Central **LHIN** | **RLISS** du Centre

Community Engagement

2018-2019

Ontario
Local Health Integration Network
Réseau local d'intégration des services de santé

Community Engagement

In accordance with the LHIN Community Engagement Guidelines (June 2016) all LHINs are required to develop and publish an annual Community Engagement Plan that aligns with our Annual Business Plan (ABP) priorities and the LHIN's Integrated Health Service Plan (IHSP). Community engagement helps us assess local need and plan for local health services to improve the health care system through the interaction, sharing and gathering of information with our stakeholder communities.

The Central LHIN's Community Engagement Plan provides an overview of the priority activities, targeted audiences, goals and methodologies associated with community engagement strategies aimed to support achievement of the projects and initiatives outlined within our Annual Business Plan for 2018-2019. We recognize that engagement is a dynamic process, and this plan will evolve as new opportunities and priorities emerge. As well, with community engagement as well as patient and stakeholder partnerships being a growing area, we will be respectful of changing practices and routinely evaluate our engagement strategies with a view to continuous improvement. For 2018-2019, we will continue to deliver on our commitment to community engagement through the following guiding principles and mechanisms:

Engagement Strategies and Leading Best Practices

Central LHIN uses various best practice strategies to identify the appropriate levels of engagement to be applied and achieve patient-centred outcomes. For priority initiatives and projects, the community engagement goals and objectives will be identified in advance and will range across the following continuum of engagement practices:

***Inform and Educate*:** To provide accurate, timely, relevant and easy to understand information to the community. This level of information provides information about the LHIN, while offering opportunities for community members to further understand the problems, alternatives, and/or solutions. There is no potential to influence the final outcome given this is one-way communication.

***Gather Input*:** To obtain feedback on analysis, and proposed changes. This level of engagement provides opportunities for community to voice their opinions, express their concerns, and identify potential areas for change and modifications. There may be potential opportunity to influence the final outcome.

Consult: To actively seek and receive the views of community stakeholders on policies, programs or services that affect them directly or in which they may have a significant interest. This level of engagement provides opportunities for dialogue between community and the LHIN. Consultation may result in changes to the final outcome.

Involve: To work directly with community stakeholders to ensure that their issues and concerns are continually understood and considered, enabling residents and communities to have their voices heard and to communicate their own issues. In this level, community stakeholders may provide direct advice as this is a two-way communications process. This level will influence the final outcome and encourage participants to actively take responsibility for solutions.

***Collaborate*:** To work with and enable community stakeholders to work through options analysis and potential solutions to find a common purpose or agreement.

Empower: Delegated stakeholder decision making whereby final decision making authority, leading to action is assigned to a committee or other organized body (project-related work group or task force).

Priority Planning Partners & Stakeholders

The Central LHIN is committed to leveraging the expertise, knowledge and system experience that currently exists within our communities and sub-regions to achieve Patients First goals and objectives. Key to the success of Central LHIN engagement strategies is the active involvement of our stakeholders. Our stakeholders are individuals and organizations with a strong interest in the outcomes and decisions made by the Central LHIN, including patients, family and caregivers and also Health Service Providers, contracted Service Provider Organizations, other partners, entities and communities. Our stakeholders are affected by the decisions that we make and are essential planning partners to enable us to make better decisions together.

The Central LHIN continues to learn what patients, families and caregivers value most in our health care system. We are committed to partnering and listening to patients and families to foster positive changes in the health care system to reflect the needs and opinions of those it serves.

Through the recently established Patient Family and Advisory Committee (PFAC), Central LHIN will build a stronger health care system and improve the patient experience for residents in our region. Through the Committee's work, community members will apply their collective experience and insights to support effective patient engagement within the LHIN.

