



Telephone Town Hall – Monday, May 27, 2013 Transcript

Speaker: Good evening everyone and thank you for joining us tonight for the second telephone town hall about Health Care Services in our region. I would like to welcome you. My name is Harjot Ghuman-Matharu and I will be your moderator this evening. I was born and raised in this area still live in the community and I'm very please to be helping out this evening in support of our local health care organization. When I'm not moonlighting as a call moderator, I can be found co-hosting a radio show with my mother on Fulkari Radio, CJMR 13.20 AM on a Punjabi radio station in Toronto. My family like everyone is out in this community accesses local health care services at one time or another. Tonight we are here with 5 local health care leaders to talk about our local health care... how our local health care system works and how to access the services which are most important to you and your family. Over the course of the next 45 minutes, we will hear from Scott McLeod, chief executive officer of the Central West Local Health Integration Network or LHIN for short. Cathy Hecimovich CEO of the Central West Community Care Access Center. Matthew Anderson, President and CEO of William Osler Health System. Liz Ruegg, President and CEO of Headwaters Healthcare Center and Janette Smith, Commissioner of Health Services, Region of Peel. This is our area's second telephone town health to talk about those health care issues that are important to the community. Tonight each health leader will speak for a couple of minutes, however the main objective this evening is to take your questions and hear your comments. There will be a number of opportunities to ask questions throughout the telephone town hall. To be placed in the queues ask a question simply dial star 3 on your phone at any time. We're certainly going to try to answer as many of your questions as we can this evening. For those who cannot get to, you can stay on the line after the call and leave a voicemail message. Calls will be returned to you within 48 hours. The host organizations will also be posting answers to some of our frequently asked questions during tonight's calls. These responses will be available on the organizations websites within the next week. For those of you just joining us, welcome to a discussion about how you can be better served by a local health care system. Scott McLeod, CEO of the Central West LHIN will begin this evening with some information about his organization and its priorities for health care in this area over the next 3 years.

Speaker: Thank you Harjot. I'm pleased to be here with some of my colleagues from some of the key health service providers in Central West. The Central West LHIN is one of 14 LHIN's in Ontario responsible for planning, integrating, funding, and monitoring local health care services to meet the needs of our growing and diverse communities Brampton, Caledon, Dufferin County, Milton, Leaskdale, and Woodbridge. We work closely with the health service providers to improve access to local health care services for residents in these communities. In 2013, our total funding to 53 health service providers including the CCAC Community Care Access Center, Community



Health Centers, Mental Health and Addiction Services, Community Support Service Organizations, Long Term Care Homes and Hospitals was approximately 830 million. Earlier this year we launched the 3rd Integrated Health Services Plan which is our strategic plan that was developed through input from residents and providers without the priorities and the local healthcare services. We have four strategic directions in the plan and in no particular order the first one is to drive, quality and value by working with our health service providers to improve quality of healthcare services for residents. The second direction is to improve access to care for residents which includes insuring residents have access to primary care physicians, self management and education programs for diabetes and chronic diseases, mental health and addiction services and senior services. The third direction is to streamline transitions and navigation of the system, which will improve the patient's journeys from one health service provider to the next using information technology to streamline services and for some that may have heard of a new initiative called health links it's really targeted at that particular direction. The fourth direction outlines the actions that will take over the years to continue to build on the momentum that we've developed over the last 7 years. Our strategic plan in these four directions are aligned with the minister's action plan and are collectively aimed at achieving health change to help ensure right services are available at the right time in the right place. And for more information you can certainly check out our website at www.centralwestlhin.on.ca. Thank you.

Speaker: Thank you Scott. At this time I like to open the floor to our caller for those who have just joined the telephone town hall. If you'd like to ask a question or make a comment, press star 3 on your phone. This will bring you into the question queue to speak to the leaders of our participating Health Care Organization. We kindly ask that you keep the questions brief so that we can get to as many as possible tonight. At this moment, I would like to introduce Cathy Hecimovich, CEO of the Central West Community Care Access Center.

