



## BOARD REPORT

REPORT No.: 2022-24

MEETING DATE: APRIL 21, 2022

SUBJECT: TBDSSAB MEMBERSHIP IN AN ONTARIO HEALTH TEAM FOR THE DISTRICT OF THUNDER BAY

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### RECOMMENDATION

THAT with respect to Report No. 2022-24 (CAO Division), we The District of Thunder Bay Social Services Administration Board (TBDSSAB or the Board), endorse TBDSSAB's participation in the City and District of Thunder Bay Ontario Health Team (OHT);

AND THAT we authorize the Chief Administrative Officer to commit TBDSSAB as an OHT Signatory;

AND THAT except for any in-kind contribution or funding that is within the mandate and approved budget of the TBDSSAB, any contribution requested by the OHT or the Ministry of Health must be presented to the Board for approval.

### REPORT SUMMARY

To seek endorsement from the Board of Directors for The District of Thunder Bay Social Services Administration Board's (TBDSSAB or the Board) participation in the City and District of Thunder Bay Ontario Health Team (OHT).

### BACKGROUND

OHT's were announced by the Ministry of Health in 2019 as a new way of organizing and delivering care that is more connected to patients in their local communities.

System partners have been working together over the past 18 months to co-design a coordinated model of integrated care (including OHTs) for the North West. Partners have agreed to a model for the North West, which includes:

- Two approved OHTs – All Nations Health Partners OHT (Kenora) and Rainy River District OHT (Rainy River, Emo, Atikokan and Fort Frances)
- Two additional OHTs – City and District of Thunder Bay and Sioux Lookout/Red Lake/Dryden

- A Regional Specialized Services structure/OHT, which will ensure coordinated and seamless access to the full continuum of services across all OHTs in the North West.

A formal Expression of Interest for the two new OHTs and a Regional Specialized Services structure/OHT was submitted on February 16. The Ministry of Health provided approval on February 24 to proceed to the next stage, which is completion of a Full Application. Partners have been meeting over the month of March to complete the Full Application, which included important discussions related to who the team will collectively serve (the population they will focus on in Year 1, and at maturity), how the team will work together (leadership structures, principles and goals) and what they will begin to do to improve the health of the population (activities and implementation plans). As part of the process, system stakeholders/organizations have been able to consider involvement across a continuum, including: OHT signatory vs. a partner vs. an observer.

Work initially began to establish one OHT for the Northwestern Ontario catchment area to include the Districts of Kenora, Rainy River and Thunder Bay. As outlined above, in 2020 OHTs were approved for Kenora and Rainy River, a decision was then made to pursue OHT(s) for the remaining catchment areas in the Northwest, including for the Thunder Bay District. Work also continued on the establishment of a Regional Specialized Services Structure/OHT for the entire Northwest. The majority of the partner organizations involved in the planning are Health-funded agencies. The three Northwestern DSSABs, including TBDSSAB, have been represented at the table by the respective CAOs.

An emerging OHT has been identified as “City and District of Thunder Bay OHT” that would cover all of the Thunder Bay District.

## **COMMENTS**

System partners have achieved a significant milestone in the advancement of system integration and OHT development. The Full Application to become an OHT (for the two new OHTs) was submitted on March 22. As part of the review and approval process, a virtual site visit took place with the Ministry of Health the week of March 28 – this provided an opportunity for OHT Members to highlight collaborative relationships and to share the Vision and plans for how care will improve for the people we serve.

What has been proposed:

### **City and District of Thunder Bay OHT**

The City and District of Thunder Bay OHT is comprised of 27 signatories, along with six additional partners and observers. The OHT is inclusive of health and human service providers, from across the continuum of care and lifespan - this represents a new way of coming together to truly improve the health of the population by taking an approach that is inclusive of the social determinants of health. In Year 1, the OHT will focus on improving care, across the continuum of care, for those experiencing Mental Health and

Addictions challenges. Specific actions related to coordination of care, patient navigation and transitions of care have been identified for Year 1.

Overall, the OHT will be guided by the following Vision and principles:

Vision: To be a leading integrated care (health and human services) system, where partners work together to achieve the best outcomes and care experience for the people of the City and District of Thunder Bay.

Principles:

- Person and population focus – we will co-design a system that puts patients, clients, residents and their families at the centre of services and addresses the holistic needs of the population we serve.
- Equity – we will improve outcomes and service experiences for equity seeking groups and will critically examine and remediate the social determinants of health and how these disproportionately affect equity seeking groups.
- Value-creation – we will make decisions that will improve outcomes, experiences, access and sustainability. We will seek to simplify the system and address the root cause of challenges, rather than building in further inefficiency.
- Collaboration – we will work together as system partners knowing that we are better together and that no one of us can (or should) do it alone. We commit to acting as a system, by putting our organizational interests aside in order to put the best interest of the people we serve at the centre of all we do.
- Acceptance – we recognize and respect that each partner may have different skills and capacity but know that each adds value to the whole. No one person or community is more important than the other. We will create space for, and listen intently to, the diversity of voices and perspectives.
- Continuous improvement – we commit to always seeking to do better for the population we serve. We will aim for progress over perfection and will move courageously towards our Vision despite fears and unknowns.

