

**NOTICE OF INTENDED INTEGRATION
UNDER SECTION 27 OF THE LHSIA:
HEALTH SERVICE PROVIDER CHECKLIST**

Section 27(3)(a) of the Local Health System integration Act, 2006 (the “Act”) requires a health service provider (“HSP”) to give notice to a LHIN of any integration that relates to services that are funded, in whole or in part, by the LHIN. **Unless otherwise advised by the LHIN in writing, a notice of intended integration under s. 27 of the LHSIA should include the information set out below.** This information is requested under s. 22 of the Act to ensure that the LHIN has sufficient information to enable it to determine whether the proposed integration should proceed. **Please ensure that you attach all relevant information.**

DESCRIPTION OF INTENDED INTEGRATION

☐ *Iris Addiction Recovery for Women and Rockhaven wish to merge into a new entity and transfer addiction funding from The Salvation Army New Life Centre to the new entity.*

Funding transfer from Salvation Army to Iris Addiction recovery for Women will be complete November 1, 2013. No board action required for information only)

Negotiation for new MSAA bringing funding and services together will commence January 2014 and completed by March 31, 2014.

New entity combining Rockhaven and Iris Addiction Recovery for Women will be established by March 2014

BACKGROUND & BUSINESS CASE ☐

In the summer of 2012, Iris Addiction Recovery for Women, Rockhaven Recovery, and the Salvation Army (Addictions Rehabilitation Program) came together formally to explore ways in which they could utilize their collective resources to enhance service delivery to clients

Some of the benefits of this integration will be;

- new model of care to support streamlined client access, common intake, treatment planning and evaluation of outcomes.
- enhanced and uniform quality of service for both men and women,
- improved access and system navigation for consumers and their families
- opportunity for administrative efficiencies, such as payroll, HR, IT and one ED
- development of capital plan to improve current physical space,

It was agreed that the scope of the Steering Committee’s work would be focused on exploring and identifying integration opportunities specific to governance, administration, service delivery and physical plant.

Services Offered

Agency	Programs offered	Staffing	Facility
Rockhaven \$500,000	Supportive Housing. After Care residence (rent geared-to-income)	10 staff	SH – 18 beds, AC residence – 6 beds , Summer camp on Lake

			Geneva All 3 properties are paid in full and owned by the organization. Neither site is wheelchair accessible
Iris Addiction Recovery for Women \$1,600,000	<p>Iris Treatment:</p> <ul style="list-style-type: none"> ➤ 35 day residential and day treatment program ➤ 1 week recovery enhancement program ➤ Connections program <p>Pregnancy Parenting Outreach Program Women For Sobriety Iris Aftercare</p> <ul style="list-style-type: none"> ➤ Outpatient programming as well as rent geared-to-income residence <p>Addictions Supportive Housing HSN Emergency Department Substance Abuse Workers Aboriginal After Care Program Families in Recovery Weekend Mother/Daughter Weekend</p>	38 staff	Treatment - 12 beds AC - two 4 bedroom apartments Both sites are wheelchair accessible
The Salvation Army Addictions Rehab Program \$535,000	Residential Program a 10-12 week, 11 beds	6 staff	11 beds for addictions clients as well as offices and a joint meeting room for clients and staff. Site is not wheelchair accessible

Stakeholder Consultation

- Clients, Boards of Directors, Executive Directors and staffs of each agency
- Sudbury & District Public Health,
- HSN Addictions, Mental Health & Gambling, HSN Emergency Department,
- Shkagamik-Kwe Health Centre,
- Access Network;
- NE LHIN

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PUBLIC INTEREST CONSIDERATIONS↑

Summary Recommendations (as a result of stakeholder consultations):

1. That a new corporate entity be established within 7 months.
2. That this new corporation be governed by a 9 member Board of Directors composed of representatives from Rockhaven, Iris, Salvation Army and 4 new representatives from the community.
3. That the new entity establish a formal service agreement (contract) with the Salvation Army consistent with the current MultiSectoral Service Agreement with the NELHIN.
4. We are also meeting with HSN to discuss the Withdrawal Management Services and how they might fit into the new structure.

5. That the new organization contract the services of a human resources professional to set up a comprehensive human resources management system and to ensure compliance with relevant provincial and federal employment and labour standards/regulations.
6. That this newly integrated entity serve as a hub for training, professional development and research in Northern Ontario and work towards becoming a “Centre of Excellence” for best practices in delivering community-based substance abuse services.
7. That the new model develops core competencies, training standards and requisite minimum credentials for all staff involved in providing services to clients.
8. Given the age, lack of current space, limited accessibility and costs involved in on-going retrofitting and maintenance of existing buildings, that the new entity explores the viability of constructing new facilities in Sudbury to house and treat both women and men. In collaboration with HSN Withdraw management services and North East Local Health Integration Network (NELHIN) to proceed with capital reconstruction and/or relocation in or near the downtown core of the City of Greater Sudbury. A capital plan could be developed in year 1 with a target date of 2-3 years for achieving a new space option for the integrated operation.
9. Once the Integration Implementation Plan has been approved, that a series of information and exchange sessions be coordinated with the pool of frontline staff from each service delivery site to identify service priorities, best practices and approaches to care/treatment and to resolve any outstanding or contentious issues pertaining to perceived differences in organizational culture, philosophy and values.
10. That the new entity initiate dialogue and formal partnership with Shkagamik-Kwe Health Centre and other First Nation organization to enhance referral, coordination and provision of care for aboriginal clients within the community.

This Integration Implementation Plan is a critical step in consolidating resources and unifying the efforts of board members, staff and volunteers towards enhancing residential addiction services for women and men in and beyond the Sudbury/Manitoulin Districts. We anticipate it will improve and/or streamline client service and develop a more integrated model of service in order to provide an easier navigation of services from the client perspective. With dedicated leadership, commitment and collaboration it should also serve as a catalyst for continued integration of programs and services which enhance the continuum of care for clients in the community.

APPROVALS

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For NE LHIN Internal Use:
