

Care Connections



**North Simcoe Muskoka Local Health Integration Network
Report to the Community
Fall 2018**



Message from our Chair and CEO

The burst of fall colours signals a change between the warm days of summer and the wintry months ahead. It is a reminder that change is inevitable as we evolve from one season to the next.

The same can be said for health care in Ontario—a key pillar in the last election. The advent of a new government is often accompanied by change and transition, but there is also stability. While a new mandate is yet to be unveiled, we continue to work towards our patient-focused goals.

We want to provide North Simcoe Muskoka residents with the services they need, when and where they need them. The establishment of sub-regions by the province in 2017 (see page 7), and the subsequent creation of our five sub-regions, means that health services can be planned and delivered at an even more local level.

As we work diligently to improve patient experiences and outcomes, we know that there is still much work ahead of us. This year we provided more than one million personal support hours to care for patients and their caregivers in fiscal 2017 – 2018, and access to personal support services continues to remain a challenge in North Simcoe Muskoka. This is intensified by the demographic realities of our region—an aging population and a diminishing supply of human resources. We are collaborating with our partners to address this (see page 10).

We know that utilization rates among North Simcoe Muskoka residents for designated mental health beds are among the highest in the province, and that opioid-related emergency department visits and deaths in the region are occurring at rates higher than provincial averages. We are collaborating and working with our healthcare providers to simplify access to mental health and addictions services so that people receive the care they need earlier. To this end, programs such as Big White Wall, BounceBack®, and Structured Psychotherapy (see page 14), give residents more options to access care in their local communities.

The Simcoe Muskoka Opioid Strategy, launched in July 2018, is an action plan to address the opioid crisis (see page 13).

By improving access and coordinating care across the health care continuum, we can ease the burden on emergency room services and reduce wait times. Key enablers include digital health, embedding care coordinators into primary care settings, and establishing specialized Rapid Access Clinics (see page 11). Our three-year strategic plan, the Integrated Health Service Plan 2019 – 2022 (see page 12), will highlight other initiatives. We thank everyone who participated in our spring community engagements and provided feedback to help inform our plan.

Our work cannot be accomplished alone. On behalf of our Board and leadership team, we thank our health service providers, service provider organizations, community partners, patients, and caregivers for your ongoing support and input. Together, we can continue to plan and respond appropriately to the needs of people who receive and deliver care in our local health system, so that all can achieve better health, better care, and better value in North Simcoe Muskoka.

OUR MISSION:
Together ... Achieving Better Health, Better Care, Better Value.

Our Vision:
Healthy people. Excellent care. One system.

OUR VALUES:
→ Care Deeply → Interact Respectfully
→ Perform Responsibly → Think Creatively



Kirsten Parker,
Board Chair



Jill Tettmann,
Chief Executive Officer

North Simcoe Muskoka LHIN System Profile

April 1, 2017 - March 31, 2018

FAST FACTS



The NSM LHIN funds **61** health service provider organizations

7 Hospitals

3 Community Health Centres

Risk factors such as smoking, heavy drinking, and obesity exceed provincial rates



Serves an area of approximately **8,499** km² with **464,184** residents

26 Long-Term Care Homes

7 Community Mental Health Agencies

Service providers have been challenged to meet the demand for **personal support services** due to human resources capacity

\$818 million in funding allocated to deliver services across the continuum of care

22 Community Support Service Organizations

Home and Community Care by the Numbers 2017-18

91% of patients and caregivers reported a positive experience with their care

1 million personal support hours provided to care for patients and their caregivers, of which **84%** of hours supported seniors in their homes

11,630 referrals from hospitals to support patients going home with care services

33,000 calls handled by our Information & Referral Specialists, to connect people to community services

Over 2,200 patients received quality palliative care

17% increase in patients transitioning from hospital to home over the last 5 years

1,378 people supported in their transition to long-term care

64% of patients connected to primary care within 10 km of their home

1,960 children and youth received care in their school

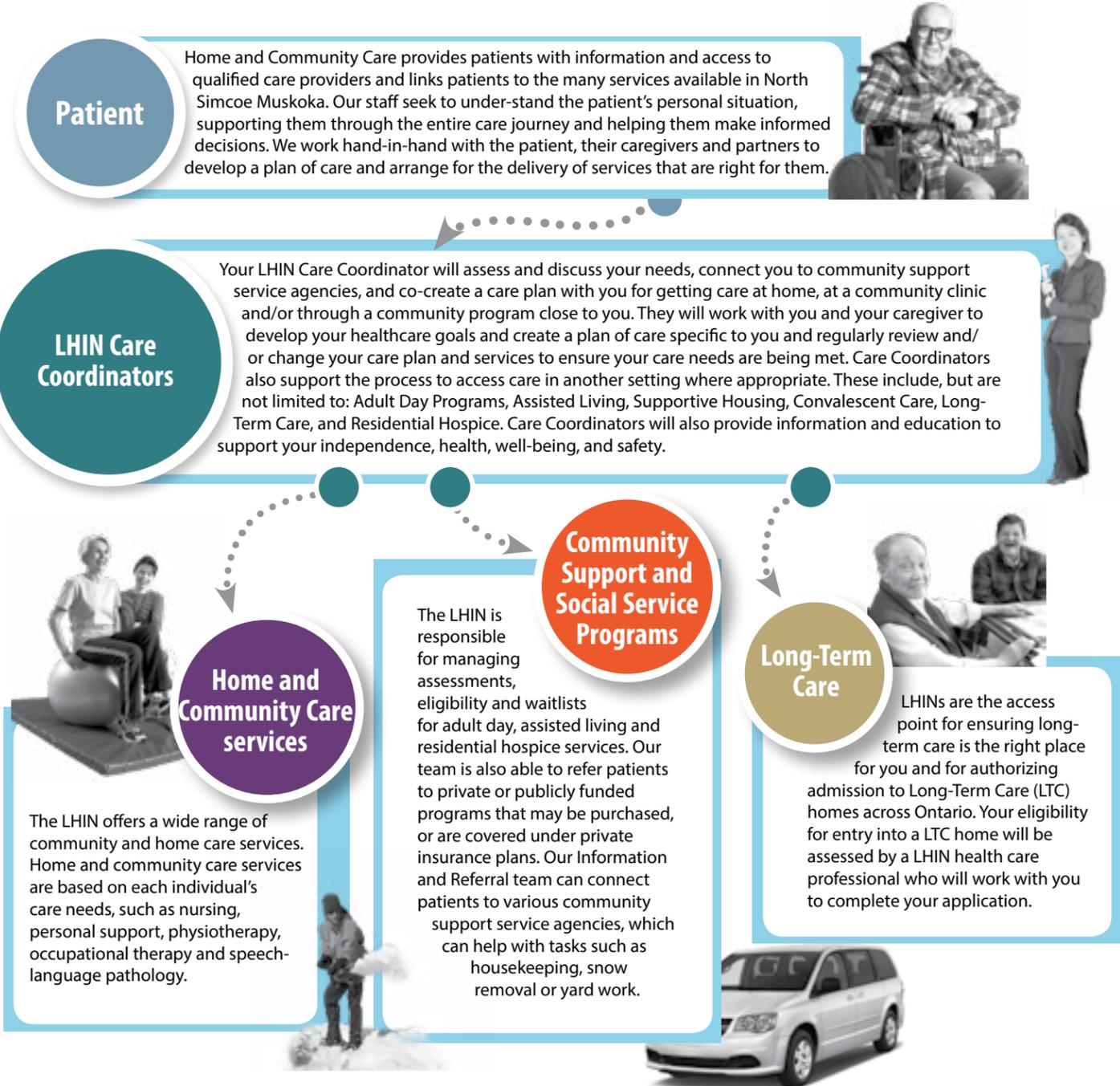
40,427 patients connected to a primary care provider since 2009

12,300 patients received nursing care in homes, schools, and through community nursing clinics

Delivering Home and Community Care Services

Home and Community Care helps people find their way through Ontario's health care system, understand their options, and connect with quality community-based health care resources. We work with children, adults and seniors to ensure they can make informed choices about their care and receive services in the most appropriate settings. Home and Community Care is a division of the North Simcoe Muskoka Local Health Integration Network (NSM LHIN). If you have questions about Home and Community Care services, please call 310-2222 (no area code required).

How we provide Home and Community Care



Engaging with Patients and Caregivers

There are several ways for members of the public to get involved in local healthcare planning at the NSM LHIN:

Share Your Story

Patient-centred care is at the core of the work the NSM LHIN and its health care partners do every day. Lived experiences assist health service providers design services that meet the needs of residents in the region.

If you are a patient, caregiver, or family member whose recent experiences with the healthcare system could provide a learning opportunity to enhance how health care is delivered, please contact Shelby Rushton, Communications Coordinator, at shelby.rushton@lhins.on.ca or 705-326-7750 ext. 2274 to learn more about how you can share your story.

The **Community Network of Clients, Caregivers and Family** gives residents in North Simcoe Muskoka an opportunity to stay informed about local and provincial health care initiatives, and to participate in select activities. These can include responding to an online, anonymous survey; participating in discussion groups; or being featured in a video. Recently, the NSM LHIN shared opportunities from Health Quality Ontario, the Canadian Patient Safety Institute, and the Ministry of Health and Long-Term Care. For more information or to join, please contact Sheila Winegarden, Community Engagement Coordinator, at sheila.winegarden@lhins.on.ca or 705-326-7750 ext. 3237.



The NSM LHIN is interested in hearing first-hand experiences about:

- Accessing care
- Moving through the system
- Improving the health of North Simcoe Muskoka residents
- Communities working together to improve the local health system

The North Simcoe Muskoka LHIN Patient Family Advisory Committee (PFAC)

Patient experience and input is a key driver of system change and helps to refine how provincial work is operationalized locally. Since 2015, the NSM LHIN has had a Patient Family Advisory Committee (PFAC) to provide a forum for dialogue among community members as they advise the LHIN on issues related to health system goals and objectives. The committee offers system-level advice and guidance to support planning, providing LHIN staff, the CEO and the Board of Directors with important input and perspective as community residents, clients, and caregivers with varied experiences in the local health care system.

PFAC members commit to a minimum 12-month tenure, with meetings taking place at least six times per year. Members receive a variety of materials and are asked to review them and prepare ahead for meetings and discussions. In addition, they are often invited to attend LHIN and community events as participants, representatives and/or speakers as opportunities arise. Please visit our [Stay Informed - Get Involved](#) page for more information.

PFAC Expression of Interest (EOI)

The NSM LHIN continues to seek community members who are passionate about local health care to participate on its PFAC, particularly those who represent the following sub-region stakeholder groups:

- People residing in the Couchiching and Muskoka and Area sub-regions
- Francophone representatives (all sub-regions)
- Indigenous representatives (all sub-regions)
- New immigrants (all sub-regions)
- Members of the LGBTQ community (all sub-regions)
- People aged 25 and under (all sub-regions)
- Men (all sub-regions)

To be considered, please complete and submit an [Expression of Interest](#).

Sub-Regions as the Foundation for Integrated, Local-Level Health Planning

North Simcoe Muskoka covers an area of 8,445 square kilometres and is home to 3.5 per cent of Ontario's population, making it the second-smallest LHIN in terms of total population. The region features a greater proportion of rural and small town residents than the province, as well as some of the fastest-growing metropolitan areas in the country. To address the unique health care requirements of residents such as retirees and seasonal residents in cottage country, growing families in newly developed suburbs, seniors in long-term care, Indigenous populations living on- and off-reserves, and francophones, and others across the LHIN, the NSM LHIN has established five sub-regions to serve as the foundation for local, integrated health care planning and delivery.

What are sub-regions?

