

Making Healthy Change Happen in Northeastern Ontario

2012 Report to Our Communities



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Joanne and Ron Pettit are long time volunteers with Meals on Wheels in Sudbury. Every year the NE LHIN invests in 22 agencies across Northeastern Ontario so that close to 200,000 meals can be delivered to more than 2,500 seniors.

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Making healthy change happen in Northeastern Ontario

If you live in Peawanuck, Timmins, Sault Ste. Marie, Mattawa, Sudbury, North Bay, Parry Sound, Hearst, Wawa or anywhere in between, health care in your community is coordinated, funded, and planned by the North East Local Health Integration Network (NE LHIN).



"The North East LHIN has been working hard to deliver the best possible care to communities throughout the North. Engaging northern residents has been a key component of that work. I'm pleased to see the North East LHIN embracing our government's Action Plan for Health Care, so that together we can transform our health care system so that it's there for our children and grandchildren."

Hon. Deb Matthews
Minister of Health and Long-Term Care



"The North East LHIN Board and staff continue to engage with fellow Northerners and providers on how best to realign local health care services to ensure people are receiving the right care, in the right place, at the right time. At the end of the day, we need a patient-centred, results-driven, integrated and sustainable health care system."

Louise Paquette, CEO
North East Local Health Integration Network
(NE LHIN)

Working *For* You and *With* You

A message from Louise Paquette, North East LHIN Chief Executive Officer

Northeastern Ontario is arguably the best place in Ontario to live and work. Our air is clean, our communities vibrant and safe, and our strength as a Northern family is powerful.

The NE LHIN is working to realign our health system across the region to create:

- more patient-focused care;
- more care for our elderly at home or in community, where they most want to be; and
- a more seamless system that is easier to navigate.

Guided by a Board of Directors who live and work in communities across Northeastern Ontario, NE LHIN decisions are shaped through extensive engagements with fellow Northerners.



NE LHIN CEO, Louise Paquette, speaks with Lisa Gorky, a resident of Finlandia Village in Sudbury. They enjoyed a chat during a February 2012 visit to Sudbury by the Hon. Deb Matthews, Minister of Health and Long-Term Care.

Over the past year we have held engagement sessions with more than 1,700 Northerners. Their input is helping to shape our LHIN's work in 2012 and focus our efforts so that our health care system is more patient-focused, integrated, and sustainable.

Our work this year is guided by *Ontario's Action Plan for Health Care* and its three priorities:

- Keeping Ontario Healthy
- Faster Access to Stronger Family Health Care
- Right Care, Right Time, Right Place.

Local health care is changing for the better. Throughout the pages of this report, the NE LHIN is proud to introduce you to fellow Northerners and their health care experience.

Each story illustrates both the need for change and the evidence of the great things happening in our LHIN.

This year, the NE LHIN is:

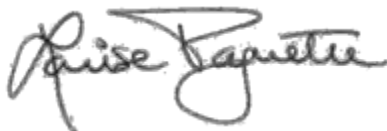
- ✓ Increasing primary care coordination
- ✓ Enhancing the continuum of care
- ✓ Improving navigation of the local health care system
- ✓ Expanding eHealth opportunities
- ✓ Facilitating integration initiatives
- ✓ Targeting the needs of special population groups
- ✓ Making mental health and addiction programs and services more accessible.

These themes echo those we heard in our engagements and our overarching goal:

***To realign Northeastern Ontario health care providers
in an effort to increase access to quality care for Northerners and
ensure a more patient-centred and community-based system.***

Let me know your thoughts to help make our health care system stronger in Northeastern Ontario. You can e-mail engagingwithyou@lhins.on.ca, or phone 1-866-906-5446, anytime!

Northerners want made-in-the-North solutions and I look forward to working with you as we transition to a more integrated model of care.



North East LHIN Region



This is the region of the NE LHIN – an area of land that is bigger than Germany. Within this area, the NE LHIN is responsible for planning, funding and integrating health care services.

Early in 2012, *Ontario's Action Plan for Health Care* noted that planning for primary care will be brought under the LHIN umbrella as well.

As a LHIN, we have divided our region into five HUB districts based on hospital referral patterns and planning areas. You can see these districts in different colours on the map. The HUBs allow us to better manage our vast geography and serve fellow Northerners.



NE LHIN Region Facts, Stats and Figures

- 550,000 people; 60% urban, 40% rural
- 17% aged 65+ (13% for Ontario); in 2030, 30% (compared to 22% for Ontario)
- 10% Aboriginal
- 24% Francophone

- Close to 200 health service providers receive funding through accountability agreements with the NE LHIN, including 25 hospitals, 41 long-term care homes, the North East Community Care Access Centre (CCAC), 48 community mental health and addictions providers, 71 community support service agencies, six community health centres.

- A higher percentage of people living with chronic diseases than the rest of Ontario, including:
 - arthritis/rheumatism - 24% vs. 17%;
 - asthma - 10% vs. 8%;
 - high blood pressure - 23% vs. 17%;
 - diabetes – at 7.2% vs. 6.4%; in fact, in some communities along the Hudson and James Bay Coast, more than half of the people live with diabetes.

