NIAGARA Sub-Region Engagement Session (Nov. 21, 2016)
Summary of Main Themes

Background:
During November and December 2016, the Hamilton Niagara Haldimand Brant (HNHB) LHIN facilitated engagement sessions for health system partners in each of its six sub-regions: Brant, Burlington, Haldimand Norfolk, Hamilton, Niagara and Niagara North West. The purpose of these sessions was to provide a brief update on the status of provincial and local work in anticipation of the Patients First Act (prior to its passage December 7), provide initial data describing population health and health system utilization on a sub-region basis, and engage health system partners in early dialogue about expectations and opportunities at the sub-region level.

The **Niagara Sub-Region** session was hosted November 21, 2016, and 52 health service partners, representing 31 organizations, participated in the engagement session.

Invited participants included: Hospitals; Community Care Access Centre (CCAC) and Contracted Service Providers; Community Health Centres (CHC); Physicians; Family Health Teams (FHT); Mental Health and Addiction agencies; Health Links leads; Community Support Services; Municipalities; Public Health; French Language Service Providers; Indigenous Health Care Representatives (engagement sessions are ongoing); the Ministry of Children and Youth Services; and the Ministry of Community and Social Services.

Areas of Strength to build upon in Sub-Region Planning:

- Well-functioning programs/models:
  - E.g. Health Links, Integrated Community Lead, Smithville Primary Care, Palliative Care Team, Community Health Centre hub and spoke model
- Partnerships (e.g. Niagara Children's Centre partnering with Hamilton Health Sciences; primary care providers and refugee capacity; Community Support Services (CSS) poverty planning between join ministries)
- Community agencies have come together
- Technology - telemedicine and OTN; webinars and teleconferences
- Focus on outcomes and evidence based approaches.

Opportunities (what needs to change) for Sub-Region TRANSFORMATION

- Shared vision, goals, and structure
    - LHIN leadership to coordinate sub-region accountability
    - Aligned priorities across organizations
    - Centralized tables
    - Proactive approach (not reactive)
- Local needs vs provincial priorities
- Integrate primary care and mental health and addictions
- System navigation/care coordination - attach to community groups
- Improve transitions across agencies and sectors
- Improve access to: primary care in Welland, specialist care, mental health and addiction services in South of Niagara, Long Term Care (LTC) homes (and alternatives to LTC)
- Increase interdisciplinary teams and primary are
- Ability to share information across providers/agencies/patients
    - Shared EMR
    - Clinical Connect
    - Agreements to share information
- Reduction in emergency department use
- Clarity of roles, providers, criteria, prioritization, and single access point
- Partnerships (e.g. universities can help with data, volunteers)
- Partners need to include: public health, social determinants of health, non-health, transportation
- Build strength in caregiver support and relieve caregiver burden
- Patient focus
- Capacity to use a population health approach (people and services)
- Meeting patient expectations.

Advice to ensure the system is welcoming to all we serve (e.g. people who speak French, Indigenous peoples, newcomers):

- Increase cultural competency
- Utilize areas of strength:
    - E.g. CHC and meeting LGBTQ (lesbian, gay, bi-sexual, transgender, queer) population needs
    - Regional Municipality of Niagara point-of-offer customer service strategy (i.e. methods of access that rely less on service in a particular language)
    - Local Immigration Partnerships; settlement and immigration services
    - Refugees' "model" of care is a good example of services integration
- Medical translation and interpretation services
- Talk to groups (Aboriginal, Francophone, Homeless) to get their feedback and learn about the barriers that they face
- Increase number of LTC beds for Francophone population
- Involve/create room for ceremonial activities
- Accountability (e.g. French Language Services).

- **<u>Recommendations for Sub-Region Early Wins:</u>**
- Develop a comprehensive list of all providers/services:
    - Include who they service and what they do
    - Communication plan between providers
    - Identify resources, gaps and community needs
- Confirm definition of equity
- Meet with populations (Aboriginal, Francophone, homeless) and ask about their experiences with the health care system; consumer involvement and feedback
- Financial incentives to bring about change
- Adoption of Integrated Care Lead model
- Continue to focus on Health Links model
    - Integrate with primary care
    - Link Behavioural Supports Ontario and Health Links
- Identify language capacity
- Decentralize care coordination into the community
- Use hub models to tackle social determinants of health
- Share data with communities and patients

Appendix A. Organizations represented at the NIAGARA Sub-Region Engagement Session

1. Bayshore Healthcare
2. Region of Niagara
3. Brain Injury Community Re-Entry (Niagara) Inc.
4. Bridges Community Health Centre
5. CBI Home Health, Niagara
6. Centre de Santé Communautaire
7. CMHA Niagara
8. Community Addiction Services of Niagara (CASON)
9. Consumer/Survivor Initiative of Niagara
10. French Language Health Planning Entity
11. Garden City Family Health Team
12. Gateway of Niagara
13. HNHB & Mississauga Halton (MH) ParaMed
14. HNHB CCAC
15. Hospice Niagara
16. Hotel Dieu Shaver Health and Rehabilitation Centre
17. March of Dimes
18. Meals on Wheels
19. Michael G. DeGroote School of Medicine -Niagara Regional Campus
20. Niagara Children's Centre
21. Niagara Falls Community Health Centre
22. Niagara Health
23. Niagara Region

24. Niagara-on-the-Lake Community Palliative Care Service
25. Oak Centre
26. Ontario Brain Injury Association
27. Public Health, Region of Niagara
28. Quest Community Health Centre
29. Saint Elizabeth
30. Six Nations
31. Tremont Medical Clinic