

North East LHIN Board Highlights

Meeting of June 6, 2018

The North East LHIN Board of Directors met on Wednesday, June 6 at the North Bay Regional Health Centre in North Bay. Following the meeting, members enjoyed a tour and networking session with hospital senior staff and board.

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

In addition to ongoing meetings, Chair R.M. (Ron) Farrell also had several meetings with system partners. Some of the highlights include:

- Met with Sundridge seniors housing interim board to hear from federal and provincial representatives and offer advice for feasibility studies.
- Participated in several NE LHIN announcements on enhancing patient-centred care across the region.
- Met with the Timmins and District Hospital Board further to the NE LHIN's May Board of Directors meeting in Timmins.
- Attended an Indigenous Health conference with more than 700 participants from across Canada and learning more about the Truth and Reconciliation Calls to Action and traditional spiritual approaches to healing.
- Met with the Chief and Health Director of Wasauksing First Nation and Coordinator of the B'saanibamaadswwin Mental Health and Addictions Program and learned about the breadth of their partnerships underway to support the health and wellness of their people.

Report from the CEO: 100 Days and Moving Forward

In his first 100 days as CEO, Jeremy Stevenson has met with many of the NE LHIN's 750 employees, Ministry leadership, health service providers, sub-region collaborative tables, public health units, mayors and MPPs, Réseau du mieux-être francophone du Nord de l'Ontario, Indigenous Chiefs, leaders and peoples, and fellow Northerners. Jeremy apprised the Board of the top themes he has heard throughout his engagements, including:

- **Local:** bring back the LOCAL in our name; Northerners need & want more of our time.
- **Patient-centered:** NE LHIN staff must work as close to the patient as possible.
- **Duplication:** with our newly integrated organization there is some duplication in roles.
- **Internal Silos:** more work needs to be done to fully integrate the expanded NE LHIN.
- **Integration:** NE LHIN needs to lead by example.
- **Confusion:** hand-offs are resulting in patient care gaps.
- **Priorities:** focus on outcomes for patients through our priorities.

Internal focus groups are continuing to ensure the NE LHIN is best positioned to improve the patient experience, system performance and population health outcomes.



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 Senior Leadership Team

The Board received updates on key files from NE LHIN senior leadership team which focus on the LHIN's **2018-19 Seven-Point Plan**, as outlined in the NE LHIN's **Priority Alignment Framework**. Some of the highlights since the previous Board meeting are outlined below.

Capacity

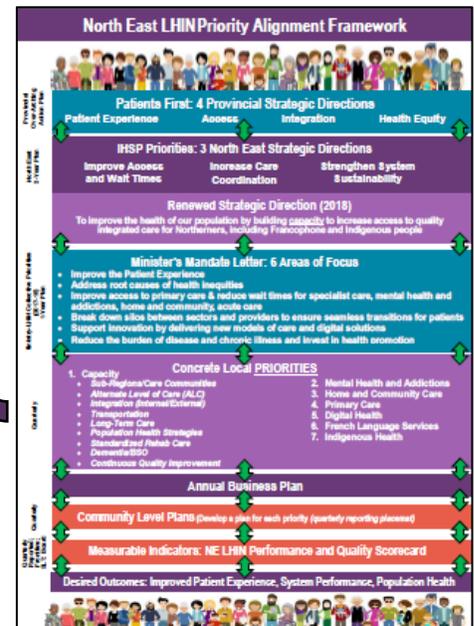
- Regional Specialized Geriatrics Program:**
 Supporting the development of clinical leadership and clinical integration of a Regional Specialized Geriatrics Program enhancement proposal for North Bay.
- Long-term Care (LTC):** Starting July 1, 2018, the LTC sector will receive additional support for the 2018-2019 fiscal year for each home to create and fill a new RN Full-Time equivalent position. This investment in specialized staffing resources provides supports to residents with growing complexity of needs and improves overall quality of care in the LTC home sector.
- Dementia Strategy:** NE LHIN has received support under 3 of 10 pillars for the Provincial Dementia Strategy, namely: Behavioural Supports Ontario (BSO) in community; BSO in LTC; and Community Dementia Programming (Adult Day Programs and First Link). NE LHIN staff are working with the BSO Program Manager and Dementia Strategy Steering Committee to develop plans for implementation of the new funding.

Digital Health

- NE Outreach Virtual Psychiatric Clinic:** On May 24, the first NE Outreach Virtual Psychiatric Clinic occurred with five patients booked. We are running this clinic as a trial/pilot to help us identify our resource needs and processes.

