

MEDIA RELEASE

North East LHIN Board Approves Realignment Plans for Cochrane Hub Area and Temiskaming District *Realignment plans respond to voices of Northerners*

Wednesday June 13, 2012 --- The North East LHIN Board of Directors has approved plans to realign health care services in two geographic areas -- the Cochrane Hub and Temiskaming District -- in the North East LHIN. The plans include operational improvement initiatives that will help build a more integrated and people-focused system of quality care.

At a public North East LHIN board meeting held yesterday, the LHIN thanked the more than 900 Northerners who participated in 19 community engagement sessions held in February and March of this year. "The recommendation and milestones come from the people who live here. For me, that makes them realistic," commented CEO Louise Paquette.

The LHIN Board directed staff to begin to implement each report's recommendation and associated milestones.

For people needing health care in their communities, there will be no immediate change and they will continue to receive and benefit from local health care services. As the reports' recommendations are implemented, people will notice and benefit from:

- More coordinated care
- Less fragmented care
- Fewer gaps in services
- More community-based care

Quotes

"People understand there isn't a bottomless pit of money and that means we need to use our human and financial resources appropriately and effectively," said North East LHIN CEO Louise Paquette. "Northerners deserve a more streamlined and less fragmented local system of quality care that takes into consideration our aging population."

"Our board has initiated a process for positive change by accepting these two plans calling for health care realignment," said Wally Wiwchar, North East LHIN Acting Chair and resident of Timmins. "The realignments of the Cochrane Hub and the Temiskaming District are focused on the needs of people, not providers; this is a step forward."

A progress report on implementation of each plan will be provided to the NE LHIN Board at the public Fall 2012 Board meeting.

For more information

To read the full reports go to

http://nelhin.on.ca/publications_internal.aspx?id=2188&ekmense=e2f22c9a_338_680_btnlink&langtype=4105.

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BACKGROUND

NE LHIN REALIGNMENT REPORTS – COCHRANE HUB/TEMISKAMING DISTRICT

Cochrane Recommendation

To realign the current 45 NE LHIN funded health service providers in the Cochrane Hub into clusters or regional provider networks as appropriate.

What does this mean?

- This change begins with the structuring of five clusters: 1)Timmins/Chapleau Hospital Cluster; 2)Timmins/Chapleau Mental Health and Addictions Cluster; 3)MICs Group of Health Services and Long Term Care Cluster (Matheson, Iroquois Falls, and Cochrane); 4)North Cochrane Hospitals and Long Term Care Cluster (Hearst, Kapuskasing, Smooth Rock Falls) 5) North Cochrane Mental Health and Addictions Cluster (Hearst, Kapuskasing, Smooth Rock Falls, Cochrane).
- Clusters are groups of health service providers who will come together, either because of their geography or their area of expertise (sector). Each of these clusters will work together in planning their delivery of health services.
- The timeline for change is documented in a series of 20 milestones within the report. Achieving each milestone will lead to success with implementation of the recommendation.

Temiskaming Recommendation

To realign health service providers in the Temiskaming District into one Temiskaming District Health Governance Entity.

What does this mean?

- This change begins with the structuring of a *Realignment Team* that will include both management or designates with program planning authority and Board representatives from health service providers in communities found in the Temiskaming District (including Englehart, Kirkland Lake and Temiskaming Shores).
- Individual health service provider boards will transfer into a Common Governance Entity and negotiate one accountability agreement with the NE LHIN for fiscal 2013/14.
- The timeline for change is documented in a series of 12 milestones within the report. Achieving each milestone will lead to success with implementation of the recommendation.