

Healthier people,
a strong health system
- our future.



North West LHIN Board of Directors Rainy River Community Engagement

April 14, 2014

Report submitted: July 11, 2014



Ontario

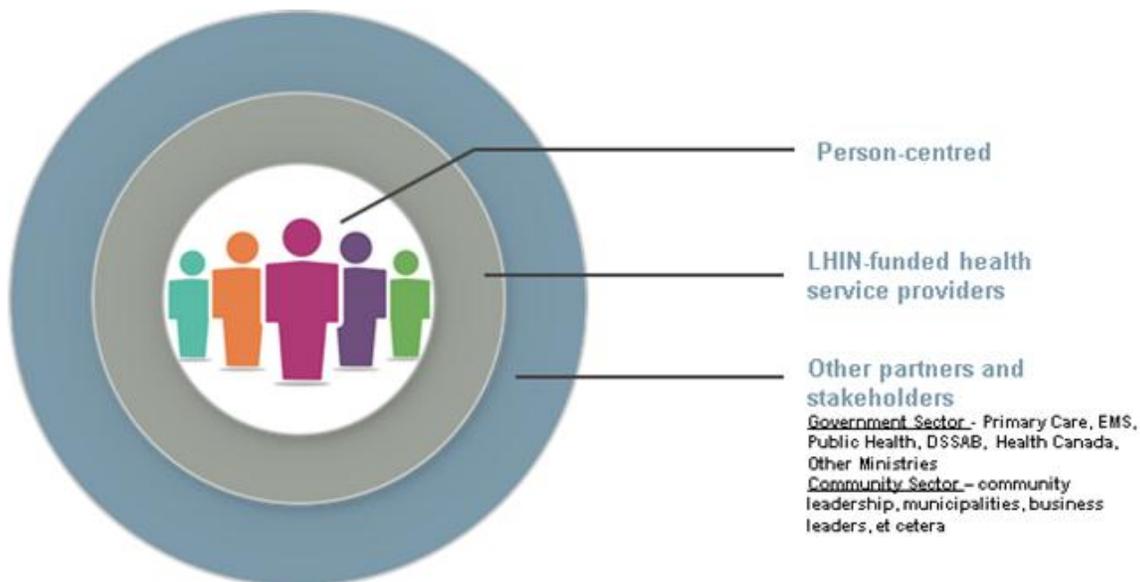
Local Health Integration
Network

Réseau local d'intégration
des services de santé

Introduction

In 2012/13, the focus of North West LHIN Board-led community engagement sessions was with funded health service providers (HSPs). Over the course of 2013/2014, North West LHIN Board community engagement sessions set out to introduce organizations and community leaders outside of the LHIN's funding purview to the Health Services Blueprint and Health Links initiatives. These events also sought to explore opportunities to leverage partnerships and resources that would help drive health system planning, integration, and transformation activities forward in their communities.

While the North West LHIN Board of Directors will continue to engage with HSPs and at the Board-to-Board level throughout 2014/2015, plans are also underway to bring non-funded stakeholders (as noted in the diagram below) to the same table alongside HSPs to collaborate and exchange ideas about how they can work together to bring the desired outcomes of the Health Services Blueprint and Health Links to fruition.



Person-Centred Circle of Care

On April 14, 2014, the North West LHIN Board of Directors invited primarily non-LHIN funded health professionals, business leaders, representatives from social service organizations, and other community partners to attend an engagement session in Rainy River, Ontario. The purpose of the meeting was threefold: 1) to increase awareness of the North West LHIN, 2) to provide information about the Health Services Blueprint and Health Links, and 3) to encourage community members to discuss how they could collaborate better to improve patient care and help drive health system transformation forward to best meet the needs of their own community.

The roundtable discussion was the eighth of a series of sessions scheduled to take place with non-LHIN funded key stakeholders in each of the 14 Local Health Hubs between May 2013 and June 2014.

The objectives of the meeting were:

1. To share information about:
 - The Provincial Health Care Context
 - Health Care in the North West LHIN
 - Health System Transformation:
 - Health Services Blueprint Recommendations
 - Health Links
2. To discuss opportunities to work together to address the health care needs of people in the Rainy River area

Meeting Details

Logistics

Susan Pilatzke, Senior Director of Health System Transformation, commenced the afternoon by welcoming attendees and explaining the purpose of the event. Subsequently, Dennis Gushulak, North West LHIN Board Member, delivered a presentation that outlined the following:

- Role and mandate of LHINs
- Provincial health care spending context
- Responsibilities of the North West LHIN
- Case for health system transformation
- Health Services Blueprint and Health Links
- How participants could collaborate to help shape Rainy River's health care system



Following the presentation, the 5 attendees participated in a wider group discussion to brainstorm responses to four prepared questions.