Our stakeholders include:

- **Residents of Central LHIN** as patients and caregivers
- **People with lived experience** including mental health and addictions, palliative care, and seniors care
- **Francophone communities** through our partnership with Entité 4
- **Indigenous communities** living on-reserve and off-reserve in urban and rural communities
- **LHIN-funded Health Service Providers**: Hospitals, Long-Term Care Homes, Community Support Services, Mental Health and Addictions Service Providers
- **LHIN-contracted Service Provider Organizations** for home and community care services delivery
- **Other health care and community service agencies**
- **Primary Care Providers** : Physicians (all practice types), Nurse Practitioners, Community Health Centres
- **Public Health Units**: York Region Public Health Services, Toronto Public Health, Simcoe Muskoka District Health Unit
- **Inter-ministerial coordination and collaboration**: Ministry of Child and Youth Services, and Ministry of Community and Social Services
- **Community Leaders and Influencers**: Pending geography and issue, representatives from municipal, regional, provincial and federal governments and services active in the City of Toronto, County of Simcoe and Region of York (for example, participation through the Community Partnership Council Meeting in the Region of York in the Newcomers initiative)

- **Health Quality Ontario**
- **Other Local Health Integration Networks** across Ontario
- **Academic and Research Institutions**

Working Groups/Committees/Councils

Many of our stakeholders are invited to participate in Central LHIN committees with the goal to gather input, consult and collaborate in planning activities and decisions. Central LHIN committees in operation for 2018-2019 are as follows:

- **Alternate Level of Care (ALC) Collaborative –** The ALC Collaborative is a dedicated team comprised of Central LHIN hospitals and Central LHIN staff intended to provide focused and collective resources to enhance the flow, efficiency, effectiveness and system capacity across the continuum for the benefit of Central LHIN patients. The ALC Collaborative will continue to actively engage with hospitals, community and other system partners as appropriate throughout its mandate (December 2015 to March 2018), and leverage task groups, including the ALC Working Group and ALC for Rehab Working Group.

- **Central LHIN Eye Care Committee (ECC) –** The Central LHIN ECC is an advisory body comprised of Central LHIN staff and administrative/medical leads from each Central LHIN hospital. The committee meets quarterly to provide advice on best practices for the overall service provision, coordination, delivery, evaluation and evolution of the eye care service models in Central LHIN hospitals. The committee also provides advice on the implementation of the Central LHIN vision care strategy, human resource planning, clinical utilization, and management of quality of care pertaining to eye care services across the Central LHIN.

- **Central LHIN Patient and Family Advisory Committee (PFAC) –** The Central LHIN PFAC is composed of 16 members that represent each of the LHIN's six sub-regions They provide advice on local health issues and programs from the patient, family and caregiver's perspectives and advise on strategies to engage and communicate with patients, their families and friends, to support improved patient and health system outcomes.

- **Community Paramedicine Working Group –** This working group led the development and implementation of the Central LHIN Community Paramedicine Strategy. Membership is composed of staff from the Central LHIN, York Region Paramedic and Seniors Services, City of Toronto Paramedic Services and Simcoe County Paramedic Services.

- **Clinical Services Vice President (VP) Planning Group** – The Clinical Services VP Planning Group consists of clinically-focused senior leaders from Central LHIN hospitals to provide specific support to maintain major clinical program/service plans and to ensure patient access to new innovations and expertise. This group makes recommendations using a system-wide planning approach and explores opportunities to scale and spread better practices that can be supported through evidence and data.

- **Community Sector Working Group (CSWG) –** The mandate of the CSWG includes supporting the Central LHIN IHSP priorities as well as improving Central LHIN's M-LAA performance. It also

advises on ways to advance the local health system to achieve desired outcomes and provides an enhanced understanding and insights into sector specific issues within Central LHIN. Meeting minutes and a communique are published to the entire community sector so that all community HSPs are apprised of the meeting discussions.

- **Critical Care Network** – This working group is co-chaired by the Central LHIN Critical Care Physician Lead and the Central LHIN Director of Health System Planning & Design and includes administrative and clinical leads from each Central LHIN hospital, CritiCall Ontario and other Central LHIN staff. The group meets bi-monthly and holds additional meetings as required for the purpose of planning, implementing, and evaluating performance measures to improve the delivery of Critical Care Services in Central LHIN hospitals.

- **Dementia Strategy Advisory Committee –** This Advisory Committee oversees the implementation of the Central LHIN Dementia Strategy including recommendations and advice on services, programs and allocation of resources to meet priorities over the next three years.