- The North East has declining demographics (total population down 5% since 1996), a population dispersed across 400,000 square kilometres, and limited health care professionals to provide services.

- In addition to chronic diseases, the health profile of Northerners has a list of higher-than-provincial averages, including people living with substance abuse and obesity.



In the summer of 2011, the NE LHIN announced funding to hire a physiotherapist in Sudbury East to help seniors maintain their independence longer. Back to front: Jacqueline Gauthier, Executive Director of the Centre de santé communautaire de Sudbury-Est, Physiotherapist Celeste Hutchings, and Monique Lapalme of the NE LHIN.

A crown agency, the NE LHIN has 37 full-time staff located in community-based offices in North Bay, Sault Ste. Marie, Sudbury, and Timmins.

North East LHIN Board of Directors

Our Board of Directors is an active Board with enthusiastic and hard-working members who bring a wide variety of expertise to the table.

Our Board members bring the face of the communities we serve to our governance table. As we recruit new board members, this wide breadth of skills and expertise will continue to be sought.



Randy Kapashesit, from Moose Factory, was a long time NE LHIN Board member. He then served as Interim Chair from June 1, 2011, to April 25, 2012, when he passed away unexpectedly. He was a passionate individual who wore many hats including Chief of the Mocrebec Council of the Cree Nation. An articulate, passionate speaker, he worked extremely hard to make life a better place for people of all walks of life and communities. He is dearly missed by many.



Wallace "Wally" Wiwchar Timmins
Vice Chair



Dr. Ian Cowan
North Bay



Leah Welk
Parry Sound



Cecilia Bruno
Sault Ste. Marie



Dr. Colin Germond
Sudbury



Danielle Bélanger-Corbin
Temiskaming Shores



Meetings of the NE LHIN Board of Directors are open to the public. Please visit our website at nelhin.on.ca for information regarding our meeting dates and locations.

Primary Care in our region

Early in 2012, *Ontario's Action Plan for Health Care* noted that planning for primary care will be brought under the LHIN umbrella. Primary care is the first point of contact between a patient and the health care system, so it is a very important part of the continuum of care. Primary care providers can include people working out of a family health team, a community health centre, a nurse practitioner clinic, a nursing station – primary care involves many different disciplines.

Dr. Tim Zmijowskyj, a Sudbury family physician who joined the NE LHIN team in February 2012 as Primary Care Lead, recognizes our system's challenges.

“Our health services and programs are extensive and deep, yet

increasingly confusing. Navigating the maze is difficult but, with significant time and effort, home can still be the ‘right place’ to be for most people.”

Dr. Zmijowskyj's role as Primary Care Lead with the NE LHIN, and our introduction of Community Support Services (CSS) System Navigators, are significant steps forward in 2012 to improve access to quality care for Northerners.

The North East LHIN is working to help establish and maintain Northeastern Ontario **Family Health Teams, Nurse Practitioner-Led Clinics, Community Health Centres and more.** Greater access to care options means less pressure on emergency departments and a better ability for hospitals to meet their acute care mandate.

Primary care options in Northeastern Ontario include: 538 Family Physicians; 27 Family Health Teams; Six Community Health Centres; Six Nurse Practitioner-Led Clinics; 16 Nursing Stations; 1 Group Health Centre in Sault Ste. Marie and 3 Aboriginal Health Centres.

Health Care Connect: In the past three years, more than 20,000 people across the region have been referred to a family doctor or nurse practitioner through this new access system reached online or by calling 1-800-445-1822. At the beginning of February 2012, almost 37,000 people in our region had registered with *Health Care Connect* to be linked with a family health care provider – more than any other LHIN in Ontario. Statistics show almost 8,500 of these patients registered online. The NE LHIN percentage of total registered patients referred to care increased from 35% to 56% since October 2010, which is a substantial improvement.



Dr. Tim Zmijowskyj, NE LHIN Primary Care Lead, speaks with Phillip Thompson, Elder/Instructor.

Home is where the heart is

Because you have told us that you want to be in your home, especially when you get older, the North East LHIN is enhancing services to make more community care possible. We've expanded programs like **Home First**, a home-based care service offered by the North East Community Care Access Centre (CCAC) in partnership with the region's four largest hospitals (North Bay, Sault Ste. Marie, Sudbury and Timmins).

It's been projected that more than 700 seniors who are designated or at-risk of being labelled Alternate Level of Care (ALC) will have been discharged home from hospital with Home First. Before the Home First 'philosophy,' many of these frail elderly patients would have stayed in hospital until a long term care bed became available.

Home First revolves around the evidence that staying in hospital longer than necessary can have negative health impacts on patients, including increased risk of infection, loss of mobility, and social isolation.

Since first implemented by the NE LHIN in August 2010, Home First has helped to decrease rates of ALC in the region's four HUB hospitals to 13% in February 2012, from a previous year's high of 26%.



