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## Missisauga LHIN to float plan, get community feedback

Using an early draft of the Integrated Health Services Plan senior staff at the Mississauga Halton LHIN hope to re-engage the community to see if they have responded appropriately to the region's needs, says Scott McLeod, Senior Director of Planning, Integration and Community Engagement.

"[With the draft] it's 'here's what we heard you say, and did we get it right?'" says McLeod.

The first draft – scheduled for mid-summer – will be built using exhaustive demographic analyses and a summary of take-aways from community engagement sessions with both health care users and providers.

Assisting senior staff and board members are consultants from the Price Waterhouse Cooper firm, who are also helping LHIN staff in the South West LHIN. Consultants from the Hay Group are helping LHIN representatives in South East LHIN to draft their own IHSP. LHIN staff across the province are expected to deliver IHSP drafts in early October.

Senior staff and board members from the Mississauga LHIN wrapped up the first round of engagement sessions May 9th. Board members, including John Magill, chair, as well as the Michael Fenn, CEO, attended meetings with both the public and providers, tackling commonly held myths about LHINs and asking for suggestions, criticisms and commentary on health care provision.

Other than Toronto Central, the Mississauga Halton LHIN is the smallest LHIN geographically. It has a large, diverse population – more than 900,000 - features multiple languages and ethnicities, and includes Oakville, Mississauga, Halton Hills, Milton, and parts of Etobicoke.

<u>Provider web surveys</u>, along with written submissions and delegation presentations (typically a fifteen minute presentation made by a provider or consumer group at meetings) have offered staff extensive insight into the area's needs.

Prior to the engagement process LHIN staff advertised using varying forms of media, conducted massive mailings of LHIN information packages, and sent letters to politicians, school boards, and faith communities.

"I have had no concerns with the process," he says, "although I would like to see a little more involvement. Each session has been positive. People aren't as fired up here – but those that get involved tend to stay involved."

"Our next challenge is to get to the culturally diverse groups and have a meaningful dialogue with them."

Along with encouraging providers and a wider cross-section of the community to examine the first draft and assist in the creation of a second, McLeod hopes to create a web site akin to the Central East LHIN (see <a href="www.centraleastlhin.on.ca">www.centraleastlhin.on.ca</a>) and design it to be interactive.

To coincide with a return to school, LHIN staff are planning multiple public events with popular speakers to showcase an improved, and more integrated, health care plan.

A phone poll, asking the public to comment on their level of knowledge about the LHIN, would also be of tremendous benefit in the near future, he adds.

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