- **Digital Health Advisory Council –** Central LHIN's Integrated Health Service Plan 2016-2019 identifies digital health as a key enabler for achieving priorities of the Ministry, the LHIN and its partners. The Council is composed of Information Technology leadership from various sectors in the continuum of care. Its main objectives are to support the development and implementation of the Central LHIN Digital Health Strategic Plan for each year as indicated in the Ministry-LHIN Accountability Agreement and provide guidance and advice on digital health implementations.

- **Emergency Department Working Group** – This working group is mandated by the Ministry of Health and Long-Term Care Emergency Department Network. Membership includes Emergency Department Directors and Physician Chiefs at all Central LHIN hospitals and Emergency Services. This group meets bi-monthly with a mandate of planning, implementing, and evaluating performance measures to improve the delivery of emergency services in the Central LHIN hospitals, and to collaborate and exchange best practices.

- **Health Links System Planning Committee** – Health Links is a model to provide care coordination for patients with complex health and social needs. This operational working group collaborates to standardize tools, resources, processes to increase adoption of the Health Links approach to care across the Central LHIN.

- **Long-Term Care Homes Palliative Care Work Group** – This work group develops and implements the Central LHIN Palliative Care Long-Term Care Home Strategy, in alignment with the Central LHIN Board Approved Palliative Care Action Plan.

- **Long-Term Care Sector Working Group (LTCWG) –** The mandate of the LTCWG includes supporting the Central LHIN IHSP priorities and improving Central LHIN's M-LAA performance. It also advises on ways to advance the local health system to achieve desired outcomes and provides an enhanced understanding and insights into the long-term care sector specific issues and support knowledge building and exchange.

- **The Mental Health and Addictions Service Coordination Council –** The Canadian Mental Health Association-York Region is responsible for the implementation of the Central LHIN Mental Health and Addictions Supports within Housing Action Plan for York Region, working closely with the Central LHIN. To guide the implementation, the Canadian Mental Health Association-York Region is required to establish and support the Mental Health and Addictions Service Coordination Council (SCC). The mandate of the SCC is to collaborate and provide guidance on how to continue moving forward with coordinated mental health and addiction services in the Central LHIN.

- **Mental Health Hub Committee** – This committee focuses on improving timely access to high quality crisis services in York Region to provide better client care and alleviate pressures faced by hospital Emergency Departments and first responders. The committee is represented by federal and provincial parliamentarians, regional police and emergency medical services, as well as service providers across the health sector.

- **Musculoskeletal (MSK) Intake & Assessment Steering Committee –** This committee brings together Central LHIN stakeholders to guide implementation of a centralized intake and assessment model, and referral process for total joint replacement, spinal procedures and other MSK conditions. Current membership of this committee includes a patient advisor as well as clinical and administrative representatives from Central LHIN hospitals that are currently performing hip and knee replacements.

- **Regional Palliative Care Network –** The Central LHIN has established a Regional Palliative Care Network to provide leadership and structure in the development of a comprehensive, integrated and coordinated system of palliative and end of life care.

- **Regional Palliative Care Teams Implementation Working Group** – This working group oversees implementation of the sub-region based Palliative Care Community Team model.

- **Stroke Planning and Care Council (SPCC)** – This council supports the work of the Ontario Stroke Network by bringing stakeholders together to advise, collaborate and plan integrated stroke services in Central LHIN.

- **Sub-region Collaborative Tables:** These six sub-region collaborative tables work collectively to identify, plan, implement and evaluate change opportunities that address unique sub-region challenges as identified through data system analysis and engagement.

- **York Region Planning Collaborative for Children, Youth and Families** – This collaborative working group is co-chaired by Central LHIN and Kinark Child and Family Services to plan, deliver, and improve an accessible, responsive and integrated service system for children and youth with complex need, inclusive of mental health conditions.