Sub-regions are smaller geographic care communities within the NSM LHIN. They are used to help plan health services at an even more local level, reflecting the reality that different communities in the region have unique health care needs that may be driven by geography, population, and demographics. Sub-region planning is led by a triad comprised of a physician, a representative from the LHIN's planning and integration team, and a member of the home and community care team. Sub-regions are not another layer of bureaucracy. Instead, they offer a better way to plan and improve health services in a manner that is more in line with the diverse needs of communities within our LHIN.

Why were sub-regions established?

Sub-regions have been in place informally in North Simcoe Muskoka for several years, but were formalized by the Ministry of Health and Long-Term Care in 2017. Using a data-driven approach to evaluate care patterns—such as patient referrals and insights from patients, providers, and community members—sub-regions can help improve access to local health care services when and where they're needed most, and to deliver them in the most appropriate and efficient way possible. For example, the requirements of the Barrie and Area sub-region, with a population of almost 220,000, are significantly different than those of the North Simcoe sub-region, with a population of just over 48,000.

Sub-region planning has played a central role in advancing the strategic priorities of the NSM LHIN, and will be the cornerstone of the next Integrated Health Service Plan, which will guide the local health system from 2019-2022.

What are sub-region Planning Tables?

The overarching goal of sub-region planning tables is to create a local health system that is safe, effective, patient-centred, efficient, timely, and equitable. Sub-region planning tables bring together stakeholders from across sectors—such as physicians, nurses, clinicians, and community partners—as well as patients and caregivers, to collaborate in planning for the populations in their respective geographies.

Sub-region tables:

- Assess local health needs
- Plan to improve patient experiences and outcomes
- Implement innovative and integrated strategies
- Evaluate local health system performance
- Address system-level concerns/issues/risks



- LHIN-funded Health Service Providers**
- 1 Hospital
 - 10 Long-Term Care Homes
 - 1 Community Health Centre
 - 16 Agencies Providing Services at Home
 - 6 Organizations Providing Mental Health and Addictions Services

217,348 TOTAL POPULATION

14.0% SENIORS

31.4% CHILDREN/YOUTH <25

2.8% FRANCOPHONE IDENTITY

3.5% ABORIGINAL IDENTITY

20.3% RURAL AND SMALL TOWN POPULATION (COMBINED)

6.2% POPULATION GROWTH (2011-2016)



- LHIN-funded Health Service Providers**
- 1 Hospital
 - 4 Long-Term Care Homes
 - 0 Community Health Centres
 - 15 Agencies Providing Services at Home
 - 6 Organizations Providing Mental Health and Addictions Services

76,045 TOTAL POPULATION

22.1% SENIORS

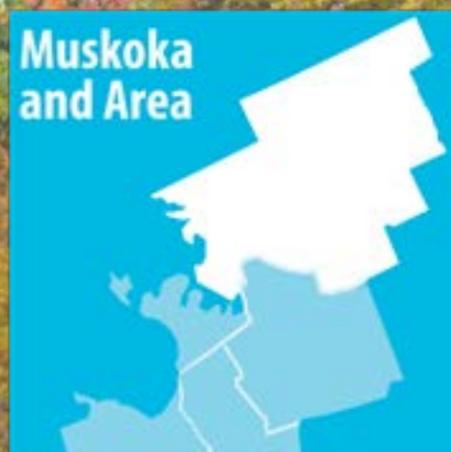
25.4% CHILDREN/YOUTH <25

1.5% FRANCOPHONE IDENTITY

5.6% ABORIGINAL IDENTITY

59.1% RURAL AND SMALL TOWN POPULATION (COMBINED)

3.9% POPULATION GROWTH (2011-2016)



- LHIN-funded Health Service Providers**
- 1 Hospital operating out of 2 sites
 - 4 Long-Term Care Homes
 - 0 Community Health Centres
 - 16 Agencies Providing Services at Home
 - 5 Organizations Providing Mental Health and Addictions Services

