

## North East LHIN Board Highlights

*Meeting of November 21, 2018,  
NE LHIN Office in North Bay or Teleconference*



Ron Farrell –  
Board Chair



Kim T. Morris –  
Vice Board Chair



Denis Bérubé



John Febraro



Mark Palumbo



Anne Stewart



Betty Stone



Petra Wall



Cheryl St-Amour



Lorraine Dupuis

### Report from the Chair, R.M. (Ron) Farrell

In addition to ongoing work as well as regular pan LHIN, ministry and Board meetings, Chair Farrell also had several engagements with system partners over the past month. Some of the highlights include:

- Met with Minto Counselling and Mental Health and Addictions Chairs on ways the organizations might work more closely together and share resources.
- Participated in a collaborative governance initiative with Health Sciences North.
- Submitted a communiqué to Dr. Reubin Devlin, Chair and Special Advisor on Premier's Council on Improving Healthcare and Ending Hallway Medicine. The objective was to raise the awareness of NE LHIN system transformation work to date and areas of focus going forward to change the way Northerners access and receive care.
- Met with counsel for the Conflict of Interest Commissioner on ways to ensure good governance and best practices.
- Met with Nipissing Counselling Service Board accompanied by staff to talk about the possibility of several organizations in North Bay working more closely together and sharing resources.
- On behalf of the Chairs' Counsel, accompanied two other members of the Executive Compensation Task Group at a meeting with the Treasury Board.
- Attended a LHIN Chairs' Leadership meeting.

### Patient Story – Lucienne

Lucienne, 55, is a North East LHIN Home and Community Care client who lives by herself in an apartment in a small Northeastern Ontario community. A number of years ago, she broke her leg and soon after was diagnosed with Multiple Sclerosis (MS) in addition to diabetes. She now uses a wheelchair for mobility. Lucienne explained that she can look after her diabetes but it's her MS that she needs help with. She values her independence and wants to live in her apartment as long as possible.

For the most part, Lucienne feels she receives excellent care by her personal support workers (PSWs), who are employed by a North East LHIN contracted service provider. However, due to PSW capacity shortages in the area, Lucienne has been experiencing missed visits, as well as shortened visits in the morning by her PSWs. The Board heard about areas of focus that will help to mitigate Lucienne's home and community care experience, including: the NE LHIN working with existing providers in the building to discuss new ways to help maximize hours and resources for existing clients, implementing the PSW Task Force Action Plan, One Client One Plan project (OCOP), and Neighborhood Care model.

## Report from CEO – Jeremy Stevenson and Senior Leadership Team

### Northern Tour

Members of the NE LHIN's senior leadership team, along with the CEO visited 12 communities during the second week of November - Englehart, Kirkland Lake, Timmins, MICS (Matheson, Iroquois Falls, Cochrane hospitals), Smooth Rock Falls, Kapuskasing, Hearst, Constance Lake, Horneypayne, Wawa, Chapleau, and Sault Ste. Marie. Dubbed "**the Northern Tour,**" this was an opportunity to meet face-to-face with communities as a whole – with system partners and not individually to ensure synergy and the vision moving forward of a community working together around the patient. Meeting with system partners and touring their organizations, senior team was able to witness first-hand the good work underway as well as the gaps in services in some of our communities.

The purpose of the tour was to follow up on discussions that were started as part of our Integrated Health Service Plan (IHSP) engagements – outcomes of which greatly informed our **draft priorities for the next three years – System Integration, Home and Community Care, and Mental Health and Addictions.** Jeremy and staff consulted with partners on where they see their community in three to five years, and what they want to focus on to improve the health and wellness of people living there.

Outcomes of the discussion will help to inform the NE LHIN's 2019/20 Annual Business Plan, as will all discussions/engagements held with providers, patients, families and caregivers to date.

### NE LHIN Personal Support Worker (PSW) Task Force

This past spring, a region-wide NE LHIN Personal Support Worker (PSW) Task Force was established with the purpose of addressing recruitment and retention of PSWs, as well as increasing overall system capacity shortages in the North East. The Task Force was charged with the development of an action plan. Membership of the task force included: NE LHIN; members of the NE LHIN Patient and Family Advisory Committee; and representatives from LTC homes, home and community care providers, service provider organizations, training and education institutions, and local employment Boards.

As the Task Force concludes its mandate, it is recommending that sustained support be applied to coordinate the implementation of the Action Plan's measures. Its Action Plan can be broken down into three priority areas:

#### Priority Area 1 - Program Oversight and Coordination

Action: Regional PSW Workforce Leadership Committee

#### Priority Area 2 - Collaboration and Innovation

Action: Workforce Training and Development

Action: Workforce Capacity

Action: PSW Career Awareness and Promotion Strategy

#### Priority Area 3 - Working Conditions and Compensation

Action: Improving Working Conditions (e.g. full-time work, mentorship, employee satisfaction)

**Next Steps in the Process:**

- Finalize Task Force Action Plan
- Establish the longer-term program oversight structure
- Assign internal and external leads and supporting participants to develop and implement work plans for short-, medium- and long-term activities within each of the priority areas
- Identify and secure the necessary resources for long-term success

**NE LHIN Integration Strategy**

As the NE LHIN moves forward with its 2019-2020 Integrated Health System Plan, one of the ways it will measure success is through the number of integration initiatives activities that enhance access, are patient-focused, and make the most effective and efficient use of available resources.

As noted in Local Health System Integration Act (as well as in all Service Accountability Agreements), it is not the sole responsibility of the NE LHIN to integrate the system, but to do so in partnership with its health service providers. Both LHINs and service providers have specific roles and responsibilities.

At the basis of a **NE LHIN Integration Strategy**, currently in development, is the expectation that health service providers will work together towards a more integrated system of care that reflects their unique community and local circumstances. For greater integration to be realized in the North East, all levels of the system (from policy, planning, funding, governance, and management through to front-line service providers) must be united and aligned in their efforts. This united approach will help to improve the health care experience of Northerners and ensure greater service efficiencies.

While there are many approaches to integration, the North East LHIN strategy will capitalize on horizontal and vertical integration opportunities that result in increased access to direct services, an enhanced patient experience, efficiencies in non-clinical support services and organizational structures. The strategy is expected to be completed early in 2019.

**New Mission and Vision**

The Board approved a refreshed organizational mission and vision to ensure we are in alignment with our draft Integrated Health Service Plan and strategic priorities for 2019-2022.

Mission – ***Integrating locally-tailored, high-quality, timely care for Northerners***

Vision – ***Healthy, well cared-for Northerners.***

**Next Board Meeting: January 16, 2018**