2018-2019 Engagement Activities

Stakeholder Group	Purpose	Engagement Goals	Format	Frequency
Patient and Family Advisory Committee (PFAC) *(former Citizen's Health Advisory Panel)*	To provide advice on local health issues and programs from the patient, family and caregiver's perspectives	Embed the voice of the patient into all levels of designing and planning the health care system to support improved patient and system outcomes	In person meetings, work groups, surveys	Throughout the year (4-6 formal meetings)
Sub-region Collaborative Tables	To engage and co-create sustainable solutions for gaps in continuity of care at the sub-region and neighbourhood level	Identify two or three LHIN-wide solutions to improve care transitions for patients, families and caregivers	Multiple. May include in-person meetings; interactive webinars; OTN; surveys	Throughout the year
Sub-region Learning Forum	To bring all six sub-region planning tables together to share a Learning Forum in preparation for implementation	Provide opportunity for sub-regions leaders to share what is and is not working	Large facilitated event	2018
Primary Care – Family Physicians	To obtain meaningful physician input into relevant system decisions, and to work towards locally sustainable solutions to provide high quality primary care services	Help align both primary care physician activities and objectives with LHIN priorities	In-person; work groups; interactive forums	Throughout the year
Primary Care – Specialists	To engage specialists in dialogue to further support and implement referral initiatives including eConsult	Improve timely access to specialist care and support patient transitions across the care continuum	In-person; work groups; interactive forums	Throughout the year
Primary Care – Nurse Practitioners	To engage primary care nurse practitioners in relevant system design and subsequent integration to provide high quality primary care services	Further align and strengthen primary care at the sub-region level	In-person; interactive forums	Throughout the year

Chippewas of Georgina Island	To co-design services and supports required for Indigenous communities	Co-create a plan that is aligned with the needs of the community and improves access to culturally appropriate services	In-person meetings involving the Health Services Office of Georgina Island	Throughout the year
Urban Indigenous Community: NinOskKomTin	To co-design services and supports required for Indigenous communities	Co-create a plan that is aligned with the needs of the community and improves access to culturally appropriate services	In-person meetings involving Elders and community members	Throughout the year
French Language Services Advisory Committee	To bring together health care providers and community stakeholders to discuss the needs of the Francophone community in the North York	Promote health services in French (i.e. primary care, seniors care, chronic illness, mental health) to improve service delivery and health outcomes	In person meetings; teleconferences	Quarterly
French Language Health Planning – Entité 4	To plan, coordinate and integrate high quality health care services for Francophones in Central LHIN	Improve equitable access to health services for the local Francophone population	In-person meetings with teleconference access	Throughout the year
ALC Collaborative	To support the development and implementation of LHIN-wide strategies to enhance patient flow from acute to community settings	Implement and evaluate sustainable strategies that enhance system capacity and patient flow across the care continuum	Regular in-person meetings that may include other hospital and community stakeholders	Ongoing
Community Paramedicine Working Group	To develop a community paramedicine strategy and determine how best to allocate the community paramedicine funding envelope	Review EPIC (Expanding Paramedicine in the Community) evaluations along with other community paramedicine initiatives	In person; work groups; interactive forums	Throughout the year

Community Support Services – Programs/ Services for Seniors	Based on the LTC Capacity Plan, develop and implement community-based alternatives to traditional institutional LTC for Seniors	Recommendations for the expansion and enhancement of Adult Day Programs for Seniors	In-person meetings with webinar and teleconference access	Monthly
Community Support Services – ABI and Attendant Outreach Services	To review strategy to reduce wait lists and service pressures for Acquired Brain Injury (ABI) and Attendant Outreach services	Recommendations for the implementation of the three-year strategy	In-person meetings with webinar and teleconference access	Monthly
Community Support Services – ErinoakKids	To explore respite options for families with medically/ developmentally complex young adults	Recommendations for future respite investments	In-person meetings with webinar and teleconference access	Bimonthly
Clinical Services VP Planning Group	To engage Central LHIN hospitals to guide the development of clinical strategies to advance care	Consult and provide guidance in advancing the ALC strategy, sub-regional planning to improve care transitions for patients, families and caregivers	In-person meetings with webinar and teleconference access	Bimonthly
Dementia Strategy Advisory Committee	To bring together people with dementia, family caregivers, health clinicians and community care providers to co-design a formalized dementia strategy tailored to support the needs of people living with dementia in Central LHIN	Develop a local three-year Central LHIN strategy that aligns with the Provincial Dementia Strategy	In person; work groups; interactive forums	Throughout the year
Emergency Department (ED) Working Group	To bring Central LHIN EDs together for planning, implementing, and exchanging best practices	Advance the ED/ALC strategy and consult on sub-region transition planning	In-person meetings with webinar and teleconference access	Bi-monthly