In North Bay, it's important to Joanne and James McIsaac that they have the freedom to maintain their home life as long as possible. As Joanne (shown in photo with Personal Support Worker Monique Blanchette) says,

“We’re not ready for a nursing home.”

The couple benefits from **Assisted Living** services funded by the North East LHIN and delivered by PHARA. The program is designed to provide intensive in-home supports to enable seniors to remain safely in their homes.



Assisted Living: Around-the-clock scheduled and unscheduled support can now be accessed by an eligible high-risk senior who is living independently in either an Assisted Living (AL) residence or near one. In the past, AL was *building-focused*. Now, thanks to an updated High Risk Seniors Policy, it can be delivered outside of a building and in areas where large numbers of seniors are clustered around a provider. The NE LHIN is in the process of designating these areas around its 17 AL providers.

To learn more about community-based care, call the NE LHIN at 1-866-906-5446.

Behavioural Supports for older adults

Thanks to a new plan for Northeastern Ontario, seniors with challenging behaviours brought on by dementia, neurological conditions, mental health issues and addictions are receiving the care



they need. The North East LHIN's Behavioural Supports Plan is adding 58 new health professionals with specialized training to meet the needs of older adults in the region with responsive behaviour issues. These behaviours, which put at-risk either the senior's or their caregiver's safety, include aggression, wandering, and agitation. For many, these behaviours trigger a crisis visit to hospital where they may remain for an extended period of time and are at-risk of becoming an ALC patient.

"We believe that these older adults are better served at home in their community or in a long-term care residence, rather than in hospital," explains Louise Paquette, CEO, NE LHIN.

"The number of people at-risk for responsive behaviours is increasing with our aging population, and more services and support are needed for these Northerners, their families and their caregivers."

– Louise Paquette, NE LHIN CEO

The NE LHIN's plan, which began rolling out in February 2012, will have an impact on the overall health care system by reducing the number of ALC patients with challenging behaviours in hospital, as well as improving Emergency Department wait times by freeing up more acute beds. The plan builds on existing programs and services offered in community, hospital and long-term care settings, and will improve and expand care for these older adults.

The North Bay Regional Health Centre has been chosen to lead the delivery of Behavioural Support Services across the Northeast. Teams are based in the region's four urban centres – North Bay, Sault Ste. Marie, Sudbury and Timmins – with linkages to the smaller communities of Elliot Lake, Blind River, Parry Sound and Mattawa. Teams will focus on providing support to long-term care homes or to caregivers in a community setting when an older adult with responsive behaviours is in need of help.



Who is on the Responsive Behaviour Teams: Registered nurses (RNs) and personal support workers (PSWs) located in long-term care homes; psycho geriatric resource consultants; responsive behaviour clinicians; and a nurse practitioner. These teams will also be supported by a system coordinator and administrative support staff.

How do I access help if a relative supported at home is exhibiting responsive behaviours? Contact the NE CCAC at 310-CCAC (2222) to find help and services in your community.

NE LHIN responds to health human resource needs

Seven students made history in Parry Sound after graduating in 2011 from what is believed to be the only Personal Support Worker (PSW) Fast Track program developed for a Long-Term Care Facility. Their graduation responded to a need in Northeastern Ontario to recruit and retain additional health care professionals.

The NE LHIN has worked with health care partners to create a first-ever Northeastern Ontario health workforce database that includes 33 occupations and shows where jobs are now, and where they're needed going forward.

Health service providers can access the Health Human Resources (HHR) inventory through a portal on the NE LHIN website. Occupations catalogued include nurses, addiction workers, paramedics, physicians, social workers, personal support workers, and visiting homemakers.

Lakeland Long Term Care Residence is a 110-bed long-term care home attached to the West Parry Sound Health Centre. Parry Sound, like many Northern communities, has struggled to maintain personal support workers. Demand grew for that workforce when Lakeland opened about seven years ago and the full-time college program wasn't graduating enough PSWs to meet community needs.

Now one year into her PSW role in Lakeland's Secured Dementia Special Needs Unit, Cheryl Poitras describes her work as rewarding.

"I feel so good going home that I've helped somebody. I think I found my calling." - Cheryl Poitras, Personal Support Worker

"We had to do something to address our issues," said Lakeland Administrator Len Fabiano. While the Lakeland's pilot addresses a need in Parry Sound, it was also developed as a model in other communities that are experiencing shortages. "All who completed our PSW program had such a hunger to become a PSW and never believed they would have the opportunity to do so. That hunger meant that once they were given the opportunity to fulfil their dream, their compassion blossomed," says Fabiano.

The North East LHIN is collaborating with health-care partners on worker recruitment and retention to provide Northerners with care in the right place and at the right time. Many municipalities and District Social Services Administration Boards passed motions in 2012 endorsing the NE LHIN's call to work together to increase access to care for Northerners.



‘Navigators’ guide Northern patients through the health care system

Because you told us today’s health care system can be a maze, the NE LHIN is taking steps to make patient navigation simpler in Northeastern Ontario. During our community engagements, the NE LHIN heard repeatedly about the need to reduce complexity, confusion and fragmentation so that people can get the care they need more quickly, closer to where they live, and in their preferred setting.

