

For Information

DATE: January 29, 2010

REPORT TITLE: **LOCAL HEALTH INTEGRATION NETWORKS' INTEGRATED HEALTH SERVICE PLANS**

FROM: Janette Smith, Commissioner of Health Services

OBJECTIVE

To update Council on local health system priorities of Local Health Integration Networks (LHINs) based on their updated three-year Integrated Health Service Plans.

REPORT HIGHLIGHTS

- Integrated Health Service Plans are developed by Local Health Integration Networks (LHINs) to set out the vision, priorities and strategic directions for the local health system.
- In December 2009, all of Ontario's LHINs released their Plans for the period April 2010 to March 2013.
- In their Plans, both LHINs serving Peel focus on emergency room wait times and alternate level of care beds; chronic disease prevention and management; mental health and addictions services; access to primary health care services; integrated regional health programs; and services for seniors.
- Overall the health priorities and commitments identified in the Plans address several health system issues of interest to Council.
- Peel's LHINs express commitment to forging ahead with integration efforts, realigning some local health services to achieve better outcomes and system efficiencies.
- As LHINs implement their Plans, it is expected they will continue to engage health service providers and health system stakeholders.

DISCUSSION**1. Background**

Formed in 2006, Ontario's 14 Local Health Integration Networks (LHINs) have fully assumed their function as local health system managers. As LHINs accept this role, the Ministry of Health and Long-Term Care (MOHLTC) is now primarily responsible for provincial health system stewardship, and for directly managing some remaining health programs and agencies not transferred to the LHINs. Peel Region is served by the Central West LHIN and the Mississauga Halton LHIN.

The *Local Health System Integration Act* (the *Act*) sets out the division of powers between the MOHLTC and LHINs. Under the *Act*, LHINs are mandated to:

- Promote the integration of the health system;
- Plan for local health service needs;

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- Engage the community in planning and setting priorities;
- Ensure there are appropriate processes for responding to concerns;
- Assist in provincial strategic planning;
- Coordinate health services, improving the efficiency of the health system; and
- Allocate funding and setting performance standards with health service providers.

As reported to Council in January 2007, Integrated Health Service Plans (Plans) are three-year plans developed by LHINs that set out the vision, priorities and strategic directions for their local health system. Once approved by the MOHLTC, these Plans become the blueprint for each local health system, identifying those priority areas where LHINs will focus their integration efforts.

LHINs have authority to integrate LHIN-funded health services in ways that are consistent with the direction set out in these Plans. Integrating health services means LHIN-funded health service providers can be required by LHINs to:

- Begin or cease a service;
- Provide a certain quantity of service; and
- Transfer a service to another location or health service provider.

In fall 2006, the Central West and Mississauga Halton LHINs each released their first Plans for the period 2007-2010. These Plans included both provincially-mandated priority areas and the local health priorities for each LHIN.

Since the release of these Plans, health service providers and other stakeholders, including senior management and staff from the Region of Peel, have been involved in LHIN-led planning teams to assist in implementing the Plans.

LHINs have responsibilities that directly impact the Region of Peel's five long-term care homes, adult day services and respite care programs that are funded by the LHINs. LHIN powers do not extend to Paramedic Services and local Public Health services delivered by the Region of Peel. The LHINs also directly impact hospitals, Community Care Access Centres, mental health and addictions services (adults), long-term care, Community Health Centres and community support services.

2. Findings

In December 2009, all of Ontario's LHINs released Plans for the period April 2010 to March 2013. These Plans were developed through consultation with health service providers, community stakeholders and the public, and have received approval from the MOHLTC. The Central West and Mississauga Halton LHINs released:

- It's About You and Your Health: Integrated Health Service Plan 2 (Central West LHIN); and
- Mississauga Halton LHIN Integrated Health Service Plan: 2010-2013.

Copies of these Plans can be obtained from the Clerk's Office.

a) Provincial Health Priorities

The MOHLTC requires each local Plan describe how the LHIN will make progress on several key Ministry health priorities:

- Reducing emergency department wait times;

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- Reducing time spent in hospitals and the number of alternate level of care (ALC) beds;
- Implementing the Ontario Diabetes Strategy;
- Strengthening mental health and addictions services (and implementation of 10-year provincial strategy, yet to be released); and
- E-health.

b) Strategic Priorities Affecting Peel Region

Both LHINs serving Peel share common goals to transform their local health systems, to improve outcomes and ensure sustainability of their health system. Apart from provincial health priorities, these LHINs have also identified similar health priorities for the next three years, based on:

- Consultation with stakeholders;
- Demographic factors and health status data; and
- Health system performance indicators, such as wait times data.

The strategic priorities identified in the two Plans affecting Peel are as follows:

1. **Reducing emergency room wait times and alternate level of care (ALC) beds** through more community-based care and supports (family doctors, Family Health Teams, and Community Health Centres), as well as hospital-based initiatives. The Central West LHIN Plan stresses the importance of reducing emergency department wait times and ALC bed days by making changes across the health system, not solely in hospital emergency departments. This priority relates to paramedic offload delays. Peel Health Services staff continues to work with the LHINs to set targets for paramedic offload in Peel's hospitals and to maximize use of the Dedicated Offload Nursing Program.
2. **Increasing education, supports and treatment of chronic diseases**, focusing on chronic kidney disease and diabetes.
3. **Expanding mental health and addictions services and community-based supports** to increase access to services and reduce inappropriate use of hospital emergency departments, in accordance with Ontario's 10-year mental health and addictions strategy, yet to be released.
4. **Increasing access to primary health care services** by recruiting more family doctors, and moving ahead with electronic health records to improve care.
5. **Creating more integrated regional health programs** that increase system efficiency and capacity allowing residents to receive timely and appropriate care closer to home. Regional service delivery models that are already in place for some surgeries. In the next three years, integrated regional health programs will be created for diabetes, cancer, cardiovascular services, palliative care, services for seniors, and services for women and children.
6. **Expanding community living and support services for seniors** allowing seniors to live at home as long as possible, especially those seniors at risk of needing institutional care. Recent discussions between Region of Peel and LHIN leadership have focused on how supportive housing could be expanded to meet seniors housing needs. Peel Health Services also continues to seek opportunities to obtain funding for an Adult Day program at the Tall Pines Long

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Term Care Centre, and is working with the LHINs, Trillium Health Centre and other partners to create a Special Behavioural Unit at Sheridan Villa.

Overall the health priorities and commitments identified in the Plans address several health system issues of interest to Council. These shared priorities include reducing paramedic offload delay and emergency department wait times for Peel residents; increasing services for seniors to remain living in the community while enhancing services for seniors living in institutional settings; and building capacity of Peel's community-based mental health and addictions services.

3. Proposed Direction

The LHINs serving Peel have expressed commitment to forging ahead with integration efforts and realigning some local health services to achieve better outcomes and system efficiencies. These Plans provide a more detailed roadmap for integrating health services, building on the progress made over the past three years, with significant emphasis on provincial MOHLTC priorities.

As the LHINs implement their Plans, it is expected they will continue to engage health service providers and health system stakeholders. As a funder and provider of health services both under LHINs and outside of LHINs, the Region of Peel will be working with LHIN leadership on issues of shared interest, impacting Regional services and the health of the Peel community as a whole.

CONCLUSION

The LHINs serving Peel continue to develop their role as local health system managers for a large segment of the health system in Peel.



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Approved for Submission:



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