Speaker: Thank you Harjot. The Community Care Access Center or CCAC exist to help people stay safe and independent at home for as long as possible. Our Care Coordinators are health care professionals who can help you to get the care you need. This may include In-Home Care such as nursing, physiotherapy, personal support and other services or we can help you navigate the services in your community. When independent living is no longer possible, we can also arrange for options such as long-term care or support of housing. As a CCAC we work closely with our partners including those partners on this call to help people avoid the Emergency Department wherever it's possible and to return safely home should they require a visit to the hospital. Working more closely with family doctors and nurse practitioners is also a big priority for us. By working with your family doctor, we can develop even better care plans that link to care your doctor provide with In-Home and Community services provided through the CCAC and other community providers. Giving you more effective and seamless care. CCAC services and advice are covered by OHIP. We often tell



people that if you need help but don't know where to start, start with the CCAC. Simply call, 310-CCAC. It's a free call, no area code is required, we're here to help.

Speaker: Thank you Cathy. At this opportunity, we'd like to open up for polling. We have a polling question for those who are on the line at our telephone town hall today. And so now we'd like to ask you a question. To answer each question, please press the number on the phone that corresponds best with the options given to you. The first polling question, is there specific health care topic that you would like to discuss for our future telephone town hall? Press 1, if you think primary health care, 2 for mental health and addiction services, 3 for senior services, 4 for chronic diseases and diabetes services. If you would like to ask a question or make a comment, press star 3 on your phone to get your question into a queue to be answered by a panel of health care leaders. At this time, we like to open the floor to our callers. And we'd like to now speak with, Agnes. So we have a caller on the line. We're going to speak with Agnes. And she would like to talk about wait time in our health care system. Agnes, you're with us now. And your question will be directed towards Matt Anderson. Hello Agnes. Okay. So while we wait for Agnes to come on. So the call with us to talk to Matt about what wait time in our health care services. I would like to introduce Matt, Matthew Anderson from William Osler Health System. Matthew will be speaking to us about Osler's new 5-year strategic plan and what does it mean for Health Care in this community.

Speaker: Great. Thank you very much. Looking forward to getting that call in about our wait times as wait times for all class of Health Care Systems are important issue for sure. We're very pleased with the opportunity to spend sometime with everyone this evening. If you don't know the way Osler System very well, Osler is comprised of 3 hospital campuses at Etobicoke General Hospital, The Brampton Civic Hospital and the soon to be redeveloped Peel Memorial Center. It's a very exciting time for health care in our region. We cover Milton, Leaskdale, up into Bolton and Woodbridge, throughout Brampton of course and up in the Caledon. Very busy place, very busy organization. Next month we'll be probably launching our new 5-year corporate strategic plan. This marks the start of the journey that we'll see if it interacts with our patients and family in a different way, work with our health service providers in different ways. Try to assure that patients get everything that they need most, where and when they need it. The goal has been set up in a plan that will result in many benefits including reducing our reliance on emergency room. Certainly working with our partners around the table, that's a major goal for our health care system. Also working with patients and people differently to help them better manage their chronic illnesses. Most of our patients are folks who have a chronic disease. We'd like to work differently with them to try help them stay out of our emergency room. And workers have the opportunity for people to receive care, when they need it virtually in their own home or in the community. Certainly, we are trying different pilots, we may get a chance to talk about some of those this evening on ways in which we can bring health care back into your home using Information Technology. Certainly, computer... community input will continue to play an important role as we look at how do we move forward with our services. How do we



achieve our vision of patient inspired health care without boundaries. How do we want to work on grading issues like this figure from the community and then opportunity for all of you to talk to all of us here your health care services partners. Thank you.

Speaker: Thank you Matthew. I want to again remind everybody. If you'd like to ask a question or make a comment, press star 3 on your phone to get your question into queue to be answered by our panel of health care leaders. At this point, we're going to be taking a question from our caller. We'll be picking a question from our caller and we're going to be picking a question from Rosalie. And her question is about finding a family doctor. And I'm going to ask one of our panel members to, to take on this question. Is Rosalie here?

Speaker: Yes.

Speaker: Hi, Rosalie. How are you today?

Speaker: Pretty good. Thanks.

Speaker: And you are asking question about finding a family doctor.

Speaker: Yeah. We've just moved down here from the Aurelia area. And we're still travelling up there for our health care. And I'd like to find a family physician down in this area. We're just South of Orangeville. But we're in the Caledon District.

Speaker: Okay. So, I think we're going to pass on the question to Liz.