In 2012, the NE LHIN is funding four Navigators – in North Bay, Sault Ste. Marie, Sudbury and Timmins, – to work directly with the local Red Cross to help people get the community care they need when they are being discharged from hospital.



“The Navigator will help make sure that frail elderly patients in hospital are linked with existing services so that they can be supported at home after discharge,” says Louise Paquette, CEO of the North East LHIN. Navigators will help connect the work of 70 Community Support Service providers across Northeastern Ontario, all of which are funded by the NE LHIN. Their help for seniors ranges from providing meals on wheels to assisted living services.

“Our senior citizens have told us that the health care system is not the easiest to access or navigate,” says Sandra Gagnon, System Navigator, Timmins. “Ultimately, my role is to ensure that all partners in care, in all sectors, continue to collaborate to improve access to community services, build community capacity, and enhance health system coordination.



Navigators: Debbie Amaroso is based at the Sault Area Hospital, Nancy Lacasse is working out of Health Sciences North, Sandra Gagnon is at the Timmins District Hospital, and Heather Cranney will work out of the North Bay Regional Health Care Centre.

A GEM of a NE LHIN investment

The NE LHIN-funded Geriatric Emergency Management (GEM) program at West Parry Sound Health Centre recently marked its first year of providing improved services for seniors in the Emergency Department (ED). In that first year, 550 patients were seen by the Parry Sound GEM Nurse who identifies what support services the person will need to be safely released from the ED and return home. Equally great is that 350 referrals were made to community resources. GEM programs, also funded by the NE LHIN, are found at Sault Area Hospital and Health Sciences North.

“These GEM programs are helping to deliver the right care for our growing number of Northern seniors.” - Louise Paquette, NE LHIN CEO.

“These are the types of programs that have helped to reduce our rate of alternate level of care (ALC patients) in acute care beds by half in the past year,” says Paquette.

GEM offers a straightforward solution to a complex patient care scenario. A GEM nurse interviews those people 75 and over who are high risk based on certain criteria, to determine the patient’s health care needs, and identify what support services the person will need in order to be safely released from the ED and return home. The GEM nurse may also assist younger seniors who may also be high risk, on referral from hospital staff.

GEM is one important part of the NE LHIN's efforts to reduce ED wait time and ALC (Alternate Level of Care) pressures. Both challenges relate to the flow of people in and out of hospital. GEM is a key part of easing patient congestion and enhancing care in the ED.



Louise Paquette (left), CEO of the North East LHIN, with Brenda Tabondonding, GEM Nurse Nelson Jay, and Patti Farris at the West Parry Sound Health Centre.

Patient wait times showing improvement in the NE LHIN

In 2011-2012, North East LHIN, Ministry of Health and Long-Term Care, and local hospitals worked together to continue to shorten wait times for patients. Third quarter results show wait times for a number of procedures improved from the previous year, including:

- | | | | |
|--------------|---|--------------|---|
| ↓ 55% | Cardiac By-Pass Procedures wait times decreased by 55%, down from 62 days to 28 days. | ↓ 30% | Diagnostic CT scan wait times decreased by 30%, down from 33 days to 23 days. |
| ↓ 13% | Cancer surgery wait times decreased by 13%, down from 62 days to 54 days. | ↓ 8% | Knee Replacement wait times decreased by 8%, down from 426 days to 393 days*. |
| ↓ 6% | Hip Replacement wait times decreased by 6.0%, down from 301 days to 283 days*. | ↓ 4% | MRI wait times decreased by 4%, down from 105 days to 101 days. |

* See article on page 16.



Pharmacist Claire Shaw talks to Gabriel Giroux about his medications. Northerners can take advantage of having their prescriptions reviewed by their local pharmacist.

Increasing Northern access to hip and knee surgeries with LHIN Joint Assessment Centres

More than 2,600 patients have already been referred to new LHIN-funded centres across Northeastern Ontario for patients suffering from hip and knee problems.

The LHIN works with the region's 18 orthopaedic surgeons on ways and means to move people through the system faster to help lower wait times for hips and knees across the region. And positive results are showing! Joint Assessment Centres have opened in North Bay, Parry Sound, Sault Ste. Marie, Sudbury and Timmins.

"As we heard in our community engagement sessions, Northerners want improved access to hip and knee replacements," says Louise Paquette, CEO, NE LHIN. "The LHIN Joint Assessment Centres will help people across the region access the care they need in a more timely fashion."



Tonia Cockburn, Advanced Practice Physiotherapist based at the Joint Assessment Centre in the North Bay Regional Health Centre, with patient George Lefebvre of Latchford.

"One of the most impressive things for me about this whole experience is how quick the process was. The time from my first assessment to my surgery date was only four months. I felt very supported through this process and I am amazed by all the assistance provided for patients." - George Lefebvre, Latchford

NE LHIN-facilitated Joint Assessment Centres enable: lower wait times for hip and knee replacement assessments and surgery; timely identification and management of patients who do not require surgery; better patient education on community resources; improved overall quality of care; and less need for patients to travel outside of the North East for surgery.