The session concluded with an opportunity to network with other attendees and North West LHIN representatives.

Main Themes Arising from the Discussion Period

Attendees were asked to respond to four discussion questions with their tablemates:

1. **What do you see as the opportunities and barriers to deliver health care in your community?**

Barriers

- Recruiting and retaining health human resources is difficult.
 - At the present time, Rainy River relies on two locum doctors; however the community cannot advertise to permanently fill these positions since they are currently filled.
 - While the community has been successful in signing a couple of doctors, attracting registered nurses (RNs) and other health care professionals to the area remains a constant struggle.
 - Participants attributed this challenge to the relative isolation of the community, as well as the lifestyle and working environment to which many physicians may not be accustomed: “when you’re working, you’re *it*. There is no back-up.” As a result, it may not be ideal to recruit recent graduates who may lack the experience necessary to work under these conditions.
 - *Susan noted that a physician recruitment strategy is currently in development at the provincial level, with Health Force Ontario.*
- Participants identified non-urgent transportation as a significant concern for most residents in the community.
 - Residents in Rainy River have to travel to other communities, such as Emo and Fort Frances, to receive essential health care services such as physiotherapy, which are not offered locally.
 - Some facilities have a policy requiring patients to have a travel companion present for post-surgical/post-procedural care, which may be difficult for people to arrange (e.g. time commitments required, companion may not be comfortable providing care, etc.).
 - The journey could cause further injury and/or illness for patients.
 - Patients, HSPs, and paramedics are exposed to hazardous weather conditions, especially in winter, when they must travel to deliver or receive care.
 - Patients may be reluctant to travel due to additional costs of the journey and perhaps the service itself, for which they may not have coverage.
 - There is no public transportation in the community, there is no bus service from Fort Frances to Rainy River, and bus service from Fort Frances to Thunder Bay is limited. As a result, many people – especially seniors – struggle to find affordable transportation to bring them to appointments.
 - There is potential for physiotherapy services to be shared between Emo and Rainy River but there is currently no funding to set this arrangement in motion.
 - Participants noted there was a helipad located in the community but were unsure about how often it was used, though the recent installation of solar lights permitted night landings.
- “People want to experience *home*, and retain autonomy,” but there is a need for more assisted living services for seniors in the community, especially those with 24-hour coverage and that are accessible by people with disabilities.



- Current facilities are inadequate as units are far too small (e.g. some are too small for spouses to share).
- There are system abuses in that underage individuals reserve units yet do not require the services provided.
- The rent is low so units fill quickly and undercut other rentals in the area.
- While participants acknowledged that individuals need to save their own funds responsibly, they also noted that in other areas, people can sell their houses for enough money to finance private assisted living services. However, as costs continue to rise, many people struggle to maintain and afford their own homes so they are forced to sell – but they may not see a profit in Rainy River.
- There are no local private entrepreneurs to take on the construction of a new assisted living facility.
- Many seniors move out of Rainy River to places like Winnipeg in favour of larger facilities, but this option is only available to those who have the financial capacity to do so.
- The lack of communication among providers creates additional stress for patients, who have to repeat their stories to many different people.
- The clinic is often fully-booked, which means residents have a difficult time making same-day appointments.
- Navigating the system is difficult and there is a need for care coordinators to help those who cannot advocate for themselves.

Opportunities

- Since Rainy River borders the United States, there are opportunities to work with HSPs to consolidate services and share equipment or facilities (e.g. Rainy River residents would have better access to CT services across the border, while they currently travel to Winnipeg).
 - *However, participants acknowledged that charges for services in the United States would complicate arrangements.*
- “Telehealth is wonderful” – Telemedicine services are an excellent alternative to travelling for care in that patients can connect with specialists electronically with a nurse physically present in the room with them. However, the technology is underused and residents are largely unaware that it is available. More public education is necessary to increase awareness and use. While the technology may be very expensive, bringing the capability to smaller communities would produce significant cost savings by eliminating the need for patients to travel.
- Participants proposed that perhaps a volunteer program could be introduced, whereby volunteers transport people to appointments and remain with patients as support after the necessary procedures. They also indicated that driving patients to appointments may be an ideal volunteer opportunity for high school students in need of the mandatory community service hours to graduate.



