

Northwestern Ontario Integrated Care Working Group

Key Messages Document

Summary of November 8, 2021 Meeting:

1. The 'Northwestern Ontario Integrated Care Working Group' met on November 8. The objectives of the meeting were to:
 - Prepare for upcoming community-level emerging Ontario Health Team co-design sessions
 - Advance confirmed directions and next steps
2. The Working Group Terms of Reference for Phase 2 deliverables were discussed. Working Group members had shared the draft Terms of Reference with members of their respective networks. The following feedback was brought forward and will be incorporated in the final Terms of Reference:
 - Acknowledge focus on Indigenous, Metis and Francophone populations
 - Incorporate consideration of social determinants of health
3. A call for Expressions of Interest (EOI) was sent out to Primary Care Providers to seek those interested in being a co-lead on the Northwestern Ontario Integrated Care Working Group. The Working Group received a number of EOIs. The Working Group endorsed having one Primary Care Provider Co-Lead and one Primary Care Provider standing member - one will be a physician and one will be a Nurse Practitioner. The Working Group members will review the full package of EOIs and vote by email. The successful individuals will be invited to the next Working Group meeting.
4. Community-level sessions are being scheduled to bring partners together within the proposed Ontario Health Team communities to move to the next step – to confirm willing partners and to identify opportunities to work together that will improve care for the people within your communities. Three virtual sessions are being scheduled (for each emerging OHT) over the weeks of November 29 to December 17. The focus of these sessions is to:
 - Discuss how partners, Indigenous and non-Indigenous, will commit to working together toward systemic change and reconciliation.
 - Identify committed partners that are interested in proceeding with a partnership focused on improving care for the people within their communities.
 - Confirm process to proceed with an Ontario Health Team Expression of Interest.

All Ontario Health-funded health and human services providers, Indigenous partners/providers, Primary Care Providers and patient/client/resident/caregivers are invited to these sessions. Given that the initial invite will not reach all partners, those that do receive the invite are encouraged to share the invite with anyone that may be missing or flag to Kaleigh Demeo anyone that should be included.

The proposed OHT model is not finalized. These sessions also present opportunity to refine the model and partnerships.

A session with regional specialized service providers is also being scheduled to discuss how to ensure coordination and alignment of regional programs with local OHTs.

5. Discussions are advancing related to the next steps that were identified at the October 13 Indigenous engagement session. It was recommended at the October 13 session to “develop a written statement/MOU that states the relationship and how we will work together – common goals, principles for working together, commitments, etc.” A call out for volunteers to develop the statement/MOU was sent in follow up to the October 13 session. Those that volunteered will meet on November 10 to advance the work. Any others interested in being part of this work are encouraged to reach out to Jessica Logozzo at any time. The work will be shared broadly and transparently.
6. Jessica Logozzo and Jack Christy have been approached by researchers at Trillium Health Partners to be part of a Canadian Institute for Health Research (CIHR) grant opportunity entitled: “*Wider Health Impacts of COVID-19 on Patients with Cancer and Multiple Comorbidities: A Parallel Mixed-Methods Study*”. The study seeks to identify optimal cancer care models of care as we move into the COVID-19 recovery period. The Working Group endorsed a letter of support for this study.

7. The Working Group will meet again in December.

Key Messages – November 8, 2021:

1. The 'Northwestern Ontario Integrated Care Working Group' (Working Group) met on November 8, 2021 to prepare for upcoming community-level co-design sessions and advance the Working Group's key directions.
2. Community-level sessions are being scheduled in November/December, including partners from each of the emerging/proposed OHTs. The purpose of these sessions is to: discuss how Indigenous and non-Indigenous partners will commit to working together toward systemic change and reconciliation; identify committed partners that are interested in proceeding with a partnership focused on improving care for the people within their communities; and, confirm process to proceed with an Ontario Health Team Expression of Interest. The target remains to have the OHT Expressions of Interest submitted to the Ministry by December. Pending review from the Ministry, the full application process will be completed over January/February 2022, with the aim to have full approval of OHTs across the North West by March 2022. *NOTE: these timelines are solely intended to keep the discussions advancing and are not intended to rush any of the important relationship building steps that will need to take place in parallel and will extend well beyond any preliminary timelines/milestones that are set in this initial process.*

Summary of October 18, 2021 Meeting:

1. The 'Northwestern Ontario Integrated Care Working Group' met on October 18. The objectives of the meeting were to:
 - Debrief on recent stakeholder engagement sessions and key takeaways
 - Advance our confirmed directions and next steps
2. A number of engagement sessions were held over the past month. The key take-aways from these sessions are summarized below:
 - Patients/Clients/Residents/Families – September 29
 - Overall, agreement that the provincial Declaration of Values is well done and needs to be implemented locally.
 - Need to emphasize principles of equity, respect, diversity and accountability. Need to focus on marginalized and/or under-represented groups, including Indigenous.
 - Participants recommend that providers and OHTs adopt the Declaration of Values locally – need OHTs to be accountable for embedding in everything they do – OHTs and individual organizations (i.e. post publically and commit to living the values; incorporate into quality metrics). Suggest to engage patients/people locally, ongoing (PFAC want to lead/be involved!)
 - Indigenous partners – October 13
 - Overall, agreement from those engaged in discussion that we need to move forward, together, with acknowledgement that...
 - We need to address systemic change in the system
 - We need to building meaningful relationships first – move from reactive to proactive
 - We need to address change at a policy level, as well as from the ground up (commitment at leadership level and education/involvement of front-line staff)
 - We need direct engagement with Indigenous people (be present, listen, hear the difficult stories)
 - We need to acknowledge Metis
 - Next steps include:
 - Include Indigenous partners in local OHT discussions, from the start
 - Develop a written statement/MOU that states the relationship and how we will work together – common goals, principles for working together, commitments, etc. We need to embrace and incorporate ceremony.
 - Follow up meeting; with time to reflect
 - Engage with NAN and AN and their Chiefs Councils – address resolutions that have been made
 - Invite federal partners to the discussion
 - Thunder Bay District Mental Health and Addictions Network – October 13
 - Health Human Resources (HHR) needs to be looked as a system-level issue; as hospitals do their work, we need to think about MHA as a system impact. Identify HHR as a regional enabler.
 - Agree with 'transitions in care' as a priority. Need community/hospital partnerships and demonstration projects to address.
 - Need a 'collective response' – we have a 'collection of programs' not a system – build the 'system' needs to be the priority.
 - Equity – needs to be more visible and needs to be measured. Need to ensure that we engage vulnerable populations, including those that are experiencing homelessness, in a meaningful way.
 - Nurse Practitioners – October 14
 - Challenges/opportunities that need to be addressed:
 - Integration of EMRs (acute, LTC, Primary Care) and sharing of information (improve consent processes)
 - Access to services
 - Increase of NPs to support increased access to primary care services (attachment)
 - Mentoring/coaching of new practitioners
 - Eliminating barriers to NP practice
 - Next steps:
 - Share summary of discussion – invite further reflections
 - Include NPs in Primary Care Provider Co-Chair Expression of Interest process
3. The Working Group endorsed the updated Terms of Reference for their work, which will see the Working Group evolve to support three strategic priorities (below), as well as supporting enablers (digital/HIS and data/population health approaches), related to integrated care in the North West:

1. Engagement
2. Regional maturity of integrated care models (OHTs)
3. Transitions in care (focus on MHA)
4. The Working Group endorsed the Expression of Interest process to identify a Primary Care Provider to join in a formal leadership role. The call out will go out across the entire North West region by October 22. The goal is to have a Primary Care Provider Co-Lead in place by December.
5. Community-level sessions will be held including partners from each of the emerging/proposed OHTs (1. Sioux Lookout/Red Lake/Dryden; 2. Thunder Bay/Nipigon/Greenstone; and, 3. Marathon/Terrace Bay/Manitouwadge/Greenstone) in November and December with the intention to confirm committed partners wanting to move forward with an OHT Expression of Interest to the Ministry by December. Pending review from the Ministry, the full application process will be completed over January/February 2022, with the aim to have full approval of OHTs across the North West by March 2022.
6. Cindy Fedell, Regional Chief Information Officer provided an update on digital initiatives. The Digital Health Council (DHC) is still in the process of reviewing Health Information System (HIS) renewal and setting a direction. Evidence from industry analysts and experts was reviewed over the summer; as well, feedback and engagement with staff, clinicians, patients and family was collected. Engagement to date has been very good.
7. The Working Group will meet again in November.

Key Messages – October 18, 2021:

3. The 'Northwestern Ontario Integrated Care Working Group' (Working Group) met on October 18, 2021 to debrief on recent stakeholder engagement sessions and advance the Working Groups key directions, which include: engagement, regional maturity and supporting transitions in care; as well as, supporting enablers (digital/HIS and data/population health approaches) related to integrated care in the North West.
4. Community-level sessions will be held in November/December, including partners from each of the emerging/proposed OHTs (1. Sioux Lookout/Red Lake/Dryden; 2. Thunder Bay/Nipigon/Greenstone; and, 3. Marathon/Terrace Bay/Manitouwadge/Greenstone). The purpose of these sessions is to confirm committed partners wanting to move forward with an OHT Expression of Interest to the Ministry by December. Pending review from the Ministry, the full application process will be completed over January/February 2022, with the aim to have full approval of OHTs across the North West by March 2022.
5. Key engagement sessions held over the past month include: Patient/Resident/Client/Family/Caregivers (September 29); Indigenous Partners (October 13); and, Nurse Practitioners (October 14). All engagement sessions resulted in a desire from stakeholders to continue to be involved in the work going forward. Specific actions that have resulted from these engagements include:
 - A. Patient/Resident/Client/Family/Caregivers to be invited to the community-level sessions (for the 3 proposed/emerging OHTs) in November/December. OHTs will be asked to adopt the Provincial Declaration of Values; with consideration of feedback from the North West Patient/Resident/Client/Family/Caregivers session.
 - B. Indigenous partners will be included in local OHT discussions, from the start. A written statement/MOU that states the relationship and how we will work together will be developed – including common goals, principles for working together, commitments, etc.
 - C. A call for Expressions of Interest will be sent to Primary Care Providers across the North West to identify a Primary Care Provider (Nurse Practitioner or Physician) to join the NWOIC Working Group in a formal leadership role.

Summary of September 13, 2021 Meeting:

8. The 'Northwestern Ontario Integrated Care Working Group' met on September 13. The objectives of the meeting were to:
 - Debrief on recent stakeholder engagement sessions and key takeaways
 - Advance our confirmed directions
 - Share updates re: regional digital strategy
9. Two Primary Care Engagement Sessions took place over the summer (1. Primary Care Physicians in the City of Thunder Bay – July 20; and, 2. Physician Summer School – September 10). These sessions have been successful in building awareness and commitment to OHTs (and other regional initiatives, i.e. HIS renewal). Two key takeaways from these sessions include: need for better interconnectedness and information sharing; and, request for formal clinician leadership in OHT work (with remuneration).
10. The Working Group will evolve to support three strategic priorities (below), as well as supporting enablers (digital/HIS and data/population health approaches), related to integrated care in the North West:
 4. Engagement
 5. Regional maturity of integrated care models (OHTs)
 6. Transitions in care
11. The Working Group agreed on a proposed resource model – including Project Management, Decision Support and Facilitation – that will be required to support regional and local OHT advancement. Discussions will continue with OHN re: alignment of their resources to support efforts, and funding opportunities will be pursued to try to secure these resources.
12. The Working Group endorsed having a triad leadership model (Administrative Lead, PFA Lead and Primary Care Provider Lead) for the regional Working Group. An Expression of Interest process will be initiated to identify a Primary Care Provider to join in a formal leadership role (with note that compensation model is pending), to ensure fair process. Call out will go out across the entire North West region.
13. The following engagement sessions were confirmed
 - Patient/Client/Resident/Family Session – scheduled: September 29 (7:00 – 8:30 PM EST)
 - Indigenous Engagement Session – proposed: October 13 (2:00 – 4:00 PM EST)
 - Regional Session – proposed: October 20 (12:00 – 1:30 PM EST)
 - NP Session – proposed: October 6 (12:00 – 1:00 PM EST)
 - Primary Care Provider Session – proposed: October 27 (12:00 – 1:00 PM EST)
14. The Working Group endorsed a proposed process/timelines to move ahead to formalize the three proposed OHTs and regional structure, including further engagement of stakeholders. The target is to have the model approved by the Ministry by February 2022. Indigenous engagement and broader stakeholder engagement will further inform this proposed timeline and approach.
15. The Working Group has been pursuing funding opportunities to help support the priority areas identified by stakeholders through engagement and discussion. Some examples:
 - An application for the 'Ontario Health – Health Care Navigation System Patient Navigation' funding was submitted on September 10. Approval of the funding was received on September 13 to hire three resources (aligned to the three proposed OHTs) to support service and referral mapping. This will tie to a broader proposal (Integrated Virtual Care) that will request Patient Navigators and website support.
 - OHT Impact Fellows Phase 2 – will attract resources re: decision support/population health management.
16. Cindy Fedell, Regional Chief Information Officer provided an update on digital initiatives:
 - Two priorities have been identified; cyber security and Hospital Information System (HIS) renewal
 - Cyber security – a regional forum meets each month to share information. The Ministry of Health asked for applications to be a pilot site for a Regional Security Operations Centre Pilot; a proposal was submitted for the North West that included ~37 system partners.
 - HIS - the Digital Health Council has met twice and have outlined a three step process on whether or not to move forward with Meditech Expanse or go through the procurement process to look at other products. The Council is currently seeking input from frontline staff and patients. The HIS renewal process includes broader system partners (both in the Digital Health Council and in the linkage to the NWOIC Working Group) to ensure it enables system integration.
17. Partners have been provided the opportunity to attend the North American Conference on Integrated Care – 12 seats have been allocated by the Ministry of Health and will be distributed to Working Group members, and broader partners as available.
18. The Working Group will meet again in October.

Key Messages – September 13, 2021:

6. The 'Northwestern Ontario Integrated Care Working Group' (Working Group) met on September 13, 2021 to debrief on recent stakeholder engagement sessions, advance the Working Groups key directions, and share updates related to the regional digital strategy.
7. The Working Group endorsed next steps including:
 - A. Evolve the Working Group to oversee three strategic priorities (1. Engagement, 2. regional maturity, and 3. transitions in care), as well as support enablers (digital/HIS and data/population health approaches), related to integrated care in the North West.
 - B. Implement a triad leadership model (Administrative Lead, PFA Lead and Primary Care Provider Lead) for the regional Working Group.
 - C. Continue stakeholder engagement – including Patients/Clients/Residents/Families, Indigenous, Nurse Practitioners, Primary Care Providers.
 - D. Continue to advance the three proposed OHTs and regional structure, including further engagement of stakeholders.
 - E. Pursue funding opportunities to help support the priority areas identified by stakeholders through engagement and discussion (i.e. Patient Navigation/transitions in care).
8. The Working Group will meet again in October to begin work on the priorities identified.

Summary of June 28, 2021 Meeting:

1. The 'Northwestern Ontario Integrated Care Working Group' met on June 28. The objectives of the meeting were to:
 - Debrief on recent stakeholder engagement sessions and key takeaways
 - Confirm next steps based on stakeholder feedback
 - Obtain approval on Engagement Summary document for distribution to engagement session participants and posting on website
2. Over May and June, seven engagement sessions were held, including: 101 participants, 22 Working Group members involved/leading and 13 communities represented. The key themes from these sessions included:
 - Overall, proposed model and Vision is 'directionally right' – no objections to the proposal model or Vision, though, still many outstanding questions that will need to be answered as the work proceeds
 - Continued engagement is necessary and getting more partners engaged will be key to success
 - Need to get local stakeholders to the table – utilize existing structures (i.e. local service delivery/planning tables to get people engaged) and leverage local leaders so it is meaningful
 - Physician and clinician engagement will be critical
 - Need a parallel Indigenous-led process, that respects the integrated services that Indigenous providers provide and ensures that Indigenous peoples needs are met in a culturally sensitive way
 - Local care delivery and autonomy needs to be protected in a regionally integrated model
 - Confirmed many areas where we can work together as system partners to improve the system – locally and regionally
 - Regionally, we should begin working together to address key system enablers – digital, data & information sharing, transitions in care (between regional and local care, as well as hospital and community), Mental Health and Addictions, transportation, etc.
3. Based on the feedback, the Working Group endorsed the following next steps:
 - I. Host PFAC Engagement Session to develop draft Patient/Person Declaration of Values (September 2021)
 - II. Host Regional Engagement Session (September 2021) – to share engagement session themes and next steps; confirm our shared principles and the Patient/Person Declaration of Values to guide regional efforts; and, launch regional and local work
 - III. Launch region-wide parallel Indigenous-led process (September 2021) - invite all Indigenous stakeholders engaged to date to determine “*what does a parallel process look like that respects the integrated services that Indigenous providers provide and ensures that Indigenous peoples needs are met in a culturally sensitive way?*”
 - IV. Launch evolved Northwestern Ontario Regional Integrated Care Working Group (October 2021) – to advance regional system priorities:
 - Indigenous engagement (advancing a parallel process of engagement and system development)
 - Data & information (includes service mapping, and eventual population health data management); advise on Regional Health Information System renewal
 - Transitions in care; particularly between regional and local care; Mental Health and Addictions as a regional service planning priority

Working Group will also support the following objectives/functions:

 - Communication and engagement
 - Information sharing across OHTs
 - Facilitating connection between regional specialized providers and OHTs/local models, to ensure effective planning and service provision (where necessary in early stages of model implementation/refinement)
 - V. Launch local integration/OHT work (October 2021) - develop OHT Planning Tables around the proposed integrated models/OHT (Dryden/Red Lake/Sioux Lookout; Thunder Bay/Nipigon; Marathon/Terrace Bay/Manitouowadge; and, Geraldton – TBD)

Key deliverables will include identification of: Vision; population focus (Year 1 and at maturity) *Mental Health and Addictions and Digital as an overarching regional priority; team/partners; collaborative Decision Making Models; transformation opportunities/plans; and, implementation plans.
4. The Engagement Session summary report will be shared with all session participants and posted to the website (www.nwoic.ca) to ensure information has been captured accurately and to encourage further reflections and feedback.

- Some additional engagement activities are scheduled over July, including primary care engagement within the City of Thunder Bay.
5. The Working Group will pause meetings over the summer to support an important period of rest and stabilization. The Working Group will meet again in September to begin work on the priorities identified.

Key Messages – June 28, 2021:

1. The 'Northwestern Ontario Integrated Care Working Group' (Working Group) met on June 28, 2021 to debrief on recent stakeholder engagement sessions and key takeaways, as well as to confirm next steps based on stakeholder feedback.
2. The Working Group endorsed next steps including:
 - A. Host PFAC Engagement Session to develop draft Patient/Person Declaration of Values (September 2021)
 - B. Host Regional Engagement Session (September 2021)
 - C. Launch region-wide parallel Indigenous-led process (September 2021)
 - D. Launch evolved Northwestern Ontario Regional Integrated Care Working Group (October 2021) – to advance regional system priorities
 - E. Launch local integration/OHT work (October 2021) – to formalize OHT applications
3. The Working Group will pause meetings over the summer to support an important period of rest and stabilization. The Working Group will meet again in September to begin work on the priorities identified.

Summary of May 10, 2021 Meeting:

1. The 'Northwestern Ontario Integrated Care Working Group' met on May 10. The objectives of the meeting were to:
 - Discuss ongoing stakeholder feedback
 - Discuss updated Communications and Engagement Plan – specifically, content for stakeholder/community-level webinars in May and June, as well as feedback from ongoing Indigenous stakeholder engagement
2. Members that were in attendance provided an update on the engagement and communication they have completed since the last meeting. All feedback received to date continues to be supportive of the directions of the Working Group. Some questions have been raised related to governance. Stakeholders look forward to more focused engagement.
3. The Working Group endorsed the details for engagement with community-level stakeholders. Sessions will be led by Working Group members and Co-Chairs and will include representation from Ontario Health.

The following (virtual) engagement sessions have been scheduled:

- Patient Family Advisors – May 19 (6:30 – 7:30 CST; 7:30 – 8:30 PM EST)
- Red Lake/Dryden/Sioux Lookout stakeholders – May 25 (3:00 – 4:00 CST; 4:00 – 5:00 EST)
- Kenora stakeholders – May 26 (3:00 – 4:00 CST; 4:00 – 5:00 EST)
- Thunder Bay/Nipigon stakeholders – May 27 (3:30 – 4:30 CST; 4:30 – 5:30 EST)
- Marathon/Terrace Bay/Manitouwadge/Geraldton stakeholders – May 31 (3:30 – 4:30 CST; 4:30 – 5:30 EST)
- Fort Frances/Emo/Rainy River/Atikokan stakeholders – June 3 (3:00 – 4:00 CST; 4:00 – 5:00 EST)
- Francophone stakeholders – June 9 (11:00 – 12:00 CST; 12:00 – 1:00 EST)
- Primary Care stakeholders – TBD

The goals of the sessions are:

- To share information regarding the work that is underway by the North West Regional Integrated Care Working (and broader partners)
 - To provide the opportunity for stakeholders to ask questions, provide feedback and begin a meaningful process of co-design
 - To talk about next steps to improve care across our region – including ideas for ongoing engagement and communication
4. Engagement with Indigenous stakeholders is ongoing. The following feedback has emerged (in addition to that shared at the previous Working Group meeting):
 - Need to address systemic issues first – equity, treatment of Indigenous individuals within the health care system, racism, etc. “Racism gets in the way of patient care”
 - If it's about systemic change, need to ensure there is engagement of non-status Indigenous individuals and urban Indigenous; this has been a gap
 - Previous engagement has been sub-optimal – first need to build trust
 - Opportunities noted:
 - Support for homeless population – can health services and housing working together to support client needs
 - Traveling health teams – to serve off reserve and homeless populations
 - Expansion of Indigenous Navigators
 - Need to acknowledge existing integrated specialized providers for Indigenous people; these need to 'interface' with other parts of the system, including any OHTs that emerge
 5. The Working Group supported the completion of application to have an Ontario Health Team (OHT) Fellow support the Northwestern Ontario Integrated Care work and deliverables.
 - The OHT Impact Fellows program places skilled evaluators and researchers directly within OHTs. During a year-long embedded fellowship, OHT Impact Fellows will support the implementation and evaluation of local priority projects and contribute to rapid learning and improvement.
 - Ontario Health has confirmed that the North West would be uniquely positioned to benefit from this opportunity. Applications are due in late May.
 6. The Working Group will meet again in June to discuss the findings from the engagement sessions. The evolved Working Group will begin their regional support work in September 2021.

Key Messages – May 10, 2021:

1. The 'Northwestern Ontario Integrated Care Working Group' (Working Group) met on May 10, 2021 to discuss stakeholder feedback and finalize details of the stakeholder engagement sessions.
2. The goals of the sessions are: to share information regarding the work that is underway by the Working Group (and broader partners); to provide the opportunity for stakeholders to ask questions, provide feedback and begin a meaningful process of co-design; and, to talk about next steps to improve care across our region.
3. Engagement sessions (virtual) are scheduled for late May and June with Francophone individuals, Patient/Client & Family Advisors, and partners within the proposed OHT/model groups. A session with Primary Care stakeholders is being scheduled. Engagement with Indigenous stakeholders is ongoing.
4. The Working Group will meet again in June to discuss the findings from the engagement sessions. The evolved Working Group will begin their regional support work in September 2021.

Summary of April 12, 2021 Meeting:

1. The 'Northwestern Ontario Integrated Care Working Group' (renamed at March meeting) met on April 12. The objectives of the meeting were to:
 - Discuss stakeholder feedback
 - Discuss updated Communications and Engagement Plan – specifically, website launch and stakeholder/community-level engagement sessions
 - Discuss next steps
2. Members that were in attendance provided an update on the engagement and communication they have completed since the last meeting. All feedback received to date continues to be supportive of the directions of the Working Group. Stakeholders look forward to more focused engagement.
3. The Working Group endorsed the approach and next steps for engagement with community-level stakeholders.

Engagement sessions (virtual) will be scheduled with the following stakeholder groups – primary care, Francophone individuals, Patient, Family Advisors, and partners within the proposed OHT/model groups.

The goals of the virtual sessions to be held in April/May are:

- To share information regarding the work that has been completed by the Northwestern Ontario Integrated Care Working Group (and broader partners)
 - To provide the opportunity for stakeholders to ask questions, provide feedback and begin a meaningful process of co-design
 - To discuss next steps to advance co-design across the region – including ideas for ongoing engagement and communication
4. The Communications and Engagement sub-group presented the final website design. The website is now live, and will officially be shared with stakeholders in preparation for the engagement sessions.

A final logo was selected to support a collective brand/voice and will be incorporated into the website design.
 5. Engagement with Indigenous stakeholders is ongoing. Preliminary themes from engagement to date include:
 - Openness to continued collaboration to meet the needs of communities
 - Suggest broader and ongoing engagement (i.e. Chiefs in Council meetings)
 - Integrated care needs to go beyond the four walls of any of the hospitals – need to build more infrastructure and capacity within the community to ensure access to care as close to home as possible
 - Need to ensure accountability to the community
 - Feedback related to care and services:
 - Challenges are not often related to the medical care that is provided; it's HOW people are treated that needs to be addressed
 - Virtual Care needs to be a priority
 - Need to address MHA service access in the North (and across the region)
 6. The Working Group will meet again in May to advance engagement work, as well as to do the preparatory work to move into the next phase of work; including:
 - Begin transition of evolved Working Group – develop draft Terms of Reference and Scope of Work for key activities (i.e. service and network mapping)
 - Determine with the Ministry what a 'flexible' application process for the North West can look like
 - Finalize plan for resources

Key Messages – April 12, 2021:

1. The 'Northwestern Ontario Integrated Care Working Group' (Working Group) met on April 12, 2021 to discuss stakeholder feedback and plan for upcoming stakeholder engagement sessions.
2. Engagement sessions (virtual) will be held in April and May with primary care, Francophone individuals, Patient, Family Advisors, and partners within the proposed OHT/model groups. The goals of the sessions are: to share information regarding the work that has been completed by the Working Group (and broader partners); to provide the opportunity for stakeholders to ask questions, provide feedback and begin a

meaningful process of co-design; and, to discuss next steps to advance co-design across the region. Engagement with Indigenous stakeholders is ongoing.

3. The website is now live, and will officially be shared with stakeholders in preparation for the engagement sessions. A logo has been selected to support a collective brand/voice.
4. The Working Group will meet again in May to advance engagement, as well as to do the preparatory work to move into the next phase.

Summary of March 15, 2021 Meeting:

1. The 'North West Regional Integrated Care Working Group' (Working Group) met on March 15. The objectives of the meeting were to:
 - Discuss stakeholder feedback on preliminary recommendations
 - Review sub-group final recommendations; provide feedback and consider approval
 - Discuss next steps – including continued communications and engagement
2. Members that were in attendance provided an update on the engagement and communication they have completed since the last meeting. Many important questions have been raised and will be logged and addressed as the work proceeds. All feedback received to date continues to be supportive of the directions of the Working Group. Due to the current pandemic situation, the Working Group acknowledged that feedback has been limited and, as such, confirmed that more time is needed to engage in a meaningful way.
3. The Working Group supported the Sub-group recommendations related to proposed resource requirements and next steps, including:
 - Continued engagement
 - Address outstanding engagement activities (i.e. webinars and more focused engagements with key stakeholder groups – including Indigenous stakeholders)
 - Begin transition of evolved Working Group – develop draft Terms of Reference and Scope of Work for key activities (i.e. service and network mapping)
 - Determine with the Ministry what a 'flexible' application process for the North West can look like
 - Finalize plan for resources
4. At the request of the Working Group, the Communications and Engagement sub-group has proceeded to secure a vendor to develop a website for this work. Shout Media has been awarded the contract and will have a website launched by early April 2021, to support engagement and communication activities. Funding for the website is being provided through the Small Hospital Transformation Fund.

A plan for Indigenous engagement has been developed in consultation with the Working Group and Indigenous Engagement advisors from both TBRHSC and SJCG. Engagement has started and will continue through March/April, and beyond.

Draft logos were developed for the Working Group to consider to support a collective brand/voice. Based on feedback, additional logo options will be developed that are reflective of a cross-sectoral, whole system approach. The name "North West Ontario Integrated Care Working Group" will be used going forward.

5. The Working Group will meet again in April and possibly May to advance engagement work, as well as to do the preparatory work to move into the next phase of work.

Key Messages – March 15, 2021:

1. The 'North West Regional Integrated Care Working Group' (Working Group) met on March 15, 2021 to discuss stakeholder feedback and finalize recommendations and next steps.
2. Recommendations from the three Sub-groups were supported, including next steps for engagement and securing resources to support the work.
3. Due to the current pandemic situation in the region, more time will be spent on engagement through April and May, to allow for meaningful discussion and feedback. Engagement with Indigenous stakeholders will continue. Additional engagement activities will be scheduled – including primary care, Francophone individuals, Patient, Family Advisors, etc. Webinars will also be scheduled with partners within the proposed OHT groups to discuss next steps.
4. The Working Group will meet again in April and possibly May to advance engagement work, as well as to do the preparatory work to move into the next phase of work. The Working Group, and associated activities/web presence, will now be known as the Northwestern Ontario Integrated Care Working Group.

Summary of February 8, 2021 Meeting:

1. The 'North West Regional Integrated Care Working Group' (Working Group) met on February 8. The objectives of the meeting were to:
 - Discuss stakeholder feedback
 - Review draft work to date and recommendations from each of the three sub-groups; to provide feedback and directions
 - Confirm next steps regarding the communication and engagement plan – including targeted Indigenous engagement and website development
2. Members that were in attendance provided an update on the engagement and communication they have completed since the last meeting. All feedback received to date continues to be supportive of the directions of the Working Group.
3. Each sub-group presented their work to date and any draft recommendations they had, for discussion and feedback from the Working Group membership.

- The OHT/Model Coverage Sub-group is responsible to *make a recommendation to the North West Regional Integrated Care Working Group on what a potential Ontario Health Team (or other local integrated models) coverage plan can look like across the North West to aid in local planning efforts.*

The Sub-group presented an overview of types of data they have looked at (or plan to look at), a draft set of principles used to inform potential coverage models and some examples of what potential coverage models could look like.

- The Regional Services Model Sub-group is responsible to *make a recommendation for a coordinated approach to planning regional highly-specialized services to support local OHT planning (and other more culturally appropriate models).*

The Sub-group presented a draft working definition for 'regional specialized services' along with draft recommendations on how to coordinate planning for these services – including leveraging existing networks and continuing the Regional Integrated Care Working Group to support services that require regional coordination. It was noted that this could be thought of potentially as a 'regional' Ontario Health Team.

Overall, the Working Group was supportive of the directions of each of the sub-groups. The next step will be to share broadly the draft work and recommendations to get feedback from broader stakeholders. The Communication and Engagement Sub-group will support the development of a package of materials that can be easily shared, including a clear 'narrative' on how the recommendations have been developed and how they fit together. The Working Group agreed on one of the examples for the OHT/Model Coverage Sub-group that should be used as the preliminary recommendation for engagement.

4. At the request of the Working Group, the Communications and Engagement sub-group developed a proposal for a website where information can be hosted and accessed broadly. The Working Group endorsed proceeding with the development of the website – funding is to be determined.

A plan for Indigenous engagement has been developed in consultation with the Working Group and Indigenous Engagement advisors from both TBRHSC and SJCG. A list of Indigenous stakeholders has been developed and Working Group members will be assigned to lead this engagement. Engagement protocols have also been shared to support members.

Working Group members were asked to express their interest in a 'Digital Health Council' which is being formed to advance Health Information System renewal; being initiated by the North West Region Hospitals, but taking a broader system perspective.

5. All sub-groups will begin to meet the week of February 15 to further develop their recommendations. The Working Group will meet next in March to review final deliverables and recommendations, as well as to discuss feedback from broader stakeholder groups.

Key Messages – February 8, 2021:

1. The 'North West Regional Integrated Care Working Group' (Working Group) met on February 8, 2021 to discuss the preliminary work and draft recommendations from each of the Sub-groups.
2. Recommendations from the three Sub-groups were supported and will be shared with broader stakeholders in February/March for feedback. This includes examples of potential OHT/Integrated model options, a draft working definition of 'regional specialized services' and a draft approach for coordinating regional services.
3. Working Group Members will engage Indigenous communities beginning in February/March.
4. The Working Group will meet in March to review final deliverables, recommendations and feedback from broader stakeholder groups.

Summary of January 11, 2021 Meeting:

1. The 'North West Regional Integrated Care Working Group' (Working Group) met on January 11. The objectives of the meeting were to:
 - Discuss stakeholder feedback
 - Finalize Terms of Reference and sub-groups' scope of work
 - Approve Communication and Engagement Plan
 - Discuss data and provincial guidance that will inform the Working Group deliverables/recommendations
2. Members that were in attendance provided an update on the engagement and communication they have completed since the last meeting. All feedback received to date has been positive and supportive of the directions of the Working Group.
3. Members approved the Terms of Reference, as well as the deliverables and work plans of the sub-groups (1. Communications and Engagement; 2. OHT/Model coverage; and, 3. Regional Services Model). The sub-groups will begin to meet the week of January 18 to complete these deliverables.
4. The Communications and Engagement sub-group met on January 4 to develop a draft Communication and Engagement plan (attached for reference). The plan will ensure timely and transparent sharing of information related to the activities of the Working Group (i.e. key messages, meeting materials, working products, etc.) – among Working Group members and with broader system partners. The Working Group will ensure information is shared in a way that those who are not part of the Working Group can keep informed, ask questions and provide feedback on the work/deliverables.

The draft plan was presented at the Working Group meeting and approved. The sub-group will be responsible to implement and evaluate the plan.

A key part of the plan is to develop a website where information can be hosted and accessed broadly – the Working Group endorsed this and the sub-group will develop a plan to implement.

Ongoing discussions are underway to build and implement robust engagement mechanisms with key stakeholder groups, including Indigenous, Francophone and Primary Care partners.

5. The Working Group reviewed and discussed data and guidance documents that have been provided by the Ministry of Health and the Ontario Hospital Association that may support the work of the group (specifically, 'North West Attributed Population Profile' provided by Ministry of Health; and, 'A Principled Approach to Advancing Specialized Health Services Through Ontario's Integrated Care Planning' November 2020 produced by the Ontario Hospital Association).

The Working Group agreed that while there are limitations of these guidance documents in terms of scope and applicability to the North West, they are a useful starting point from which to build and can be useful in supporting the deliverables of the Working Group. These will be reviewed further by the sub-groups as they develop recommendations.

The Working Group agreed that it will be important to leverage existing data or work that has been completed to date – there is no need to start from scratch. The Working Group also agreed that when it comes to data to inform the current scope of work, it will be important to focus on only what will be helpful and necessary, and not to get overwhelmed by the large magnitude of data that may be available.

6. All sub-groups will begin to meet the week of January 18 to complete their draft deliverables. The Working Group will meet next on February 8 to review draft deliverables and recommendations, as well as to discuss feedback from broader stakeholder groups.

