-old man with mental illness, an acquired brain injury, addiction to alcohol, and an autoimmune disease, who had been admitted many times over the years to hospital, once spending close to a year in hospital. His family had been struggling to find him housing in the community, however his alcohol addiction made it difficult as many programs require residents to abstain.

In April 2016, the patient entered the **Nipissing Mental Health Housing and Support Services' Acquired Brain Injury/Complex Care Home** in North Bay funded by the NE LHIN. Through extensive system collaborative meetings and efforts, the LHIN and partners worked hard to ensure the home would continue to operate and be sustainable over time. Just this past fall, the NE LHIN announced additional funding for the home which would provide ongoing support to ensure this patient and seven others, have continued access to housing and mental health and addiction services.

Bringing the health system together within a community to strategize over how to provide the best care in the patient's setting of choice resulted in viable solutions – and is evidence that partnerships work. The patient has successfully found a home after numerous years of living on the street in a substandard apartment with poor nutrition and often being taken advantage of by other people. With stable housing and supports, he has witnessed a dramatic, positive change in his lifestyle and his health has also improved.

Opioid Strategy: Addiction to Prescription Medicine by Dr. Mike Franklyn

To highlight the work of the NE LHIN's recent Opioid Strategy launch, Dr. Mike Franklyn presented on options for patients with addictions to prescription medicine and how the Rapid Access Addiction Medicine (RAAM) clinics will help patients. RAAM Clinics provide an addictions treatment pathway between the clinic and different places where the client is likely to seek care such as emergency departments, primary care providers, mental health and addiction agencies, and withdrawal management programs.



Ron Farrell -
Board Chair



Kim T. Morris -
Vice-Chair



Denis Bérubé



John Febraro



Toni Nanne-Little



Mark Palumbo



Anne Stewart



Betty Stone



Petra Wall

In January the NE LHIN announced that \$1.65 million in base funding is being invested across the North East LHIN region, increasing access to treatment and care coordination in Northeastern Ontario communities. Each sub-region received \$200,000 to establish a RAAM clinic and \$130,000 to enhance withdrawal management and addiction counselling. An additional \$200,000 will also go to Health Sciences North (HSN), which has piloted a RAAM clinic for more than a year, to take on a role as lead agency for research, data collection/analysis, and evaluation. It will also enhance and expand Community Based Withdrawal Management Programs, a recommendation made to the North East LHIN by Dr. Brian Rush in his *North East LHIN Addiction Services Review*.

Report from the Board Chair Ron Farrell (submitted prior to the meeting)

Outside his regular Board and Committee meetings, Ron participated in tripartite meetings in Ottawa concerning the Weeneebayko Area Health Authority (WAHA) on Jan 17 and 18, where senior representatives of the federal Ministry of Health, the provincial Ministry of Health, the NE LHIN and WAHA met to discuss issues pertaining to the delivery of health care for people living along the Hudson and James Bay coast. He also took part in a Pan LHIN Chairs Council meeting on January 23, where Chairs discussed board evaluation process, CEO evaluations, and accreditation for LHINs.



Report from CEO Jeremy Stevenson

Jeremy spoke about his onboarding plan and leadership style; how he's priority and outcome focused, as well as focused on the experience of patients and making the system work better for Northerners. Although he is eager to meet with every Northerner, he noted it has become increasingly clear that meeting one-on-one with fellow Northerners is going to be difficult. His vision in the coming months, is to visit as many Northeastern Ontario communities as possible and meet with system partners together to talk collaboratively about ways and means we can work together better to continue to transform our health care system. Jeremy's goal is to sit down among partners within our communities of care and to focus on the areas of greatest need collectively and learn more about how we can de-fragmentize the system, shed silos and work together better.

At the Board meeting he also reported on the NE LHIN's [Mandate Letter](#) and its key deliverables (included below is one example of work taking place within each deliverable).

Improve the Patient Experience:

- Our Patient and Family Advisory Committee held its second meeting on January 25. Patient Advisors participated in a Health Quality Ontario (HQO) facilitated session on improving transitions to home as HQO begins its engagement on a provincial transitions indicator. They also learned more about our funding decision making, actively participated in a presentation on bringing the home and community care sector closer together, learned about our work on health care equity, and thoughtfully shared their stories on what is working well and not so well within the system while offering solutions.

Address root causes of health inequities by strengthening social determinants of health

- We partnered with NW LHIN, NOSM and Health Force Ontario to develop a *Summit North: Building a Flourishing Physician Workforce* conference, held January 24th in Thunder Bay. The event brought together over 130 health system partners to focus on short and long-term

solutions to build a sustainable physician workforce for Northern Ontario, with an emphasis on family physicians in remote and rural communities.

