Central **LHIN**

Central LHIN

2012 - 2013

Community Engagement Plan

March 2012



About Central LHIN

Central LHIN is one of 14 Local Health Integration Networks (LHINs) established through the *Local Health System Integration Act*, 2006 (LHSIA), by the Ontario government to plan, coordinate, integrate and fund health services at the local level. For 2012/13, Central LHIN's budget is approximately \$1.8 billion, to be allocated across a range of health programs, delivered by a range of health service providers, including:

- Seven public and three private hospitals
- 46 long-term care homes
- 33 community support service agencies
- 20 mental health and addictions service providers
- Two community health centres
- One Community Care Access Centre

Of the LHINs, Central LHIN has the most people with more than 1.7 million residents (which is 13% of Ontario's total population) and is one of the fastest growing LHINs in Ontario. Central LHIN will experience greater-than-average population growth over the next 10 years, with the 65+ age category projected to increase by 52% by 2020.

Central LHIN is geographically varied. Although the LHIN's population is primarily urban – about 70% reside in North Toronto, Vaughan, Richmond Hill and Markham – there is a significant rural region to the north. The residents of Central LHIN are also diverse, with the highest proportion of immigrants in the province and twice the provincial average of visible minorities. Central LHIN is home to a small population of Aboriginal/First Nations people and approximately 3.2% of the population identifies themselves as Francophone².

The Central LHIN Integrated Health Service Plan (IHSP) 2010-2013 outlines four planning priorities that are aligned with provincial directions and which were determined through extensive engagement with stakeholders. The four planning priorities represent the focus of activities and local investments over a three-year period. The priorities are:

- Emergency Department and Alternate Level of Care
- Chronic Disease Management and Prevention
- Mental Health and Addictions
- Health Equity

In mid-2012, Central LHIN will initiate the planning and development process for IHSP 2013-2016.

Throughout these processes, Central LHIN remains committed to achieving our vision of caring communities and healthier people. Each of us – from our staff and Board of Directors to our health service providers and our residents view ourselves as important contributors in working together to develop and implement a common vision for a high quality health care system.

¹ Central LHIN 2010-2011 Annual Report

² In the summer of 2009, a new, more inclusive definition of Francophone was adopted by the Government of Ontario. Francophones are now defined as including those who speak French at home or who come from a place where French is an official language (Central LHIN Integrated Health Service Plan 2010 - 2013).

Introduction

The purpose of this document is to outline the key areas of focus for Central LHIN's Community Engagement Plan for 2012/13.

This annual plan has been developed in alignment with provincial community engagement guidelines. The plan sets out how Central LHIN will engage its stakeholders in key areas to support Central LHIN values and enhance the LHIN's capacity to make progress against IHSP and other local health system priorities.

Community engagement is fundamental to enabling collaboration with partners across the system to improve access and services for residents in our communities.

This document is not intended to identify all community engagement activities that will be carried out during this time period. In addition, sub-engagement plans may be developed in-year to assist with meeting the engagement plan objectives.

2011/12 Community Engagement Accomplishments

Central LHIN is committed to engaging a wide range of stakeholders. Our stakeholder relationships are important to garner the support required to reduce inequities and make health system improvements.

Since March 2011, Central LHIN hosted seven major external community engagement sessions with a combined total participation of over 800 health service providers and stakeholders from across Ontario. The engagements included:

- Building Capacity for Diabetes Management in Primary Care (in collaboration with the Ontario Medical Association)
- Collaboration in Primary Care for Georgina Island (in collaboration with the Chippewas of Georgina Island First Nation)
- Working Together to Improve Community Based Complex Care Services (in collaboration with the Ministries of Community and Social Services and Children and Youth Services)
- Working Together to Improve Health Equity in Central LHIN (in collaboration with York University)
- Patients First: Creating Quality in the Transitions of Care (1st Annual Quality Symposium)
- Emergency Department Quality Collaborative: Improving Quality in Emergency Departments by Enhancing Flow
- Quality Collaborative: Advancing Infection Control Best Practices in the Emergency Department

Central LHIN also convened a health service provider Community Engagement Task Group to develop the *Health Service Provider Community Engagement Guiding Principles & Checklist*, which outlines key principles to assist health service providers in their community engagement activities. The Guiding Principles and Checklist is essential to supporting effective, high-quality community engagement across Central LHIN.

2012/13 Community Engagement Areas of Focus

To continue to advance IHSP 2010-2013 goals and other local health system priorities, Central LHIN has identified six key areas of focus for community engagement in 2012/13. The six community engagement areas of focus are:

- o Advancing Health System Quality
- o Strengthening Integrated Health Care to Improve Transitions
- o Advancing Physician and Primary Care Provider Engagement
- o Collaborating with Aboriginal and Francophone Populations
- o Enhancing Cross Ministry/LHIN Engagement
- o Supporting Development of the Integrated Health Service Plan 2013-2016

Central LHIN will report back on key findings from undertaking the range of engagement activities outlined in this plan and will identify opportunities to engage with health service providers and community members, including through external planning and task groups.