Health Links Partnership Table	To bring together Health Links leads, home and community care, digital health, hosting organizations and other stakeholders to standardize resources, tools, and processes and align approaches across Central LHIN	Spread and scale the Health Links approach and integration of Health Links into sub-region planning	In-person meetings; webinars; teleconference	Monthly Operational Monthly Meetings. Partner engagements as needed throughout year.
Long Term Care Homes (LTCH) Palliative Care Work Group	To bring providers together to develop and implement a Central LHIN Palliative Care LTCH Strategy, in alignment with the Central LHIN Board Approved Palliative Care Action Plan	Increase palliative care capacity in LTCHs through education and supports	In-person meetings; webinars; teleconference; learning forums	Monthly
Mental Health and Addictions Service Coordination Council	To improve the integration, coordination and distribution of mental health and addictions services for transitional aged youth and adults in York Region	Facilitate and support the implementation of the Mental Health and Addictions Supports within Housing Action Plan for York Region	In-person meetings	Bimonthly (6 times per year)
Mental Health and Addictions Providers & People with Lived Experience	To bring providers and people with lived experience together to develop a Central LHIN Addictions Strategy	Develop a three-year Central LHIN Addictions Strategy that aligns with the provincial Opioid Strategy to enhance addictions supports and harm reduction	Group workshop; key informant interviews	Bimonthly, Spring/Summer 2017

Musculoskeletal (MSK) Intake and Assessment Steering Committee	To bring together stakeholders from Central LHIN hospitals to guide development and implementation of a centralized intake and assessment model for hip, knee and other MSK procedures	Provide timely, appropriate and transparent access to high quality, integrated continuum of MSK care	In person meetings and teleconference access	Quarterly
QBP Steering Committee (Quality Based Procedures)	To bring together Central LHIN hospitals to support and provide guidance on the implementation of QBPs	Consult and provide guidance on transition plans at the sub-region level, particularly those related to pertinent QBPs	In-person meetings with webinar and teleconference access	Quarterly
Reactivation Care Centre (RCC): Transition Leadership Forum	To provide corporate leadership, communication and direction to partner hospitals, planning teams and participants	Provide a collaborative environment to support timely direction-setting, change management, communication and oversight of components of the RCC project	In-person meetings	Bi-weekly throughout project implementation
Reactivation Care Centre (RCC): Clinical Integration, Standardization, Orientation and Training Teams	To provide support planning for operational interdependencies among partner hospitals and other participants of the RCC project	Provide the opportunity for input into standardization of processes and procedures, and establish training and orientation plans	In-person meetings	Weekly throughout project implementation
Regional Palliative Care Network	To provide leadership and structure to facilitate the development of a comprehensive, integrated and coordinated system of hospice palliative care	Provide collaborative leadership to advance standardization, education, coordination and continuous quality improvement across all sectors in the region	In-person meetings; webinars; teleconference; learning forums	Quarterly

Regional Palliative Care Teams Implementation Working Group	To bring providers together to provide strategic advice and recommendations on the implementation of the Palliative Hubs model, aligned with Central LHIN sub-regions	Drive the implementation of the Palliative Hub model	In-person meetings; webinars; teleconference; learning forums	Every six weeks
Seniors Care Network Steering Committee	To provide leadership and structure toward implementation of a regional Seniors Care Network in Central LHIN	Provide the opportunity for input, advice, and recommendations of an integrated, coordinated network of seniors care services	In-person meetings with teleconference access	Quarterly
Stroke Planning and Care Council	To bring together stakeholders in stroke care to collaboratively plan and support the spread of best practices for stroke care	Provide opportunity for stroke care stakeholders to input on transition plans at sub-region level	In-person meetings with teleconference access	Quarterly

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