Improve access to primary care & reduce wait times for specialist care, mental health and addictions, home and community, acute care

- As a means of addressing the critical shortage of Personal Support Workers in the North East, the NE LHIN is implementing a new model of service delivery – “Windows of Care” which involves scheduling most visits for a block of time rather than at specific times. This new model of scheduling has created more PSW capacity with our service provider organizations and will be adopted by other LHINs.

Break down silos between sectors and providers to ensure seamless transitions for patients

- Our One Client–One Plan (OCOP) project will bring together 71 home and community care providers, at a forum in March that we are calling “Betty’s Journey - Workshop.” The day will focus on process improvements that include reducing the number of assessments clients currently undergo as they access home and community services from different providers.

Support innovation by delivering new models of care and digital solutions.

- The ONE (One Person, One Record, One System) initiative continues to advance. ONE is about using technology to transform patient-centered care. It will lead to the adoption of common technology, an integrated electronic medical record, and clinical standards based on best practices at all 24 of hospitals in our region – helping to ensure patients throughout the LHIN benefit from high-quality hospital care that is seamless, consistent and efficient. West Parry Sound Health Centre, North Bay Regional Health Centre, and Sault Area Hospital and are now beginning the implementation phase of ONE. These three hospitals will be the first tenants in the new provincial Meditech Health Information System solution.

Performance Review of Q2 Indicators

In the second quarter of 2017/2018 there were performance improvements in:

- wait times for home and community care; mental health readmissions (Repeat unscheduled emergency visits within 30 days for mental health visits).

Areas with performance challenges included:

- Repeat unscheduled emergency visits within 30 days for substance abuse visits; Alternate Level of Care (ALC) and impact to Emergency Room performance

LHIN staff meet with health service providers on a regular basis to strategize on how to hold the gains on the progresses made and strategize on solutions to overcome the challenges some indicators pose in achieving better outcomes for Northerners.

Hospital-Service Accountability Agreements (HSAAs)

The Board approved new H-SAA templates revised by a Pan-LHIN work group that also involved OHA and hospital CEO representatives.

Pre Capital Submission – St. Joseph's General Hospital CT Scanner Renovation

The Board passed a motion to support the St. Joseph's General Hospital's Pre-Capital Submission to the MOHLTC to renovate an area of the hospital in order to install and operate a CT scanner. The hospital has estimated their construction costs to be approximately \$750,000 for this renovation, plus another \$750,000 for the furniture and imaging equipment. These costs will be the responsibility of the hospital corporation as this is an own funds capital project.

Update on ALC at Health Sciences North (HSN)

In March 2017, the NE LHIN hired a Patient Flow Lead Elaine Burr to support NE LHIN hospitals in implementing the ALC Avoidance Framework. The Framework is a tool endorsed by Access to Care (Cancer Care Ontario) that provides a road map of ALC avoidance strategies and practices that have been shown to be effective for hospital teams who are working to get their patients to the right place of care. The priority focus of the Patient Flow Lead has been to support and guide HSN in implementing these practices.

Over the last eight months the collaborative approach to ALC avoidance at HSN between the Hospital, Home and Community Care team and NE LHIN Patient Flow Lead has focused on:

1. Working to reduce demand on HSN services for non-acute healthcare issues.
2. Maximizing the efficiency of internal process and enablers at HSN to ensure efficient patient flow.
3. Managing supply – ensuring all of our community capacity is being leveraged, and planning and developing short- and long-term capacity solutions.

Outcomes:

- In Oct 2017 there were on average 14 fewer ALC patients at HSN than at the same time the previous year.
- In November/December 2017 there were on average 30 fewer ALC patients at HSN than at the same time the previous year.
- In November/December 2017 there were 14-16 fewer ALC patients at HSN waiting to be placed from hospital to a LTC bed than at the same time the previous year.

In October 2017, senior leadership at HSN and the NE LHIN struck a Collaborative Governance Committee to support and drive ALC work at HSN. This Committee has helped in working as a collaborative and transparent leadership team to address the ALC challenges at HSN. HSN continues to hardwire the strategies in the ALC Avoidance framework into day to day practice. We anticipate further reductions in ALC numbers at HSN over the next year.

Northern Network for Health Equity

The Board passed a motion to support the NE LHIN's participation in the Northern Network for Health Equity – a key recommendation flowing from its work with other partners (including Health Quality Ontario) on the development of a Ministry-funded Northern Ontario Health Equity Strategy. The objectives of the Northern Network for Health Equity range from working across sectors to develop solutions to alleviate poverty and improve access to food and education; to working to support health care providers in the provision of equitable, timely access to health care; to moving forward the Truth and Reconciliation Commission of Canada's Calls to Action; to supporting local engagement in research and the use of evidence.

The Board meets next on March 7th. The public is welcome to listen in or attend the North East LHIN's Board meetings. To obtain the teleconference number or find out the location of the next meeting (meetings are held in communities throughout the region) go to:

www.nelhin.on.ca/boardandgovernance/meetings