Speaker: Hello Rosalie. It's Liz Ruegg, CEO at Headwaters. So it's great certainly that you've moved to this area. Health Care Connect is actually a number that you could call to register. If you need a family physician. And you can call Health Care Connect by calling 1... Do you have a pen? Hello Rosalie.

Speaker: (??) just give her the number.

Speaker: So you can call 1-800-445-1822 or you can visit the website www.atalthhealth.gov.on.ca and click on need a doctor about all health card is all its really required. Health Care Connect refers people without a regular family health care provider to physicians and nurse practitioners who are accepting new patients in their community and I do know that in Orangeville there are family doctors who are taking on new patients so it should not be a challenge for you to find a family doctor.

Speaker: Thank you so much Liz for your expertise about finding a family doctor. At this point I want to bring on another caller Marsha is with us and she wants to talk about hospice services. So we're going to bring her on the air. Hello Marsha, welcome to the telephone town hall.

Speaker: Hi thanks very much. I am a new resident in Woodbridge and actually have health (desk fund?) right down the street for me. I know that I am a retired nurse and it concerns me that we're now going into the time where we have a larger boat of people entering you know advance stage. And hospital services I think are going to become more and more important and I was wondering if the, you've given much thought to expansion of hospice services or the kind of services are available to the public. I, I don't know exactly what's been going on here in this particular area.

Speaker: Thank you. We're going to pass off this question to Scott, to help us answer.

Speaker: Thanks and I'll start and I'll probably pass it around but thanks for the question Marsha. There's a couple of things going on but certainly is an area of keen into some of planning perspective. Exactly the same reason, 'cause we did mention we do have an active palliative care network within the Central West LHIN and its host within the community care access center but they do planning for... where hospital services or palliative care services should be provided whether that's residential hospice or community palliative care as well as within the acute care setting. So that's something that we're working on and we're in the process in this Cisco year we'll be developing a more wholesome plan I guess for how we need to address the growing needs related to the seniors agent population as well as related to cancer related care. And maybe Cathy want, want to elaborate on the...

Speaker: Yes.

Speaker: CCAC Palliative Care.

Speaker: Well certainly. Right now we work with patients and their families to really figure out what are, is the best option for them and then we help them to explore whatever the available options within our, within our geography. So we have options of in-home services through the community care access center. We have better health hospice which is up in in the Caledon East Area, in our area. And then we also have acute care palliative care (best?) in our... with our hospital partners. So depending on the needs of the individual patient and family, we can help identify which of those options works best and then make sure people get the appropriate care and support that they need to ensure that they get appropriate palliative care and appropriate pain and symptom management throughout their journey.

Speaker: Thank you so much. So just to anything else welcome to the telephone town hall. If you like to ask a question or make a comment, press star 3 on your phone to get your question into queue to be answered by our panel of health care leaders. Thank you



for all the calls and for joining us. I'm going to now speak to Sheila. Sheila is on the phone with us and she has a question that she like to ask. So Sheila.

Speaker: Hi. Yes I wanted to ask a question regarding the new redevelop Peel Memorial site. Wondering if there is going to be or if there are any plans or opportunities for community fitness and health education.

Speaker: Yes, this is a kind of question for Matthew Anderson.

Speaker: Great, thank you. Sheila, thanks so much and wonderful question and this is exactly along the lines of where we want to go with the new Peel Memorial Center. Certainly, so the short answer is yes, there's great opportunity for community and fitness education. My longer answer is that as we look at designing the Peel Memorial Center, we're one of the major items that you wanted to have in there are large classroom or large rooms where we're able to do community fitness, we're also able to do community education as much as in my opening comments, I talked a little bit about using a information technology to bring care into their home. Very very important that we also recognize there's a social aspect to health care and bringing people together in a community setting and working on health and fitness is very very important to us. The second part of that, is the focus of William Osler which is also embodied in the Peel Memorial Center. I'm trying to shift the health care resources more to prevention, more to health and a little bit away from disease management which is what we tend to do today. So that's the long answer and coming back to the short answer, yes there's definitely going to be an opportunity for community fitness and health education at Peel Memorial. Thanks again for the question.

