

Huron Perth Sub-Region Integration Table Minutes

Date: Tuesday, May 14, 2019 **Time:** 1:00 pm – 4:00 pm

Location: Seaforth LHIN Office, Dunlop/Van Egmond Rooms; 32 Centennial Drive, Seaforth


Membership

✓ Mary Atkinson, Primary Care	R Catherine Hardman, Mental Health and Addictions
✓ Bob Small, Home & Community Care	✓ Diane Parker, Patient, Family & Caregiver Partner
✓ Dr. Matthew MacDonald, Primary Care Alliance Co-Chair	✓ Dr. Miriam Klassen, Public Health
✓ Dr. Paul Gill, Sub-region Clinical Lead	R Kathy Scanlon, Community Support Services
✓ Matthew Maynard, Patient, Family & Caregiver Partner	✓ Andrew Williams, Hospital
✓ Peter Bolland, Long Term Care	✓ Barb Fewster, Patient, Family & Caregiver Partner
R Cate Melito, Grand Bend CHC	✓ Julie Moore, Health System Planner
R Alexa Attard, Executive Assistant	✓ Shirley Koch, Director, Planning & Integration

Agenda

Item	Time	Topic or Subject	Outcomes(s)	All
1		Members were welcomed. The agenda was approved by Dr. Paul Gill and Matthew Maynard Media Clips: no actions		
2		<p>Final Huron Perth SRIT May 14th: Primary care clinical leads role will end June 10th and the SRIT table is dissolved effective May 14th. The OHT evolution is the pathway towards patient centered integration and care delivery. Integration discussions will occur at the OHT tables. Work was identified from the work plan that was completed, or would transition to the OHT and other tables. Paul Gill and all members were acknowledged for their incredible commitment and effort with the sub region integration table and thanked for their leadership in advancing the priorities to improve service and care delivery in Huron Perth.</p> <p>Patient Family Advisory Committee (PFAC) Update Diane Parker and Mathew Maynard provided an update about the PFAC Projects – both are involved with Project #1: Improving the Patient Relations Process. Patient and caregiver stories were reviewed, mapped and discussion occurred as to how these were managed and future opportunities. Patient brochures that communicate complaint / feedback process in a clear and understandable way was discussed. At a provincial level leadership via Julie Drury has a focus on the Declaration of Values https://www.ontario.ca/page/patient-declaration-values-ontario?_ga=2.72750928.2134522110.1559836284-698993803.1529591511 statement and endorsement by boards across sectors. Suggestion that all partners in Huron Perth reach out to their boards to sign on to the Patient Declaration of Values. The declaration describes 5 core elements: respect and dignity; empathy and compassion; accountability; transparency; and Equity and</p>		

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		<p>engagement and will guide the planning and delivery of health care policy, programs and services from the provincial to community level.</p> <p>Ontario Health Teams Discussion of the process re: OHT development and levels of readiness as per the OHT Guide. The Huron Perth self- assessment initiated by HPHA with 52 partners is on track for submission May 15th. The proposed year 1 population is complex, mental health and addictions and palliative. Year 1 deliverables have 5 areas of focus: governance (determine how shared accountabilities will work); spread specific initiatives that are proven successes; determine areas of focus for target population; system funding model and digital OHT model. Members commented on the strength of the assessment with the very inclusive environment of Huron Perth partners, high level of trust, and partnership of primary care and various groups spanning the continuum of care.</p>		
3		<p>Updates: Cardiac Hub Spoke and Node model Stratford General Hospital, STAR FHT are the pilot sites with LHSC for proof of concept. The patient pathways to determine how patients will be supported needing tertiary level services continue to be developed. Work continues re: areas such as triage protocols, how to measure volumes and support the volumes if excessive, as well as development of a sustainability plan. The regional stroke model will be leveraged where applicable as a possible model for the long term. One patient has been through all three levels and good communication was received. An official roll out will be planned once the templates for all referrals are completed. The model is at risk without a lead and discussions are occurring with Dr. Gill to identify a specialist lead. Next meeting is scheduled for June 4.</p> <p>COPD program Agreements have gone out to the teams where the Respiratory Therapists (RTs) will be embedded. Maitland FHT and Stratford FHT are among those teams that will receive and RT.</p> <p>MH&A Updating of the website is in progress by the MH&A Alliance partners. This is the preferred option rather than build a new microsite.</p> <p>Data collection for schedule 1 sites continues. Site visits were coordinated by Julie Moore at both Schedule 1 hospital sites in Huron Perth to support system re-design planning.</p> <p>Onsite Opioid weaning/suboxone_Pilot: Great support in the FHT with the Choices for Changes nurses and counsellors. Challenges are related identifying participants and on boarding primary care. Lessons learned and spread form this pilot will be brought forward to OHT focus with year 1 target population.</p> <p>PSW Working Group Survey results have been delayed due to internal capacity. Results will be presented back to participating partners, all sub regions and the original Huron Perth working group, to develop recommendations</p> <p>Amish & Mennonite Health Equity Initiative Competency Module Pilot: Good progress is being made toward the development of health care and social services provider cultural competency/humility module to be developed and provided by PDHU. Agencies will be invited to identify champions in the most populated geographies (Mornington</p>		

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		<p>township). Likely Listowel Memorial Hospital and Stratford General Hospital would be the initial hospital sites, along with care coordinators at those sites and champions in CSS in the geography. The two hour module would be offered two times/year and will be first piloted with health unit staff. The module is expected to be ready to pilot in the fall.</p> <p>Nurse Practitioner led Clinic in Milverton: Discussion continued re: options to expand the Nurse Practitioner clinic in Milverton, which PHU administers and supervises. The clinic is restricted to serving mothers and children aged 0 to 6 years. There is a demonstrated need to extend to men and older women as well as consider other regions in Huron Perth and South West. Palliative Care: Linkages were made among the NP at the clinic and the Palliative care outreach team via Joanne King (NP HCC); hard copy resources are being pursued with Home and Community Care (HCC) Information Technology team. A connection was made with Sally Boyle, South West South Management team.</p>		
4		<p>Huron Perth SRIT Work plan All activities were reviewed to determine appropriate transitions as applicable.</p> <div>  <p>Huron Perth SRIT Workplan update v6</p> </div>		