Key Messages – January 11, 2021:

1. During the January 11 meeting, the 'North West Regional Integrated Care Working Group' (Working Group) reviewed and approved the Terms of Reference, as well as the Communication & Engagement Plan to support the Working Group.
2. The Communication & Engagement plan ensures timely and transparent sharing of information among Working Group members and with broader system partners. Stakeholders will be able to access information, ask questions and provide feedback on the work/deliverables via a website to be developed.

3. The Ministry of Health and the Ontario Hospital Association provided data and guidance documents that may support the Working Group's work. While there are limitations in terms of scope and applicability to the North West, we will build on the documents to support the deliverables of the Working Group
4. The Working Group will meet February 8 to review draft deliverables and recommendations (as developed by the sub-groups), as well as to discuss feedback from broader stakeholder groups.

Summary of December 7, 2020 Meeting:

1. The 'North West Regional Integrated Care Working Group' (Working Group) met on December 7. The Working Group consists of approximately 30 cross-sectoral and cross-geography system partners.

This was the first meeting of the newly formed Working Group that will meet over the next four months to make recommendations on the following:

- What a local Ontario Health Team (or other more culturally appropriate model of care) coverage model may look like across the North West;
- How we can take a coordinated approach to planning for regional specialized services; and,
- What regional-level resources/supports may be needed to support this work or proposed model going forward.

The Working Group will also play a role in supporting information and knowledge sharing across the region, as local Ontario Health Teams (or other models of integrated care) emerge. The Working Group will ensure transparency and broad communication and engagement as this work proceeds. The Working Group will prepare written key messages after each meeting summarizing their work to be provided to the respective organizations and/or existing networks, as well as to broader system partners that may not be at the table.

2. The December 7 meeting objectives included:
 - Launch North West Regional Integrated Care Working Group;
 - Finalize Terms of Reference;
 - Confirm approach – including work plan and sub-groups for completion of key deliverables; and,
 - Confirm communication and engagement plan.
3. The Working Group reviewed and discussed the Terms of Reference. Members were asked to provide additional feedback by email. These will be finalized and approved at the next meeting.
4. The Working Group discussed and approved a work plan to achieve their deliverables over the next four months. The approach includes:
 - Monthly Working Group meetings from January to March.
 - Sub-groups meet in between Working Group meetings to do the more detailed work to develop recommendations that can be reviewed by the broader Working Group. Three sub-groups, comprised of volunteers from the Working Group and possibly other stakeholders, will advance work in the following areas: 1. Communications and Engagement; 2. OHT/Model coverage; and, 3. Regional Services Model.
 - Following each Working Group meeting, members will bring key messages and discussions to networks and organizations to ensure transparency and gather feedback. They will bring the feedback gathered back to the Working Group at each meeting to ensure feedback is considered in recommendations.
5. The Working Group will meet next in early January 2021. Prior to the next meeting, sub-groups will be formed and will confirm their individual work plans. The Communication and Engagement sub-group will meet to develop a draft communication and engagement plan, which will include ways to engage Indigenous partners, Primary Care and other key stakeholders.

Key Messages – December 7, 2020:

1. The newly formed 'North West Regional Integrated Care Working Group' met on December 7. The Working Group consists of cross-sectoral and cross-geography system partners that will meet over the next four months to make recommendations on the following: what a local Ontario Health Team (or other more culturally appropriate model of care) coverage model may look like across the North West; how to take a coordinated approach to planning for regional specialized services; and, what regional-level resources/supports may be needed to support this work or proposed model going forward.
2. The Working Group discussed and approved a work plan to achieve their deliverables over the next four months, which includes monthly Working Group meetings and sub-groups that will meet in between Working Group meetings to do the more detailed work to develop recommendations. Sub-groups will include: 1. Communications and Engagement; 2. OHT/Model coverage; and, 3. Regional Services Model.

3. Following each Working Group meeting, members will bring key messages and discussions to their respective networks and organizations to ensure transparency and gather feedback. Members will bring the feedback gathered back to the Working Group at each meeting to ensure feedback is considered in recommendations.
4. The Working Group will meet next in early January 2021.

Summary of November 9, 2020 Meeting:

1. The 'North West OHT Self Assessment Working Group' met on November 9, 2020 for their final meeting.
2. The purpose of the meeting was to: continue information sharing and updates related to confirmed and evolving OHTs (i.e. All Nations Health Partners and Rainy River District OHTs); review feedback on Terms of Reference for the newly developed 'Regional Integrated Care Working Group'; and, finalize next steps to transition the Working Group.
3. Brian Ktytor from Ontario Health North attended the meeting and shared the following updates:
 - Effective November 16, Brian Ktytor will be the Interim Regional Lead, Ontario Health (North) and CEO, North West and North East LHINs. Given this new role, it is to be determined what his specific involvement in the Ontario Health Team planning will be.
 - He confirmed that Ontario Health North will continue to support Ontario Health Team planning and ensure alignment with Ministry directions. David Newman, eHealth Lead, will continue to be a resource to the group and provide expertise. These connections to Ontario Health North will ensure continued alignment and endorsement of the work of the Working Group, and to prevent any potential duplication of effort.
4. In advance of the meeting, members shared the draft Terms of Reference for the 'Regional Integrated Care Working Group' with respective networks for awareness and endorsement, as well as to confirm representatives from each network on the Working Group going forward. Overall there is support and eagerness to move forward with this work. The following is a high-level summary of the feedback that was received and discussed to date:
 - Specialized services considerations – while there is understanding that some specialized services will be in larger centres, need to ensure we do not want to lose sight of those that can be offered in smaller communities.
 - Communication and broader engagement – representatives have a responsibility to solicit input from and report back to the participating organizations they represent; not just once in a while, but regularly. Participating organizations need to have an informed voice at the table, even if they are not at the table.
 - Key stakeholders to be engaged – Indigenous stakeholders and physicians must be meaningfully involved. A plan will be developed to address these areas specifically.
 - Representation and equity of membership – need to ensure equity of membership, so that some individuals do not have more influence than others; and, need to ensure appropriate membership across large geography and diversity of members. Reminder that the Working Group is not a decision-making body; they will make recommendations.
5. The existing 'North West OHT Self Assessment Working Group' will be officially disbanded after this meeting and the new 'Regional Integrated Care Working Group' will begin monthly meetings (for a period of approximately four months) starting at the beginning of December 2020. **Members are asked to confirm membership from each network on the Working Group going forward – please send to Kaleigh Demeo (demeoka@tbh.net) by November 20. Interested members are also asked to volunteer to develop a specific plan to engage broader Indigenous stakeholders – please provide your name to Kaleigh Demeo by November 20.**

