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For Immediate Release

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***Quality Care in Community Hands:* The Hamilton Niagara Haldimand Brant Local Health Integration Network releases its first Integrated Health Service Plan**

GRIMSBY, ON – With the release of the first Integrated Health Service Plan (IHSP) today, the Hamilton Niagara Haldimand Brant (HNHB) Local Health Integration Network (LHIN) has set a course for health system improvements in this region.

“The Board of Directors for the HNHB LHIN is excited to release this milestone document which lays the foundation for health system planning and coordination for the next three years,” said Juanita Gledhill, Chair, HNHB LHIN.

This first IHSP describes initial priorities and activities for the three-year period beginning Fall 2006.

“We set out to do four things: better understand our communities and build strong relationships; identify strategies to address early integration and improvement opportunities identified by people living and working in our LHIN; understand local progress on ministry priorities including access to primary care and reduced wait times; and identify next steps,” said Gledhill.

The plan summarizes strategies that address local integration priorities described in February 2005. Community members were identified as “champions” for each of the health priority areas and worked with their communities to identify opportunities for positive change across the LHIN. Through this process, the communities identified ways to:

- Respond more effectively to persons who experience illness and injury as a result of work place conditions;
- Bring mental health and rehabilitation services closer to home for children and youth;
- Improve access to care and support for persons with mental health and addiction issues;
- Ensure the right elder care and support at the right time in the right place; and
- Provide best care and support to people who are dying.

“The IHSP defines these service integration priorities and outlines solutions and expected outcomes for each priority,” said Gledhill.

These include:

- Improved training and development;
- Access to best practice information;
- Cooperation and collaboration among services and program areas, and;
- e-Health - real information and communication connections among health service providers and consumers.

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"As the LHIN Board and staff talked with communities and their providers, we also learned that there are issues we should be turning our attention to quickly, and we are," she said.

These include:

- Working with communities to understand what is important about the organization of services for moms and newborns;
- Working with family health teams, community health centres, public health and others to see how we can ensure all citizens have access to chronic disease prevention and improvement;
- Continuing to work with hospitals, CCACs and community agencies to look at how people can get to the right care setting when they leave the hospital as soon as they need to.

"This plan is a beginning. As we look ahead to next steps, citizens and stakeholders have told us not to 'reinvent the wheel'. In Phase Two, we will look at existing recommendations in health reports, the Ministry's strategic plan (Spring 2007), and emerging issues and, continue to seek input on how we move forward. The outcomes will guide coordination and funding decisions for 2008-2009," said Gledhill

"We know that relationships are the foundation for real change," said Gledhill. "We are grateful to everyone who has provided input into the process. The HNHB LHIN has participated in approximately 300 meetings with community groups, met with approximately 400 Board members of health service provider organizations, and held 14 open houses. We will strive to respect and balance diversity, values and evidence so we can create a health delivery system that is informed, balanced and progressive," said Gledhill.

The Hamilton Niagara Haldimand Brant LHIN is one of 14 local health integration networks and is responsible for planning, coordinating and funding the local health system in this region which spans from Burlington to Fort Erie and from Burford to Cayuga and includes more than 1.3 million residents. The LHIN represents local decision making; decisions about the organization, coordination and funding of health services will be made closer to home by people who live and work in the LHIN. The health services include community support services, mental health and addictions services, community health centres, Community Care Access Centres, long- term care homes and hospital services.

The *Quality Care in Community Hands: Building an Integrated Health Service Plan, Phase One* document is available on the HNHB LHIN website at: www.hnhblhin.on.ca.

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More information about LHINs can be found at www.lhins.on.ca.