Focus 1: Advancing Health System Quality

- Since the introduction of the *Excellent Care for All Act*, 2010 (ECFAA) Central LHIN has taken a leadership role in supporting provincial quality directions, with a specific focus on advancing system level improvement through building local health service provider capacity and facilitating knowledge transfer and exchange.
- In August 2011, in response to recommendations from the LHIN's 1st Annual Quality Symposium, Central LHIN released *Patients First: An Action Plan to Improve Quality in the Transitions of Care*. The implementation strategies outlined in the Quality Action Plan include substantial further community engagement activities.
- In 2012/13, Central LHIN will continue to advance the implementation of the Quality Action Plan through a range of sub-engagement initiatives. We will host our 2nd Annual Quality Symposium, which is expected to include a focus on primary care "transitions", in alignment with the Province's strategic approach to ECFAA expansion and ongoing LHIN-primary care collaboration in support of a more integrated health system.
- Our experience has demonstrated that health service provider Quality Collaboratives offer a
 useful venue for multiple sectors to work together, exchange knowledge and collaborate in
 support of quality improvement. In 2012/13, Central LHIN expects to host additional Quality
 Collaboratives to identify both local system and inter-organizational solutions to care and service
 delivery challenges at the provider and governance levels.
- Additionally, Central LHIN will continue to engage health service providers and other partners to
 advance local health system quality improvement and alignment in support of Health Quality
 Ontario initiatives such as Quality Improvement Plans, avoidable hospitalizations and advanced
 access to primary care, among others.

Focus 2: Strengthening Integrated Health Care to Improve Transitions

- Improving the delivery of more integrated care that is patient, client and resident focused is both a Central LHIN and provincial priority. A more integrated local health system can help to improve access, coordination of services, quality and ultimately system performance.
- In 2012/13, Central LHIN will identify a range of engagement activities in support of improving the integration and coordination of health care services across the LHIN.
- The Behavioural Support Ontario (BSO) project will be an initial focus of our efforts in this regard. The BSO project was created to enhance services for people with behaviours associated with complex and challenging mental health, dementia or other neurological conditions wherever they live at home, in long-term care homes or elsewhere. There are approximately 25 health service providers in Central LHIN that deliver over 30 programs that support people with specialized behavioural needs and their families.
- Additional projects where sub-engagement activities may be developed to support this system
 coordination and integration objective include: Regional Palliative Care Planning, Clinical
 Services Capacity Planning (with a focus on episodic acute care services), Alternate Level of
 Care/Rehabilitation project, etc.
- Central LHIN will support the development of a community engagement plan, which will be
 developed to outline how to effectively engage stakeholders in the planning and implementation
 of coordinated care pathways across the continuum.
- Concurrently, Central LHIN will also develop a specific engagement strategy to further strengthen collaboration with the community support services sector. The goal of this strategy will be to identify and leverage capacity in the community sector to support Central LHIN strategies to improve care transitions and reduce unplanned hospitalizations and ALC.

Focus 3: Advancing Physician and Primary Care Provider Engagement

- Central LHIN priorities are supported and enabled by focused strategic engagement which
 includes leveraging opportunities to collaborate with a range of stakeholders, including those that
 may not be currently funded directly by LHINs.
- Central LHIN is home to two Nurse Practitioner Led Clinics, 11 Family Health Teams, two
 Community Health Centres, 1,380 family physicians and over 1,200 specialist physicians. Several
 additional Family Health Teams and Community Health Centres also have service locations in
 Central LHIN.
- In 2012/13, Central LHIN will develop a physician engagement strategy, which is expected to include, among other things, establishing regular engagement sessions that focus on relevant local

- system issues for physicians and the LHIN. This strategy will be developed in collaboration with the Ontario Medical Association (OMA).
- Recognizing that primary care is an essential component of health care delivery and key to
 advancing strategic directions at both the provincial and local level, Central LHIN will continue to
 work closely with the Ministry of Health and Long-Term Care, the OMA and other LHINs to
 implement the Primary Care LHIN Lead Pilot Program.
- Specifically, Central LHIN will work with the new Central LHIN Primary Care Lead to identify engagement opportunities that support:
 - Implementing advanced access and avoidable hospitalizations quality initiatives, including through the establishment of local Primary Care Physician Networks in specific planning areas.
 - o Improving access to primary care services for unattached patients (through Health Care Connect as well as other mechanisms).
 - o Identifying opportunities to foster collaboration between primary care and other sectors, including through leveraging the Primary Care Action Group.
- Central LHIN will also ensure that any provincial directions related to the integration of primary
 care planning within the LHIN mandate are implemented through collaboration and partnership
 with all relevant stakeholders.