Speaker: Thank you Matthew. I think it's now time to go over to a polling question, another one. So we'd like to ask you a question. To answer each question all you have to do is push the number on the phone that corresponds best with the options given to you. Cathy mentioned that the CCAC looking closely with family doctors and nurse practitioners to better coordinate health care. How important is it to you that your, you and your doctor an in-home care providers work together to provide more coordinated health care. Press 1 if you think very important, 2 for somewhat important, 3 for not important. For those of you just joining us, welcome to our discussion about how you can be better served by your local health care organization. I would like to... this opportunity to introduce Liz Ruegg, she is the President and CEO of Headwaters Health Care Center.

Speaker: Thank you Harjot. I'm really excited to be here with our local community health care partners this evening. It's a great opportunity for us to hear from you our community. Headwaters Care Center is an acute and complex continuing care community hospital located in Orangeville and we serve the residents of the town of Caledon and Dufferin County and you can see a full list of services on our website if you visit us at www.headwatershealth.ca. We all want to keep our residence in our homes



longer and provide that care close to home. Headwaters will never be able to provide all of the services that are needed to the community. But important for us is we offer as many as possible close to home and for those services that we can't access that we work with our partners so that you get that timely service. We can provide a lot of fill services by partnering with organizations like the ones we have here this evening. For example we build a partnership to provide original cancer program original orthopedics program and mental health program so that you can receive that care close to the home. Our recently announce redevelopment will enable us to expand this programs and services to reach and treat more patients. We have also join forces with the Central West Community Care Access Center to provide an (IV room?) clinic that provides our residents with an alternative to the emergency department. We'll e-mail alert the Central West LHIN and the Ontario Telemedicine Network have all joined together to provide telehome care to keep you healthy and at home. Just like this telephone town hall event, we will all continue to work together to put patient first and ensure that you get the best care possible as oppose to home as possible.

Speaker: Thank you Liz. At this point we want to bring in the callers. Again if you like to ask a question don't forget all you have to do is press star 3 in your phone to get your question on the queue to be answered by our panel of health care leaders and at this point we wanted to speak with (Rajeev?), (Rajeev?) is on the line and he would like to ask a question about ED and Trios. But yes you were on but here with our telephone town hall.

Speaker: Thank you. I have actually two questions. First question is how many doctors are working in the Brampton Civil Hospital in the emergency, why during night. And secondly you know there is a need for an improvement in the emergency area. For example I've taken my dad recently to the hospital. For 5 or 6 times, I've been asked the same question over and over. Every time there's a change in shift, they ask exactly the same questions how it happened, what time it happened. You know we need to just keep going and I'm thinking I was going to do something about the issue he have instead of actually they just keep asking the same question. That's my concern we need to you know need to have more emergency doctors in the, in the hospital specially during the night time or rather the day time.

Speaker: Thank you (Rajeev?). We're going to ask your questions to our panel of professionals. And I'm going to pass the question off to Matt.

Speaker: Thanks, thank you. Thanks a lot. Thanks (Rajeev?) for calling in. You're getting the right number of docs in our emergency room. Is always, it's always on our mind in terms of how... how many we should have on any given shift. We always have at least double coverage, mean that we have that there is two docs in the yard in the given time. Typically during our peak hours which are basically from late morning through to late evening, we have four or five docs depending on the time of day. We actually just about two weeks ago added an additional shift during our peak times, so their gaining in the

effort to try to get our wait times down and get more coverage in there. In terms of asking the questions over and again I don't know that the specific circumstances for sure but in general there's a couple of things that drive that. Most importantly is you mentioned shift change. All of our health care professionals are trained when they're coming on to take over care from someone that'd be a nurse or a doctor in they're training they're trained to ask those questions again. It can certainly feel a little bit irritating for folks from time to time if you're answering those same questions. They do chart the questions but they need to make sure that they've got the most up to date answer and also a part of their responsibility to make sure they've actually asked that question and having the answer for themselves. So we do appreciate that that can be irritating from time to time and it is part of their duty to make sure that they've got the most up to date information when they ask that question. Thank you again.