Key Messages – November 9, 2020:

1. The 'North West OHT Self Assessment Working Group' met on November 9, 2020 to: continue information sharing and; review feedback on Terms of Reference for the newly developed 'Regional Integrated Care Working Group'; and, finalize next steps to transition the Working Group.
2. Based on the feedback received from respective networks in advance of the meeting, there is overall support and eagerness to move forward with this work. The new Working Group will ensure feedback is addressed in their work going forward related to: specialized services, communication and engagement of other key stakeholders (Indigenous and Primary Care) and equity of membership.
3. The existing 'North West OHT Self Assessment Working Group' will be officially disbanded after this meeting and the new 'Regional Integrated Care Working Group' will begin monthly meetings (for a period of approximately 4 months) starting at the beginning of December 2020.

Summary of September 29, 2020 Meeting:

1. The 'North West OHT Self Assessment Working Group' met on September 29, 2020 after a lengthy pause due to the pandemic. The 'North West OHT Self Assessment Working Group' is the original group of partners that gathered to support a Northwest Ontario Health Team self assessment submission.
2. Prior to this meeting, the Working Group last met on March 9, 2020, at which time the following was discussed:
 - While the Northwest Ontario Health Team submission was not approved by the Ministry of Health, the Working Group agreed that there was benefit to the group continuing to come together to share information and support a regional approach to OHT planning.
 - The Working Group endorsed Jessica Logozzo, the new Executive Vice President, Regional Transformation and Integration to develop a draft Terms of Reference that would outline what the Working Group could/should focus on going forward to support OHT planning across the region. Dependent on the agreed scope, the membership of the Working Group would be revisited.
3. As such, the purpose of the September 29 meeting was to re-start discussions related to OHT planning across the North West, including review of a proposed Terms of Reference for the North West Regional Integrated Care Working Group (proposed name for the next iteration of the regional Working Group). The meeting also included updates related to the All Nations Health Partners OHT and the Rainy River District OHT, as well as from Ontario Health North. The key agreements from the meeting included:
 - Agreement on the draft Terms of Reference (purpose, scope and deliverables) for the North West Regional Integrated Care Working Group, with minor revisions
 - Agreement to share the draft Terms of Reference with respective networks for awareness and endorsement, as well as to confirm representatives from each network on the Working Group going forward.
 - Feedback is requested by October 30, and a follow up meeting will be scheduled for the first week of November to finalize the Terms of Reference and launch the work.
4. The proposed North West Regional Integrated Care Working Group is a time-limited (~4 months) group of system partners (cross geography, cross sectoral and cross lifespan), that will provide thought and recommendations on: how we may take a coordinated approach to planning for regional specialized services (regional highly specialized and district-based services); what regional-level resources/supports may be needed to support this regional and local work (i.e. Project Management, coordinated communication supports, data); and, what potential local OHT/integrated care model coverage may look like across the North West, to inform partners' planning efforts. The recommendations of this group are intended to inform the more concrete next steps for OHT planning across the region.
 - The Working Group will not limit thinking to OHTs as the only model of integrated care; rather, will ensure that all culturally appropriate models of care and system transformation efforts are considered.
 - The Working Group will function based on principles of collaboration, and as such will not have formal accountability to any one organization or structure. Each member will have accountability to their respective organization and/or existing sectoral or geographic networks that may already exist.
 - The Working Group will also play a role in supporting information and knowledge sharing across the region, as local OHTs (or other models of integrated care) emerge. The Working Group will ensure transparency and broad communication and engagement as this work proceeds. The Working Group will prepare written key messages after each meeting summarizing their work to be provided to the respective organizations and/or existing networks, as well as to broader system partners that may not be at the table.
 - The Working Group will comprise members to ensure a regional, cross sectoral, cross geography and cross life span approach. Each existing member of the 'North West OHT Self Assessment Working Group' is asked to bring the draft Terms of Reference to their respective networks for endorsement as well as to confirm representatives from each network on the new Working Group going forward. There are additional members that we will need to recruit to the Working Group that may not have been represented in the original Working Group (two stakeholder groups that have been noted as an example include: Indigenous partners and primary care).
 - Once the North West Regional Integrated Care Working Group is endorsed and membership confirmed, the 'North West OHT Self Assessment Working Group' will cease.

Key Messages – September 29, 2020:

1. The 'North West OHT Self Assessment Working Group' met on September 29, 2020 after a lengthy pause due to the pandemic. The main purpose of the meeting was to re-start discussions related to OHT planning across the North West, including review of a proposed Terms of Reference for the North West Regional Integrated Care Working Group (proposed name for the next iteration of the regional Working Group).
2. The group endorsed the Terms of Reference for the proposed North West Regional Integrated Care Working Group, which will be a time-limited group of system partners (cross geography, cross sectoral and cross lifespan), that will provide thought and recommendations on: how we may take a coordinated approach to planning for regional specialized services (regional highly specialized and district-based services); what regional-level resources/supports may be needed to support this regional and local work (i.e. Project Management, coordinated communication supports, data); and, what potential local OHT/integrated care model coverage may look like across the North West, to inform partners' planning efforts.
3. Members of the Working Group will share the draft Terms of Reference with respective networks for awareness and endorsement, as well as to confirm representatives from each network on the Working Group going forward. Feedback is requested by October 30, and a follow up meeting will be scheduled for the first week of November to finalize the Terms of Reference and launch the work.