60,599 TOTAL POPULATION

24.1% SENIORS

22.5% CHILDREN/YOUTH <25

1.5% FRANCOPHONE IDENTITY

3.7% ABORIGINAL IDENTITY

100% RURAL AND SMALL TOWN POPULATION (COMBINED)

4.4% POPULATION GROWTH (2011-2016)



- LHIN-funded Health Service Providers**
- 2 Hospitals* (acute and specialty mental health)
 - 3 Long-Term Care Homes
 - 1 Community Health Centre
 - 16 Agencies Providing Services at Home
 - 6 Organizations Providing Mental Health and Addictions Services

48,302 TOTAL POPULATION

24.1% SENIORS

23.4% CHILDREN/YOUTH <25

6.6% FRANCOPHONE IDENTITY

15.4% ABORIGINAL IDENTITY

38.4% RURAL AND SMALL TOWN POPULATION (COMBINED)

0.8% POPULATION GROWTH (2011-2016)



LHIN-funded Health Service Providers

- 1 Hospital
- 5 Long-Term Care Homes
- 1 Community Health Centre
- 16 Agencies Providing Services at Home
- 6 Organizations Providing Mental Health and Addictions Services

63,262 TOTAL POPULATION

26.7% SENIORS

23.9% CHILDREN/YOUTH <25

1.9% FRANCOPHONE IDENTITY

2.5% ABORIGINAL IDENTITY

39.4% RURAL AND SMALL TOWN POPULATION (COMBINED)

11.7% POPULATION GROWTH (2011-2016)

Working Together to Improve Access to Personal Support Services

The North Simcoe Muskoka region is experiencing a shortage in Personal Support Workers (PSW). Through the [Help Us Help YOU](#) initiative, the NSM LHIN is proactively asking patients and their family care-givers to contribute to some of the solutions. By working together, we can improve patients' access to PSWs when they need them most. We're asking:

- **Is your schedule flexible?** Appointments first thing in the morning and in the evening are always in high demand. If you request assistance later in the morning or early afternoon, or if your schedule is flexible, it may be easier to provide service.
- **Do you have another engagement scheduled during your regular appointment time?** If so, please cancel your appointment ahead of time so that we can re-assign PSWs to other patients.
- **Are you finding that you are able to do more?** If you no longer require certain services, such as assistance with bathing, please advise your PSW so that we can accommodate patients with more acute needs.

In North Simcoe Muskoka, enrolment in Personal Support programs is down, meaning fewer people are graduating from these programs. The NSM LHIN is working to reduce the gap between PSW demand and supply. To learn more, click [here](#).

Advancing a Shared Health Record System for Patients

Patients will increasingly benefit from shared health record work that's been done successfully in the South Georgian Bay sub-region of the North Simcoe Muskoka LHIN.

Although the majority of physicians in the LHIN's five sub-regions have already transitioned from traditional paper records to one electronic medical record (EMR), South Georgian Bay has now transitioned all physicians under the same EMR. Working from the same record enables Family Health Teams to link with other point-of-care systems to create a more integrated care team that benefits patients and physicians alike.

The LHIN brought together interested health service providers from across North Simcoe Muskoka to hear how their colleagues in South Georgian Bay overcame challenges with privacy matters, associated expenses, and change management requirements to amalgamate patient health records into one EMR for that sub-region. This collaborative progress puts them in a strong place to be ready to adopt other potential digital health opportunities, streamlining patient care.

Their shared database houses 190,000 patient files from 54 family physicians, 10 nurse practitioners, 37 allied health partners, 25 pharmacies, the South Georgian Bay Community Health Centre, the Health Link, and other health service providers.

An integrated EMR system creates the foundation for connecting to other systems and creating further efficiencies. ePrescribe, for example, is a project where the EMR has been built to connect with local pharmacies. The patient information is automatically populated on a template and then sent to a portal where the pharmacy of the patient's choice locates the prescription for filling. This saves time for the patient and the provider, reduces errors, and virtually eliminates the risk of prescription fraud.