Speaker: Thank you Matt. So we asked you a poll question and that was how important is it to you that your doctor and in-home care providers worked together to provide more coordinated health care and our questions... our answer sorry was very important with 92% of the vote, somewhat important with 6% of the votes and not important with only 2% of the vote. Thank you for being part of our poll in tonight telephone town hall. And we're going to continue to open up the question period to have you ask your question to our panel of health care leaders. If you'd like to ask a question, I want to remind you that could press star 3 on your phone and your question will come into queue and it will able to be answered. If we cannot answer your question tonight you can leave a voicemail message at the end of tonight's town hall and someone will get back to you in the first 48 hours. We're going to do the question from Jonas and Jonas is asking about... Elizabeth sorry. My apologies, we're going to be talking to Elizabeth and she would like to ask about hospital services and cost so we'd like to post that question to Scott. Hello Elizabeth.

Speaker: Oh hello, yeah.

Speaker: Hi, how are you today?

Speaker: Oh I'm fine. This is very interesting. I... before I begin it's not too much a question, I'm sort of suggesting that what I would like to do is a rundown of health care expenses when I... every time I go to a doctor what does it cost with the health care system. How much does that a day in the hospital. How much is being paid out to the hospital for the services and what the (??) involve. Also for all the lab test and the X-ray and all these different things that we just take for granted. I think it would be a lot more of a (??) with the help of the system. The people appreciate it how much was being spent for.

Speaker: Okay, thank you Elizabeth for your question. We're going to bring that question to Scott about the different services that they provide.

Speaker: Thank you Elizabeth for the call. In short, we know what the, the hospitals received from the Ministry of Health and in our LHIN area about 600 million or so go to the hospital, the two hospital corporation, 3 hospital site. And there is a cost through day for that. I think the other point that you're making that is interesting in other provinces I've tried. This is actually not, not billing patients but letting them know what the cost of their stay was so that as you say they don't take it for granted and that actually is something that is worth, worth considering 'cause I think people do assume everything is free and it isn't. So that's a good question.

Speaker: Thanks so much Scott for that. We're going to go to the next caller and the caller's name is Susan and she's like to know about better communication between doctors and the CCAC. Susan you are with, yes.

Speaker: Good evening.

Speaker: Good evening.

Speaker: Yes my concern is with CCAC. Unfortunately I've been on and off service for almost 13 years and obviously I've seen a great change in the service in 13 years and it hasn't been for the better. Now thankfully I'm off service right now but my issue is now with my parents, my mother had need for physiotherapy and now my father has had need for it and like I'm, like a pet ball as an advocate because I know how to navigate the system because you know the rosy picture that you paint about working very closely with the doctors is all well and dandy but reality that does not work. And I have yet to find a time where I did not have to become the advocate and actually sort out the information and find out who was responsible for it and make it happen. So I'm very disturbed at the decline in the service in 13 years.

Speaker: Thanks so much for your question Susan. And I think you're, you're making some excellent point. There's a couple of different things that you raised. I'll talk first about the government recently announcing investment in-home physiotherapy services, 'cause you're right there are wait list across the province where the physiotherapist services through the CCAC's and the government has recently invested 33 million dollars in in-home physiotherapy services. It's just in this recent budget that we're waiting to get passed and that money will go towards eliminating all wait list for in-home physiotherapy services and providing services for up to 60,000 additional clients within the community settings. So that's good news from a waiting for physiotherapy perspective. The other really important point you made Susan is the issue of communication between the CCAC and family doctors the whole primary care system and that's really the core of the new health links initiative. We know that in the current health system we don't always have great communication between our primary care providers and our home care providers or our hospital system and we're not... doesn't



happen, just as you've said. Sometimes the patient can get lost in that shuffle and for people who have very high needs and need a lot of care and a lot care coordination it's really important that we tighten up that communication between family doctors, community care services, hospitals and all of the other providers out there. So that's going to be a big part of the new health links initiative. We're going to be targeting better communication between primary care and the other partners within the system for those people who need care the most.

Speaker: Thank you Cathy for that answer. Our final speaker this evening is Janette Smith. She's the commissioner of health care services for the Peel Region, her briefly mark will surface on the services provided to the Peel residents, the original municipality of Peel. This services range for emergency services to healthy living and disease prevention support. Falling to that mark, we're also going to be going to another poll.