Focus 4: Collaborating with Aboriginal and Francophone Populations

- Central LHIN is specifically guided by LHSIA to address the health care needs of local
 Aboriginal peoples and Francophone communities. In 2012/13 Central LHIN will continue to
 implement community engagement strategies across the LHIN aimed at improving collaboration
 with the Francophone and Aboriginal populations.
- The LHIN will continue to collaborate with the French Language Services Entity (Entité de planification pour les services de santé en français #4 Centre Sud-Ouest) to support the implementation of LHIN-Entity Joint Action Plan initiatives.
- Central LHIN will also continue exploring joint planning initiatives with Greater Toronto Area LHINs, service providers and other partners to increase access to, and capacity of, French language services in Central LHIN.
- The Chippewas of Georgina Island, Central LHIN's only First Nations community, is home to over 175 Aboriginal people. Central LHIN will build on the successful March 2011 *Collaborations in Primary Care on Georgina Island* engagement session and will work to further strengthen partnerships within this community.
- Central LHIN will continue to facilitate dialogue and networking opportunities between health service providers and the Aboriginal community, both on and off reserve, urban and rural,

including by sponsoring one event.

• Continued support will also be provided to the pan-LHIN Provincial Aboriginal Network and Central LHIN will participate in the development of a provincial aboriginal engagement strategy.

Focus 5: Enhancing Cross Ministry/LHIN Engagement

- Working across LHINs, local governments and with other ministries is an important part of the LHIN mandate to plan for a more integrated and high-quality health care system that focuses on the needs of the client, regardless of where they live or where their care needs are addressed in the continuum.
- Central LHIN is the fastest growing and most diverse LHIN in Ontario, with a population growth of 19.2% over the next 10 years, the highest proportion of immigrants in the province and twice the provincial average of visible minorities³. These demographic changes, coupled with existing system capacity pressures, are expected to impact overall access to programs and services.
- Additional challenges have also been identified over the past year related to the need for a better
 system to support individuals who have complex medical and social support requirements living
 in the community. These individuals are often served by programs funded and delivered by
 different ministries. Gaps in care transitions (both between systems and between multiple
 providers) are a known problem.
- In 2012/13, Central LHIN will continue to implement engagement strategies to strengthen
 relationships and collaboration across LHINs and other ministries to address these service gaps,
 improve transitions between providers and enhance access to care. Two key LHIN planning
 tables will support these unique strategic partnerships:
 - Oreated in collaboration with the Ministries of Community and Social Services and Children and Youth Services, the Central LHIN Complex Care Planning Group will develop a strategy to address local system gaps and will support identified engagement opportunities to improve the delivery of community based services for people with both complex medical and social support requirements.
 - The newly established Central LHIN Newcomer Settlement Planning Group will work to identify and address current challenges faced by newcomers in accessing and navigating the health system. The Planning Group will develop planning principles to help identify opportunities to align health system planning activities with settlement strategy development.
- Central LHIN will also develop and implement a focused engagement strategy with Public Health in the LHIN and with other chronic disease management and prevention leaders.

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³ Central LHIN 2011-2012 Annual Business Plan

Focus 6: Supporting Development of the Integrated Health Service Plan 2013-2016

- The Local Health System Integration Act, 2006 requires all LHINs to prepare an Integrated Health Service Plan (IHSP) that sets out the LHIN's three-year plan, including vision, priorities, strategic directions and local strategies.
- Aligned with parameters to be established by the Ministry of Health and Long-Term Care, and communicated to LHINs, Central LHIN will develop a detailed engagement strategy to support the development of IHSP 2013-2016.
- The IHSP 2013-2016 engagement strategy will include strategies and tactics for direct consumer engagement, including, for example, a community health care citizen's panel, to provide residents with the opportunity to offer input and feedback on the development of the plan.
- Central LHIN will also continue to issue annual Reports to the Community to update the progress we are making in strengthening the local health system.

Opportunities to Participate

In an ongoing effort to keep our communities informed, Central LHIN will continue to use its website (www.centrallhin.on.ca) for regular posting of news and information of interest to our communities.

Central LHIN continues to improve tools for stakeholders to enhance public education, awareness and promotion of Central LHIN activities as well as to provide feedback methods.

For example, the Quick Poll function now appears on the Central LHIN homepage and provides visitors with an easy and interactive way of sharing feedback on programs, events, engagements and other important Central LHIN information.

Notice of planned consultations and consultation-related reading materials will be posted on the Central LHIN website. The engagement process may vary depending on the project as the form of consultation is designed to accommodate the informational needs of the initiative and the community to be consulted as well as the time and available project resources.

A health service provider events calendar hosted on the Central LHIN website highlights upcoming events being hosted within Central LHIN.

Central LHIN also holds monthly board meetings that are open to members of the public. Following the adjournment of each regular meeting, time is provided for the public to meet and talk directly with Board members.

Any member of the public can provide input and feedback to Central LHIN at any time. Initiative specific feedback should follow the process outlined on the project page of the website. General feedback can be forwarded by email to Central@lhins.on.ca or by mail to:

60 Renfrew Drive, Suite 300 Markham, ON L3R 0E1

Evaluation of the Annual Engagement Plan 2012/13

Central LHIN will report regularly to our stakeholders on key findings generated from all community engagement activities over the course of the year. This information may also be used to inform items brought forward to the Central LHIN Board of Directors.

Participants in all community engagement events will be provided an opportunity to evaluate their participation as well as to offer suggestions for overall improvement of the Central LHIN approach to community engagement.