Patients in the North Simcoe Muskoka region are benefitting from the expansion of digital health resources. As of April 2018, 89% of the region's family physicians and specialists are on an OntarioMD certified EMR system, which is higher than the provincial adoption rate of 80%.

The NSM LHIN supports clinical providers in adopting digital health practices that will augment access to quality care. Integrating systems with other practitioners around them creates a strong foundation for standardizing clinical care and introducing innovative digital practices.



Did You Know?

- North Simcoe Muskoka is home to the third-largest proportion of residents who identify as Aboriginal among all the LHINs.
- There are eight identified providers and one partially designated provider that offer health care services in French across our region. The LHIN's continued partnership with the French Language Health Planning Entity (Entité 4) is key to meeting the needs of the Francophone community.
- Demand for personal support services in NSM is projected to grow nine times faster than the workforce between 2015-16 and 2021-22; that escalates to 20 times faster than the workforce between 2015-16 and 2035-36.
- www.nsmhealthline.ca is an innovative web portal that puts accurate and up-to-date information about health services at the fingertips of patients and health care providers across the NSM region. For more information visit www.nsmhealthline.ca.
- The NSM Specialized Geriatric Services (SGS) program is one step closer to establishing an integrated regional system of care for frail seniors and their caregivers. Read the Implementation Plan for Local SGS Teams, a report prepared by Waypoint as the lead agency for the NSM SGS Program, with support from the NSM LHIN: <http://nsmgs.ca/13/publications>.
- Care Coordinators are now embedded in some primary care settings in all five sub-regions, improving team-based care delivery. In the coming months, the focus will be on strengthening relationships between team members to support a seamless care experience for patients.
- The Couchiching Family Health Team is carrying out a ministry-mandated program for the referral and assessment of patients with musculoskeletal conditions through its Rapid Access Clinic (RAC) for low back pain.



Integrated Health Service Plan 2019 – 2022

The NSM LHIN's Integrated Health Service Plan (IHSP) establishes the direction for the local health system over a three-year period. Prior to drafting the IHSP that will inform system planning from 2019 – 2022, the LHIN spent several months engaging with stakeholders across the region. Health service providers, community partners, residents, and caregivers offered their opinions and experiences with local healthcare.

In total, the NSM LHIN spoke with nearly 1,300 people and received more than 500 responses to an online survey that was available in English and French. Their input is reflected in the goals and objectives of IHSP 2019 – 2022. These inputs, in conjunction with the unique health care requirements and characteristics of the region, were key considerations that helped to inform local health care planning over the next three years. The IHSP is expected to be finalized and posted to our website in February 2019.

NSM Opioid Strategy

Opioid Crisis

In September 2018, the Chief Coroner for Ontario, and the Chief Medical Officer of Health, confirmed that there were 1,265 opioid-related deaths in Ontario between October 2017 and January 2018, compared with 694 during the same time period (46% increase) in 2016. This represents a significant and rapid increase in the rate of mortality related to opioid overdose. Mortality rates in Simcoe Muskoka mirror the provincial experience. The Simcoe Muskoka District Health Unit (SMDHU) has also confirmed that opioid-related emergency department visit rates in Simcoe Muskoka have doubled when compared to the rates between 2010 and 2014, and tripled when compared to the rates between 2004 and 2008. While the Ontario rates have seen a similar increase in recent years, the Simcoe Muskoka rates have been significantly higher than the comparable provincial rates since 2004.

Simcoe Muskoka Opioid Strategy

In May 2017, the NSM LHIN and the SMDHU announced the Simcoe Muskoka Opioid Strategy (SMOS)—created by a diverse group of key stakeholders involved in the growing issue of opioid misuse. The SMOS Steering Committee's final report, *An Action Plan for Our Communities*, was founded on a four-pillar approach that includes: prevention, treatment/clinical practice, harm reduction, and enforcement; with the additional pillars of emergency management, data and evaluation and lived experience. Released in May 2018, the report is intended to provide a common understanding of the opioid crisis and an action plan that outlines a comprehensive strategy for how the region can move forward together. The full report is available online at PreventOD.ca.