OHT Members have committed to a decision-making structure that has equal voice of Indigenous and non-Indigenous organizations/partners, utilizes consensus-based decision-making and ensures there is opportunity for Indigenous-led resolution processes.

The OHT Members acknowledge that discussions amongst Indigenous and non-Indigenous organizations are ongoing, and the necessary engagement will take time and resources to continue to advance beyond current stages. The OHT Members commit to ensuring that OHT processes and governance structures respect First Nation jurisdiction and sovereignty as well as urban Indigenous people who live on territory and off territory (reserve), who are status, non-status, Inuit, and Métis. The OHT Members commit to being flexible to and supporting any parallel Indigenous-led health transformation processes. Prior to the formal advancement of the OHT, OHT Members commit to coming together in ceremony as Indigenous and non-Indigenous organizations to commit to meaningful, inclusive and reciprocal relationships based on

trust and transparency, governance, and commitments to addressing systemic racism and Truth and Reconciliation.

### **Regional Specialized Services Structure OHT**

The overarching Regional Specialized Services Structure OHT (coordinating across and supporting the four locally integrated OHTs) will ensure a coordinated approach for planning and delivering 'regional specialized services' that is required to ensure the full continuum of care is available to the OHT population. The regional structure will also support regional enablers (i.e., digital health, population health data/management, etc.) and will provide support and scale to the region for functions that are not reasonable and feasible to do at a local level. This will ensure coordination and consistency that better supports patient/client/resident care and ultimately improved population health and experiences.

#### What this means for TBDSSAB:

- advancement of partnerships with broader health and human services providers
- system integration for better health supports for the people in our communities, as close to home as possible
- ensures that TBDSSAB, as a signatory, is part of the planning process

### **STRATEGIC PLAN IMPACT**

This Report aligns with the Board's "Partnerships" strategic direction, specifically the strategic objective "Mental health and addiction services partnership system in place".

### **FINANCIAL IMPLICATIONS**



There have not been any financial impacts to date. All resources provided to complete the OHT work to date (including completion of the Full Application) have been contributed by partners in kind.

It is anticipated that there will be funding from the Ministry of Health to support OHT advancement. This has been flagged as a resource ask in the Full Application.

### **CONCLUSION**

It is concluded that TBDSSAB should endorse TBDSSAB's participation in the City and District of Thunder Bay OHT and that the CAO be authorized to commit TBDSSAB as an OHT Signatory.

**REFERENCE MATERIALS**Attachment #1 [City and District of Thunder Bay OHT membership list](#)#2 [Regional Specialized Services Structure OHT membership list](#)

PREPARED BY:	Bill Bradica, Chief Administrative Officer
SIGNATURE	
APPROVED BY	Bill Bradica, Chief Administrative Officer
SIGNATURE	
SUBMITTED BY:	Bill Bradica, Chief Administrative Officer

**City and District of Thunder Bay OHT Members**

Signatories	Partners	Observers
<ol style="list-style-type: none"> <li>1. Alpha Court Non-Profit Housing Corporation</li> <li>2. Alzheimer Society Thunder Bay</li> <li>3. Anishnawbe Mushkiki Aboriginal Health Access Centre</li> <li>4. Aurora/ Mountdale Clinic</li> <li>5. Canadian Mental Health Association Thunder Bay</li> <li>6. Children’s Centre Thunder Bay</li> <li>7. City of Thunder Bay (Inclusive of Pioneer Ridge Long-term Care and Superior North EMS)</li> <li>8. Crossroads Centre Inc.</li> <li>9. Dilico Anishinabek Family Care</li> <li>10. District of Thunder Bay Social Services Administration Board</li> <li>11. Fort William Family Health Team</li> <li>12. Geraldton District Hospital</li> <li>13. Hospice North West</li> <li>14. Marathon Family Health Team</li> <li>15. Nipigon District Family Health Team</li> <li>16. Nipigon District Memorial Hospital</li> <li>17. North of Superior Counselling Program</li> <li>18. North of Superior Healthcare Group</li> <li>19. North Shore Family Health Team</li> <li>20. North West Local Health Integration Network – Home and Community Care</li> <li>21. NorWest Community Health Centres</li> <li>22. Patient/Client/Resident Co-Chair, Northwestern Ontario Integrated Care Working Group</li> <li>23. People Advocating for Change Through Empowerment (PACE)</li> <li>24. Santé Manitouwadge Health</li> <li>25. St. Joseph’s Care Group</li> <li>26. Thunder Bay Counselling Centre</li> <li>27. Thunder Bay Regional Health Sciences Centre</li> </ol>	<ol style="list-style-type: none"> <li>1. Canadian Red Cross Thunder Bay</li> <li>2. Thunder Bay District Health Unit</li> <li>3. George Jeffrey Children’s Centre</li> <li>4. Port Arthur Health Centre</li> <li>5. Marathon Physician Associate Group</li> </ol>	<ol style="list-style-type: none"> <li>1. Upsala Volunteer Home Support Association</li> </ol>

## Regional Specialized Services Structure OHT Members

### Signatories

1. Brain Injury Services of Northern Ontario
2. Canadian Mental Health Association - Thunder Bay
3. Community Services for Independence North West
4. Home and Community Care Support Services
5. St. Joseph's Care Group
6. Thunder Bay Regional Health Science Centre
7. Wesway Inc.