If you suffer from chronic hip and knee pain, ask your Primary Care Provider (family physician or nurse practitioner) about the North East Joint Assessment Centre. The referral form can be found on the NE LHIN website (www.nelhin.on.ca). An appointment with NEJAC will be set up within 7-14 days of receiving a referral.

Going the distance for patients with eHealth

North Bay to Toronto burn consultation for Baby Abigail

A cup of scalding tea burns an infant, while in another part of the region a daughter worries about cancer treatment for her father, who is miles away.



Mom, Colleen Harrison, is happy with the major role telemedicine played in Northern baby Abigail's recovery from a recent injury.

These recent traumatic events for Northern patients and family members have been made easier through the LHIN's expanding use of **Telemedicine**.

In North Bay, Colleen Harrison's 10-month-old daughter, Abigail, and in Englehart, Carrie Hawkins' 72-year-old father, Morley, are among more than 21,000 people across the region who have recently benefited from this technology.

"Telemedicine is a fabulous technology...It allows you to have first rate doctors at your side, whether they are four hours away or on the other side of the world!" - Colleen Harrison, North Bay

The North East is the highest user of the technology amongst Ontario's 14 LHINs, embracing it as a way to improve access to care for Northerners. This eHealth solution, delivered through the Ontario Telemedicine Network, is ideal for our region's gigantic land mass, aging demographic, sometimes scarce health human resources, difficult climate, and often great distances for medical care between communities.

Colleen sings the praises of telemedicine for her daughter's recovery from an injury. Abigail pulled herself up to the table and put her hand in a hot cup of tea. A doctor at the local hospital wrapped the baby's hand and asked that they come back in five days to have the bandages removed.

Due to the baby's age, her physician was hesitant to remove the dead skin and there was talk of sending her to Sick Kids in Toronto. However, by using telemedicine, a Toronto doctor was able to see them that same day in North Bay. Abigail and her parents were spared the four-hour drive to Toronto while a second telemedicine appointment was set to follow the case.

At that appointment, North Bay Regional Health Centre staff used a special hand-held camera that could zoom in 50X for the doctor to have a very good look at Abigail's hand and provide instructions to the nurses. One month later, the hand had healed so well that Abigail doesn't have any scarring.



Telemedicine service links health-care professionals with 26 First Nation communities across Northern Ontario. KO Telemedicine will co-ordinate more than 3,000 consultations this year, sparing patients in First Nation communities like Peawanuck from having to travel to urban centres for medical care.

Telemedicine helps to deliver clinical care to patients and distance education for health care professionals using live, two-way videoconferencing systems and related diagnostic equipment. It is now available in 207 Northeastern Ontario health care locations from Attawapiskat to Wikwemikong (see list at <http://otn.ca/index.php?uri=/en/otn/site-locations/>).



At 2011's first-ever Northern Telemedicine Forum held in Sault Ste. Marie, Ed Brown, head of the Ontario Telemedicine Network, said patients in the North East and North West LHIN areas in 2010/11 had avoided more than 61-million kilometres of travel, along with Northern Health Travel costs of more than \$25-million.

Sudbury-based Geriatrician, Dr. Jo-Anne Clarke, provides dementia consultation and care for clients across Northeastern Ontario with the help of telemedicine.

Engaging on how to realign health care services

The North East LHIN has the mandate and authority to integrate its local health care providers as a means to improve access to care for people. This integration is focused on the needs of people, not providers.

The North East LHIN is actively responding to the voices of thousands of Northerners who have participated in extensive community engagement sessions across Northeastern Ontario.

Northerners said they want increased access to local community care while benefiting from an easier-to-navigate and less fragmented system of care.



Sisters Barbara Burrows (left) and Ellen MacPherson, lifelong residents of Englehart, were pleased to voice their thoughts to increase access to care for seniors living in the Northeastern community of Englehart in March, 2012.

The NE LHIN Board passed a resolution in January 2012 to further engage with people in Cochrane and Temiskaming Districts on how best to realign health care services. A proposed realignment plan will be considered at the June NE LHIN Board of Directors meeting.

2012 engagement sessions have been held on how to realign health care services to ensure people are receiving the health care services they need in the right place, at the right time, and for the right cost. This realignment effort is in keeping with the need to respond to a more community-based and less institutionally-based system of health care, and *Ontario's 2012 Action Plan* to transform the health care system.

Participate in the North East LHIN's ongoing community engagement process

- engagingwithyou@lhins.on.ca
- Tel: 705-840-2872, toll-free: 1-866-906-5446, fax (705) 840-0142



The Local Health System Integration Act gives LHINs the mandate to plan, fund and integrate local health care services.

Bill 46, the Excellent Care for All Act, recognizes that a high quality health care system is one that is accessible, appropriate, effective, efficient, equitable, integrated, patient-centred, population health focused, and safe.

Integrated mental health and addiction services mean fewer doors, more care

It's new, it's exciting, and its focus is clearly the patient and consumer.