- To address the assisted living housing shortage, participants suggested renovating existing buildings based on need for both single and double units (e.g. perhaps buildings featuring three units could be converted into two large spaces).
 - *It was suggested that the Rainy River District Social Services Administration Board (DSSAB) as well as Northwestern Independent Living Services Inc. (NILS) be approached about ways to work together (e.g. are there any large houses in town that would make for a feasible communal setting?).*
- Some First Nations communities have medical vans used strictly to transport residents for care.

2. What are you most excited about as health system transformation moves forward?

- The demand for health care professionals continues to increase, which means there could be more co-op and volunteer opportunities for local youth to gain hands-on experience at local HSPs, thereby making them more likely to pursue this career and remain in/return to the community when they graduate.
- In addition, trades are being promoted within local schools more than health care professions. The North West LHIN's Health Human Resources Study could be an impetus to show students, "here are some fields worth considering."
 - *Attendees noted that currently there are many factors barring youth from participating in co-ops in the health care sector. For example, to obtain a public health placement, students must receive flu shots, TB skin tests, and so on; and, there may not be enough work for the student to complete over the semester.*
- Solutions that are tailored to benefit the local community are being implemented.

3. How can we work better together?

- Appointments could be better coordinated and clustered together so that multiple patients could travel together (e.g. suggested collaboration with Winnipeg Regional Health Authority to work on this issue).
 - *However, participants acknowledged that all patients may need to see different specialists at different locations, which could complicate travel arrangements.*
- There is a Nurse Practitioner (NP) in Rainy River with whom the Northwestern Health Unit works very closely to deliver immunizations. NPs constitute a new model of primary care and they are critical partners in prevention, continuity of care, and follow up (e.g. the local NP also performs check-ups and writes prescriptions).
- Locum physicians could explore opportunities to recruit recent graduates to work alongside them to gain valuable experience working in smaller communities.



4. Who from your community is going to lead health system transformation forward?

- The Rainy River District Social Services Administration Board (RRDSSAB) will play a significant role in addressing the need for expanding assisted living services.
- There is a lot of uncertainty as to exactly *who* to contact and *who should* bring together individuals at the community and Ministry levels to “ask tough questions” and to get initiatives off the ground in the community.
- One participant wondered, “how many things are we missing out on?” fearing that without local capacity and champions to make inquiries and conduct research, opportunities, like additional funding, could pass the community by.
- Participants recommended that HSPs also need to be around the table when these types of meetings are convened.
- Participants were hesitant to propose that physicians assume an active role in transformation activities (e.g. applying for funding) because the majority of their time is spent providing direct patient care.
- Members of the community, especially local municipal councils, feel discouraged about approaching those with decision-making authority to resolve issues as they often feel their input is not considered.

Summary & Recommendations

Overall observations and recommendations, based on event notes, discussion points, and participant feedback:

- Participants noted that it would have been valuable to have First Nations representation at the meeting to offer input.
 - *Over 30 organizations were invited to attend, including nearby First Nations, schools, businesses, municipalities, etc. The North West LHIN will review the factors that may have potentially influenced attendance and take them into consideration in future engagement planning.*
- Participants valued the opportunity to gain an understanding of local issues affecting the Rainy River area and the chance to share experiences, challenges, ideas, and opinions.
- Participants indicated that additional roundtable sessions should be hosted to discuss operational solutions and progress made as changes move ahead.

Appendices

A. Summary of Attendee Evaluations

A total of 5 evaluations were received with the following results:

1. Overall, did this meeting/program meet the stated objectives?

All five evaluators indicated that the meeting met the objectives.

2. What was your overall level of satisfaction with the following:

Please mark one rating per line, either X or ✓	Highly Dissatisfied	Dissatisfied	Satisfied	Highly Satisfied
Content of Meeting			4	1
Group Discussions			4	1
Use of Your Time			4	1
Networking Opportunities			4	1
Opportunity to participate			2	3

3. What was your overall level of satisfaction with this Meeting?

	Highly Dissatisfied	Dissatisfied	Satisfied	Highly Satisfied	No Response
Please mark one rating only			3	1	1