Supporting people with mild to moderate anxiety or depression

In Canada, approximately one in five people will experience a mental health illness or addiction problem in any given year. By 40 years of age, one in two Canadians have—or have experienced—a mental illness. The NSM LHIN is committed to providing residents with access to timely, high-quality care so that they can achieve an optimal level of mental health and well-being. The following new and expanded services can help people experiencing mild to moderate anxiety or depression.

Big White Wall® is a free online peer support and self-management tool for adults and youth 16+ experiencing symptoms of mild to moderate depression and anxiety. The service is coordinated by the Ontario Telemedicine Network (OTN), and paid for by the Government of Ontario for people living in Ontario. Clients can self-refer and no clinician referral is required. Available around the clock, it offers participants anonymous peer support, self-guided courses on a variety of topics, self-improvement tools and resources, and a safe space to express yourself without judgement. For more information, visit www.otn.ca/bigwhitewall.

24/7 ONLINE SUPPORT FOR YOUR MENTAL HEALTH



24/7 online support for your mental health

Free in Ontario

Register today to get support, take control
and feel better.

AGE
16+

Ontario | | Big White Wall

bigwhitewall.ca

BounceBack®
reclaim your health



AGE
15+

A free telephone coaching program with videos to help you tackle depression and anxiety.



BounceBack®reclaim your health is a free skill-building program designed to help adults and youth aged 15+ manage symptoms of depression and anxiety. Available by referral from a primary care provider (family doctor, nurse practitioner, psychiatrist) or client self-referral, the program helps participants learn skills to help them deal with problems such as inactivity, unhelpful thinking, worry, and avoidance. BounceBack has been proven to reduce symptoms of depression and anxiety and enhance overall well-being and quality of life. To learn more about the program and access the referral form, visit bouncebackontario.ca.

Increasing Access to Structured Psychotherapy (IASP) is a program funded by the Government of Ontario to provide individuals 18+ who are experiencing mild to moderate anxiety and/or depression with access to free in-person individual and group Cognitive Behavioural Therapy. It is coordinated through Ontario's four specialty mental health hospitals, including Waypoint Centre for Mental Health Care. In the North Simcoe Muskoka LHIN, IASP is being delivered in a wide-range of settings, including primary care, community mental health and family services agencies. A primary care provider or other regulated health professional must submit a referral on behalf of a client. Click [here](#) to learn more about the program and to access the referral form.



Calendar of Events/Learning Opportunities

8th Annual North Simcoe Muskoka Dementia Network Fall Conference

Alzheimer Society of Simcoe County - Barrie Office | North Simcoe Muskoka Dementia Network | NSM Specialized Geriatric Services

Hawk Ridge Golf and Country Club, 1151 Hurlwood Lane, Orillia, L3V 6K8

Wednesday October 24, 2018 - 8:30 a.m. to 4:00 p.m.

Cost: \$85

Dementia Friendly Communities - We all have a part to play
Keynote: Schlegel - UW Research Institute for Aging will be presenting Living the Dementia Journey. Local geriatricians, Drs. Young and Gardhouse will also speak, and a person living with dementia will share their lived experience.

Contact Erika Rice by phone at 705-329-0909 ext. 3802, or by email at erice@alzheimersociety.ca.

16-hour PIECES Learning & Development Program Orillia

NSM Specialized Geriatric Services

Trillium Manor, 12 Grace Avenue, Orillia, L3V 2K2

Tuesday October 30 and Tuesday November 20, 2018

8:30 a.m. to 4:30 p.m.

Cost: \$195

The P.I.E.C.E.S. 16-hour program focuses on the development of six core competencies to:

- Detect or flag cognitive/mental health needs and associated behavioural issues.
- Use the template to guide a systematic, comprehensive, and team approach to complex issues.
- Plan care with others (internal and external to the organization).

Contact the PIECES office by phone at 705-721-6764, or by email at piecesoffice@execulink.com.

Connect with us:

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**For listings of Healthcare Services,
visit www.nsmhealthline.ca**

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