

CENTRAL LHIN RELEASES INTEGRATED HEALTH SERVICE PLAN 2010-2013

Creating Caring Communities, Healthier People...Together!

NEWS

NOVEMBER 30, 2009

Central LHIN is pleased to announce the public release of our Integrated Health Service Plan 2010-2013, *Creating Caring Communities, Healthier People...Together*.

This strategic plan, which is now available on our website (www.centrallhin.on.ca), outlines four key planning priorities that will be the focus of Central LHIN's activities and investments in the local health system over the next three years. These include:

- Emergency department wait times and the time people spend in hospital beds waiting for alternate levels of care,
- Chronic disease management and prevention,
- Mental health and addictions, and
- Health equity.

Our Integrated Health Service Plan 2010-2013 builds on the achievements of our first Integrated Health Service Plan, and the information we learned through our 2008 Health Service Needs Assessment and Gap Analysis project (also available on our website), which helped us identify the long-term health service needs in Central LHIN, the types of health services we are able to deliver today, and the types of health services we need to be able to deliver in the future.

We acknowledge and thank the many individuals who contributed to the development of our plan, including our Integrated Health Service Plan Steering Committee, our Advisory Networks, and our Citizen's Reference Panel, along with our health service providers, staff and the Central LHIN Board of Directors.

QUOTES

Central LHIN's Integrated Health Service Plan 2010-2013 builds on the collaborative work we've undertaken over the last three years, while reflecting the current state of the health system and the needs of our growing communities. Our plan also supports the priorities of the Ministry of Health and Long-Term Care, in order to link provincial resources to local needs and ensure we make the most of the resources at hand to support the sustainability of our health system over the long-term.

– Ken Morrison, Chairman of the Board of Directors, Central LHIN

Over the next three years we will work with our health service providers, the Ministry of Health and Long-Term Care, and other stakeholders to positively impact our communities through targeted local investments within our priority areas. Together, we'll move towards our vision of caring communities and healthier people.

– Kim Baker, Chief Executive Officer, Central LHIN

QUICK FACTS

What we learned about our LHIN through our 2008 Health Service Needs Assessment and Gap Analysis project laid the foundation for the planning priorities of our Integrated Health Service Plan 2010-2013. Key population trends for Central LHIN:

Central LHIN is growing ... our LHIN is the most populous and one of the fastest growing LHINs in Ontario.

Central LHIN is aging... we anticipate an increase of 40 % in the number of seniors aged 65+ residing in our LHIN over the next 10 years.

Central LHIN is diverse... our LHIN has the highest proportion of immigrants in the province, and 37 % of our residents are members of visible minority groups- almost twice that of Ontario at 20%.

LEARN MORE

- Download Central LHIN's [Integrated Health Service Plan 2010-2013](#).
- Read more about the current and future health service needs of our communities through our [2008 Health Service Needs Assessment and Gap Analysis Report](#).
- Find out more about health services in [Central LHIN](#).

For more information:

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Creating Caring Communities, Healthier People... Together!

Integrated Health Service Plans (IHSPs) are local strategic plans that guide LHIN activities and investments over a set period of time. Central LHIN's Integrated Health Service Plan for 2010-2013 is now available on our website at www.centrallhin.on.ca.

Our Planning Priorities for 2010-2013

In consultation with hundreds of health care professionals, community leaders and members of the public, we've identified four planning priorities to focus on over the next three years. We'll work with our health service providers, the Ministry of Health and Long-Term Care, and other stakeholders to positively impact our communities through targeted local investments within these priority areas.

Central LHIN IHSP 2010-2013 Planning Priorities - Current and Future State

Priority	Where we are (current state)	Where we want to go (future state)
Emergency Department and Alternate Level of Care	<ul style="list-style-type: none"> • Long wait times for patients • Ministry of Health and Long Term Care priority for improvement 	<ul style="list-style-type: none"> • reduced numbers of non urgent cases presenting in emergency departments • Improved triage and admission processes • Improved access to hospital services • Improved access, coordination and integration of services
Chronic Disease Management and Prevention	<ul style="list-style-type: none"> • Health system designed for acute care • Chronic disease associated with high costs • Aging population leading to higher demand 	<ul style="list-style-type: none"> • Improved partnerships leading to increased access to services • Enhanced continuity of care and improved system processes • Prevention strategies to delay onset and reduce progression of disease • Skills and supports focused on self management for patients and families
Mental Health and Addictions	<ul style="list-style-type: none"> • Long wait times for patients • People in need not receiving mental health and addictions services • Gaps in services 	<ul style="list-style-type: none"> • Improved linkages among health service providers • Reduce in non urgent emergency department visits • Programs to address service gaps
Health Equity	<ul style="list-style-type: none"> • Variations in health status and access to care • Certain communities in Central LHIN are at greater risk of chronic disease 	<ul style="list-style-type: none"> • More equitable access to health care in all Central LHIN communities • Increased outreach and community engagement to target populations