French Language Health Services

- Francophone Community Health Centre in Timmins:** On April 6, the NE LHIN received new base funding for a Francophone Community Health Centre (CHC) in Timmins. An internal team was established to support the Collaborative Committee in forming a founding board of directors, incorporating the new CHC, and identifying an already established CHC as the transfer payment agency and mentor. A meeting is scheduled with the NE LHIN team and the Collaborative Committee. Denis Bérubé, our Board member, is the chair of the Committee. The NE LHIN will enter into an MSAA with the Francophone CHC in Timmins once some of the above steps are completed.



Home and Community Care

- **Achieving Wait times:** A Tactical Plan for reaching the target (90th Percentile Wait Time from Community Setting to Community Home Care Service – 2018-19 target is 21 days) is in place. The plan touches on all aspects, from patient referral to assessment, to ensure that we are seeing the right patient at the right time. This indicator is primarily related to in-home rehabilitation services, and health human resource challenges are a major contributing factor that impacts results. In 2017-18, considerable gains were made with this indicator, going from about 90 days to 25 days.
- **Embedding/Optimization of Care Coordinators with Primary Care**
Physician engagement has begun at multiple clinics: Near North, Northern Shores, Blue Sky, Powassan and Area Family Health Team, Callander, Sturgeon Falls Family Health Teams, and Community Health Centres. A communication information/Frequently Asked Questions sheet has been created to support the collaboration of Primary Care Provider and Care Coordinator. Nipissing was chosen as the early adopter for this initiative. The planning for implementation for Temiskaming, Burks Falls, and Parry Sound areas will commence for primary care provider engagement. The roll-out across the North East will be developed later this fiscal year.

Indigenous Health

- As part of our Integrated Health Service Plan process, some of our staff spent a full day engaging and visiting with Sagamok First Nation. At the invitation of one of our Patient and Family Advisory Committee members, the day included a one-on-one discussion with the Chief and Community Wellness Director, a tour of the community's elder lodge and mental health and addictions centre, and a community evening celebration where empowering youth was the theme.
- The Board Chair, CEO and Director of Patient Experience enjoyed an invitation from Wasauksing First Nation that included a one-on-one discussion with the Chief, Health Director, Coordinator of the B'saanibamaadswwin Mental Health and Addictions Program, and a tour of the community.
- **Cultural Mindfulness:** Dr. Preston is assisting in establishing a cultural mindfulness program to build greater awareness of Indigenous culture and values with frontline health workers. This will be spread across the NE LHIN, and staff members who successfully complete the course will have a visual indicator on their name badge.

Mental Health and Addictions

- The Mental Health and Addictions Nursing program is now supporting three schools in the James Bay area, two in Moosonee and one in Moose Factory.

Primary Care

- **WAHA Psychiatry:** A recent departure of two outpatient psychiatrists has led to the development of a physician manpower strategy to fill gaps. A strategy is being developed in partnership to enhance and build dedicated WAHA mental health and addictions capacity with support from a larger setting. This includes local programming and the possibility of local Schedule 1 beds and enhanced safe rooms with support from a larger facility, as well as the use of more tele-psychiatry. This will reduce the number of extremely expensive, unnecessary, and potentially harmful, disconnected transfers for

transient psychoses, and will build capacity and an integrated program within WAHA.

- **Academic Detailing:** Our new regional Academic Detailer is promoting best practices for opioid prescribing to the Family Practice Department at North Bay Regional Health Centre and their work has been well received. This program was two years in development with the Centre for Effective Practice and is having great uptake by physicians. We are now implementing academic detailing in the NE LHIN. This will support innovative ways to assist primary care providers to establish best practices, starting with new opioid guidelines that involve one-on-one interaction with a “detailer” who is a trained best practice facilitator.

Integrated Health Service Plan (IHSP), 2019-2022

Engagements to develop our next three-year strategic plan (IHSP) are continuing with 24 engagements and two steering committee meetings held to date. Early engagement theme findings include:

- **Technology** -- Needs to drive patient-centred innovation.
- **Patient-Centeredness** – Empowering people to be accountable for their health and wellness.
- **Patient Navigation** – Patient navigators to help people navigate the system.
- **Prevention** – Preventative health and health promotion and a greater emphasis on prevention.
- **Equity and Capacity** – Ensuring equitable service delivery standards across the region and a focus on health human resources to help build capacity.
- **Integration** – Improving integration and breaking down silos to enhance patient-centered care.
- **Social Determinants of Health** - must be a part of the health care conversation.
- **Timely Access to Care** – Reduced wait times, greater access.
- **Culturally Appropriate Care**