It's the Algoma Mental Health and Addictions Integrated Anchor Agency – a NE LHIN-facilitated integration of 13 mental health and addiction providers and more than 100 services in Algoma District. The objective is to increase access and offer more patient-focused care for people of Algoma District.

A group of like-minded providers began to meet in November 2009 with the goal, *"To provide timely, holistic, client and family driven, culturally responsive, mental health and addiction services that are simple to access, caring and respectful and preserve the dignity of clients and families."*

"The Algoma region has wonderful people in extremely

great agencies providing mental health and addiction services. But with 18 different organizations involved, it was difficult for a person to navigate the system and find the best agency for their specific mental health or addiction problem."

- Dr. Brian Mitchell Sault Ste. Marie, Ophthalmologist.

What does the Anchor Agency mean to consumers or people in need of a mental health and addiction service? If you live in the Algoma region, you can expect the agency to provide



In 2011, the NE LHIN supported the creation of a Regional Warm Line so that Northerners in need of mental health, addictions or other support after hours can access better services. Operated by the NISA/Northern Initiative for Social Action, it offers peer support for anyone needing a friendly ear. The Warm Line also empowers people with lived experience of mental health services by providing employment opportunities. Open 6 p.m. to 12 a.m., seven nights per week, Northerners can access the Warm Line by dialing 1-866-856-9276.

From left to right: Michael Clark, Regional Warm Line Coordinator; Louise Paquette, CEO of the North East Local Health Integration Network (NE LHIN), and Shana Calixte Executive Director, NISA.

a single doorway to the system, where consumers won't have to tell their story over and over to different providers. In addition, centralized access and treatment, rooted in evidence-based practice, will ensure that each person receives the highest quality of care.

Community mental health and addictions services funded by the North East LHIN from the following Algoma District health service providers are integrating into the new Algoma Anchor Agency:

- Lady Dunn Health Centre - Wawa
- Sault Area Hospital - Sault Ste. Marie
- Canadian Mental Health Association - Sault Ste. Marie Branch
- Breton House - Sault Ste. Marie
- Ken Brown Recovery Home - Sault Ste. Marie
- Algoma Public Health - Sault Ste. Marie
- Phoenix Rising Women's Centre - Sault Ste. Marie
- Women in Crisis Inc. - Sault Ste. Marie
- Algoma Family Services - Sault Ste. Marie
- Counselling Centre of East Algoma - Elliot Lake
- North Shore Community Support Services Inc. - Elliot Lake
- St. Joseph's General Hospital - Elliot Lake
- Anishnabie Naadmaagi Gamig Treatment Centre - Blind River

Inaugural Board Directors of the Algoma Anchor Agency include:

- Peter Vaudry (Chair)
- Greg St-Aubin
- Dr. Samantha Wallenius
- Vincent Casey
- Jennifer Dickson
- Dr. Emmalee Marshal
- Mary Ellen Luukkonen
- Darlene Baxter



Amanda Deforge works with client Ermida Rossi at the Alzheimer Society Sudbury-Manitoulin's Adult Day program.



The Algoma Anchor Agency's first Board of Directors was established in the fall of 2011. More than 60% of the new board members have first-hand experience as consumers and family members.

Email: Algoma.AnchorAgency@gmail.com.

Bringing care to seniors and their communities on Manitoulin Island

It's a new concept funded by the NE LHIN, it's mobile, and after less than two months, it had a waiting list of 30 eager seniors. In a largely rural area like Manitoulin Island, with limited transportation and no large cluster of population, it's a community-based way to deliver day programs to seniors, and offer respite for their caregivers.

Rather than making seniors travel, each week a VON recreationist and Personal Support Worker, both from the island, travel to Manitoulin communities to offer activities and socialization.

The communities of Wikwemikong and M'Chigeeng, with another site coming in Little Current, have been very receptive to the program and have offered program sites and even translation services.

The VON's Alana Scichilone says up to 13 seniors are now looking forward to the program each week. Higher-needs seniors, referred to the program, participate in games that stimulate their gross and fine motor skills, and are welcome to stay the full day, or part of the day, for activities and socialization.

Rita Wemigwans, a client, says she is enjoying the adult day program. Her favourite part is bingo, but she also likes the exercises, puzzles and crafts.

"I'm happier and not bored from doing nothing all day."



Rita Wemigwans, a happy client of the LHIN-funded mobile day program now offered in Manitoulin Island communities.

Elders Gathering Place offers Moosonee community focal point

More than a dozen elders, mainly women, rock back and forth speaking in Cree as toddlers play at the Elders Gathering Centre - Kishayaahwe Mamowetowekamik, in Moosonee.

After singing a song, the children and elders have a snack and then women begin their knitting and sewing projects. Many of the Elders are picked up and driven to the Gathering Centre by a Red Cross van for afternoon activities.

Last year, the North East LHIN provided \$63,000 towards purchase and renovation of a building to house the centre, which opened in October. It serves as a focal point for Aboriginal elders and their caregivers to meet, receive services, referrals, assessments and even meals. The funding for the project flows through the Timmins branch of the Red Cross.