Central LHIN

Central LHIN Planning Areas

As one way to aid in our planning at a local level, Central LHIN has divided its geography into seven planning areas. In much the same way as LHIN boundaries are for administrative purposes only, our planning areas represent no barrier to receiving services in any part of our LHIN.

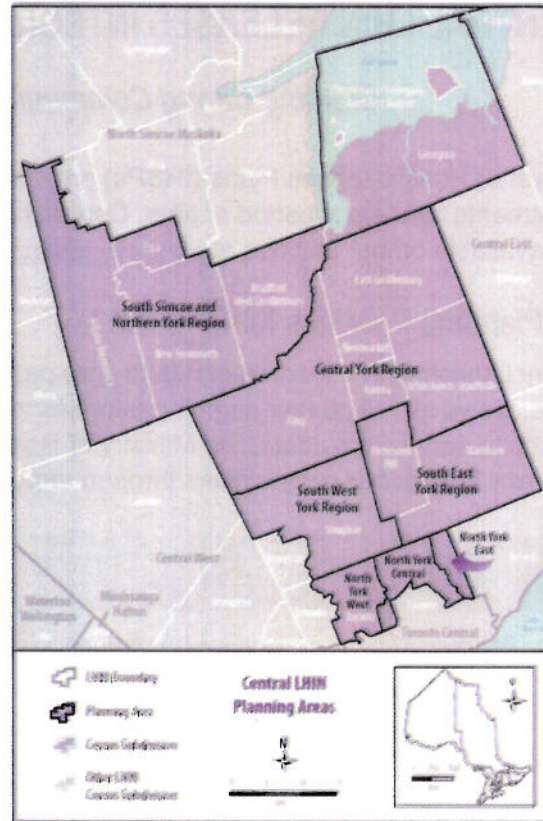
Key Population Trends

What we learned about our LHIN through our 2008 Health Service Needs Assessment and Gap Analysis project laid the foundation for our IHSP 2010-2013.

We are growing – our LHIN is the most populous and one of the fastest growing LHINs in Ontario.

We are aging – we anticipate an increase of 40 % in the number of seniors aged 65+ residing in our LHIN over the next 10 years.

We are diverse – our LHIN has the highest proportion of immigrants in the province, and 37 % of our residents are members of visible minority groups – almost twice that of Ontario at 20%.



Central LHIN Population Factors by Planning Area

	Ontario	Central LHIN	South Simcoe and Northern York Region	Central York Region	South East York Region	South West York Region	North York West Region	North York Central Region	North York East Region
Total Population 2008	12,986,332	1,651,681	113,257	204,207	465,683	230,536	237,884	276,973	123,141
% of LHIN Population in Planning Area			7%	12%	28%	14%	14%	17%	7%
% Population Aged 65+	14%	13%	11%	11%	10%	9%	15%	17%	14%
% Population Visible Minority	23%	42%	5%	9%	52%	23%	50%	38%	56%
% Population Immigrants	23%	48%	14%	21%	54%	45%	59%	56%	63%
% Population Francophone	4%	1%	1%	2%	1%	1%	1%	1%	1%
% Population Aboriginal	2.0%	0.4%	1.4%	0.8%	0.4%	0.1%	0.4%	0.2%	0.2%
% Population English Mother Tongue	68%	50%	88%	84%	42%	48%	43%	46%	42%
% Low Income Families	11%	9%	7%	5%	5%	4%	20%	13%	15%
% Single Parent Families	15%	15%	13%	12%	12%	10%	27%	17%	19%
% Population Aged 20+ with less than HS Education	25%	22%	28%	17%	19%	23%	39%	18%	18%

Source: KPMG Central LHIN Health Service Needs Assessment and Gap Analysis 2008

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