Before the centre opened, programming for elders was run out of the curling club which was sometimes so cold the women had to wear their winter coats and found their beading work difficult. Events at the club also meant their gatherings got cancelled.

“It has been a privilege to spend time with the Elders in the Gathering Centre and every time I sit, and chat, over tea, I learn more and reaffirm my commitment to make a difference in providing support to the community,”

- Heather Cranney, Timmins Red Cross District Branch Manager

About 22 seniors in the community have also recently received “Life Lines” through the LHIN’s aging at home funding. These buttons, worn at all times, allow the seniors to call for help in case of trouble or after a fall. This provides peace of mind for both the elders and their families, allowing the seniors to live independently at home.



LHIN CEO, Louise Paquette, speaks with Margaret Wabano, 108, and Cree translator Greg Spence in Moose Factory, February, 2012. Margaret was about to be discharged from hospital and, like most Northeastern seniors, was looking forward to going home. She was also looking forward to spending time with her friends at the Elders Gathering Place.

NE LHIN works with partners to increase Francophone access to care in North East

Staff of the North East LHIN French Language Services team and the *Réseau du mieux-être francophone du Nord de l'Ontario* work together to increase access to health care for the region's more than 125,000 Francophones.

The *Réseau*, a ministry-appointed French-language service planning entity, works with the North East and North West LHINs to encourage participation from Francophones on improving access to health care.

Francophone engagement is a major part of the planning entity's role, through an agreement signed with the LHINs. By establishing local health tables (*Carrefours santé*) of stakeholders with an interest in improving access to French language health services, the *Réseau* helps the LHIN to receive feedback from the Francophone population.



Seniors Yvette Plante, Aline Seguin, Denise Bundy and Gery Berthelot play cards at the Centre de santé communautaire du Grand Sudbury.

“At times it is difficult for any individual to express their health care symptoms and issues with their primary care provider. For people whose mother tongue is French and whose primary care provider’s first language is English, the barrier to effective care becomes even greater.”

- France Jodoin, Executive Director of the *Réseau*

Réseau staff worked with the NE LHIN in early 2012 to facilitate discussions with Francophones in Cochrane and Temiskaming districts on how to realign the local health care system to ensure investments are focused on the needs of patients. Since 2007, the NE LHIN has worked with health service providers to increase their ability to provide services to French speaking people in the catchment area they serve. In the North East, 36 health service providers are officially designated to provide services in French and 68 are working towards implementing French language services.

Community agency-hospital collaboration shows innovation and patient benefit

Innovative NE LHIN efforts are succeeding in decreasing the number of repeat visits by mental health and addiction consumers to our region's emergency departments. At the same time, the health care needs of these individuals are being met more quickly and appropriately right in our hospital emergency departments.

Diverting patients from emergency departments to appropriate providers for support offers patients ongoing support, and frees up the hospital's acute care resources for those who are suffering from a life threatening illness and are relying on their ED for urgent care.

The NE LHIN has funded Iris Addiction Recovery of Sudbury to provide an Emergency Room Addiction Worker to work collaboratively with Sudbury hospital staff six nights weekly.

"Only good can come out of it," says Kathryn Irwin-Seguin, Iris Executive Director. "I'm hoping it benefits everyone involved, especially the patient."

"The IRIS/ED Addictions worker has already generated many positive comments from staff at our morning team huddle."

- Crystal Pitfield, Clinical Manager, Emergency Department, Health Sciences North

"The staff are impressed with how early workers are able to intervene and provide counselling and referral to community services which in one case led to what staff definitely feel was a reduced length of stay in the ED," says Pitfield.

"Patients are now receiving targeted, expert counselling services for their addictions along with potential follow up in the community. Staff members are thrilled to have the workers here with us and the workers are looking for opportunities to both intervene with patients and provide education to staff. A definite win-win for the community and us."



Iris Addiction Recovery of Sudbury workers Stacey Nearing (left) and Mary-Anne Hansen are based in Health Sciences North's emergency department.

Facts:

- Each year, the NE LHIN allocates approximately \$70 million to 48 regional providers for front-line community mental health and addictions services.
- The North Bay Regional Health Centre opened in 2011 as the first of its kind in Canada to co-locate an acute hospital and a specialized mental health centre on the same site.
- Repeat unscheduled visits within 30 days to the hospital emergency department may reflect on a lack of service options in the community for those experiencing mental health and substance abuse issues. The NE LHIN's rate of repeat unscheduled emergency department visits within 30 days for mental health issues has improved from a baseline of 19% to 17% and for substance abuse issues from 30% to 24% based on the most recent data from the Ministry of Health and Long-Term Care.
- The North East LHIN has been coordinating planning with our local partners across the North East and various provincial ministries for a new **Regional Mental Health and Addiction Consultation Group** to implement the province's 10-year comprehensive mental health and addictions strategy – “Open Minds. Healthy Minds” – and to provide advice to the NE LHIN regarding important regional mental health and addiction issues, and where future LHIN funding allocations would be best applied.

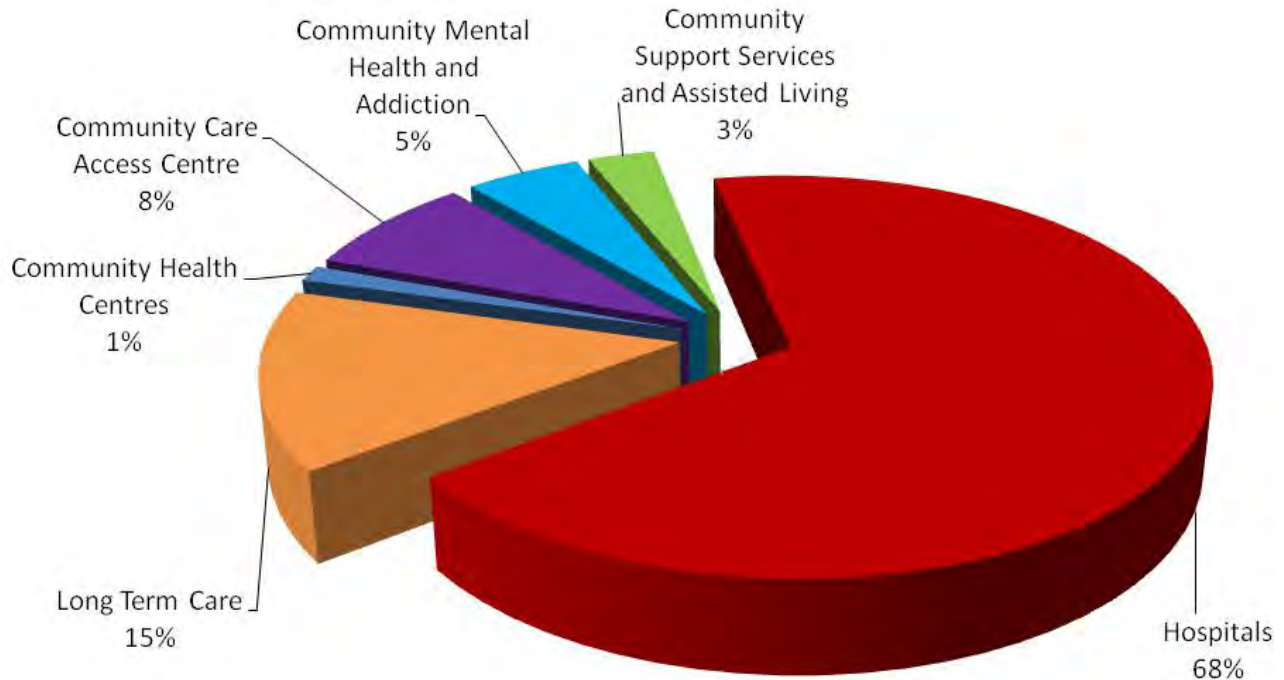


Barbara Boyer has found a passion carving waterfowl at the Parkside Older Adult Centre in Sudbury.

An annual \$1.4-billion investment in front-line care for the people of Northeastern Ontario

Every year, the North East LHIN invests \$1.4 billion in front-line health care in Northeastern Ontario.

The majority of the investment, about 70 per cent, supports 25 hospitals across the LHIN (four large and 21 medium and small rural hospitals.)



Some \$200 million supports 41 long-term care homes, followed by \$114 million to the North East Community Care Access Centre, \$72 million to 48 community mental health and addictions programs, and \$18 million for six community health centres.

The remainder, about 3 per cent or \$42 million, is dedicated to “incommunity care” such as: assisted living – which includes helping seniors to live at home longer and more safely. For instance, having someone stop in to ensure they are taking their medication properly, or have the help they need to bathe; adult day care programs; home care support; transportation services; falls prevention programs; meals on wheels; and more.

In 2012, the North East LHIN will focus on community-based investments knowing that “at home” and “in community” where people want to be cared for most.

Looking ahead

What does a patient-focused and integrated model of care look like in Northeastern Ontario? Northerners have helped to determine that an integrated care model is one that is:

- **Accessible** and provides culturally and linguistically sensitive services
- Has a high standard of **quality**
- Is **valuable** – using technology and other innovative means to ensure effectiveness and sustainability.

People want to stay at home as long as possible with proper care and support. As a result, the North East LHIN has invested significant time, energy and money into new programs to support this shift in care – meaning more assisted living services across the region, more aging at home programs, and four system navigators to help people find the care they need in community.

Based on the NE LHIN's engagements with thousands of Northerners, and the province's Action Plan of January 2012, more community-based care is needed to meet the needs of Northerners outside of institutions such as hospitals and long-term care homes. This is the North East LHIN's priority area of focus for 2012.

We will continue to engage with fellow Northerners to seek your thoughts on realigning local health care investments to ensure a more patient-focused, integrated and sustainable health care system for our parents, children and grandchildren.



For Robert and Hélène Labonte, residents of PHARA in North Bay, Northeastern Ontario is a healthy place to age with grace. NE LHIN funded programs and services focused on caring for our seniors and the frail elderly at home and in community are helping Northerners to live independently longer.