Speaker: Thank you Harjot. And good evening everyone. I'm thrilled to be here on behalf of Region of Peel Health Services Department. Our services and programs are here for residents building in Brampton, Mississauga and Caledon. Our five long term care homes provide care to older adults who can no longer live independently in the community. Our community support services such as auto tape services for El Dorado helps to maintain their independence and give their caregivers some relief. Access to our homes and community support services is coordinated by our partner, the community care access center. Paramedics services which is the land ambulance program respond to 911 calls and should be called when you have an emergency or an urgent health matter that cannot wait to be treated by your doctor or a local health clinic. And finally Peel Public Health protects and promotes the health of all the Peel residents. A snapshot of this prenatal, postnatal and parenting support, healthy sexuality clinics, dental services for low income children, vaccination programs and release, recently launched changing course. Our new initiative to create healthy environment for healthier living to prevent child obesity, diabetes and other chronic diseases. For more information for any of our programs please call Peel Health at 905-791-7800 or visit our website by going to www.peelregion.ca. Thanks.

Speaker: Thank you Janette. Thank you for your calls and for all those are calling in right now. If you are just joining us, welcome to our discussion about how you can be better serve by a local health care system. During this discussion, we're also could be speaking about polling question asking new questions about, I'm calling you about what you think about the health care system. This next poll we'd like to ask you to answer this question it's very easy, just push the number on the phone that corresponds to that with the options given to you. The polling question is if you are feeling unwell how do you first access health care in our community. Press 1 if its the family doctor, 2 for walk in clinic, 3 the hospitals emergency department, 4 by calling Telehealth and 5 the urgent care center. If you'd like to ask question to our panel of health care leaders you can press star 3 on your phone and your question will come into queue and right now we're

going to be going to our next question. Our caller right now is Hilda and she would like to ask a question about transportation. And she is from Orangeville. Hello Hilda.

Speaker: Hello there. Was waiting so long. I lost my voice. I am, I would be interested how you get to special appointments that are not within the city when we live out the city, what is available affordable transportation from the country to the hospitals or to the specialist.

Speaker: Thank you so much for your question Hilda. Now the putting that question towards Liz.

Speaker: Great. Thanks Hilda for your question. It's one we certainly we get asked an awful lot. So we recognize that transportation is an issue in our area. We know that also Headwaters community in action which is a group that come together is looking at this very issue of roll transportation and so they're looking at developing specific recommendations for improving on this area. Currently to get to in an appointment, there are a number of volunteer groups and community groups and service clubs that do offer to pick you up and certainly take you to appointments. I don't have certainly the contact numbers for that but I'm happy to give you my number and if you call my office I'll ensure that you get a response, so 519-941-2702 x2200. I don't know Scott if you had any other comments from LHIN.

Speaker: Sure it's about at Central West LHIN, transportation is an issue that we hear about all the time particularly as you get in more role and it's not typically something that help sector funds. In Central West, we've made quite substantial investments in, in all areas that are all in around transportation but Dufferin County is still an area that I think so need some more. We had a study then in the last and depending on budget approvals there are, there is the hope for further investment in transportation in Dufferin County areas, specifically.

Speaker: Thank you so much Scott and Liz for your answers. We'll go now for the next question. And it's Dorothy and she has a question about employment in health care. Hi Dorothy you're here with the telephone town hall.

Speaker: Hi.

Speaker: Hello.

Speaker: Hello.

Speaker: Hi good evening you're on. Hello yes. You're with us in the telephone town hall.



Speaker: Yes (??). I have a question regards to the (??). Are you planning on fixing that? You have a (??). You don't have enough time to really (??) news. It's just a rush and (??) or you plan on fixing that.

Speaker: Hi, hi Dorothy. It's Janette calling from the Region of Peel. I can only actually we'll be able to speak on our 5 long term care homes and there are quite a few other homes run by other people in the region. Certainly for specially for the personal support workers that working long term care it is a heavy duty job being there for the residents and people coming to work wanting to do their absolute best. One of the things we have done over the years added some additional staff. We've also have a very strong volunteer program so that they can be in to the homes to do some of the visiting and handholding that is so important to our resident. If there are any job openings at the Region of Peel, if you go to our website at www.peelregion.ca up on the top right hand corner it says careers and jobs and you can go on if we have any openings. I know recently we've done some expansion with the help from our local health immigration network and Scott that we're hiring for adult day services for seniors in the community that are coming into our homes during the day. So I wished you all the best. It's obviously you really care about the people you're working with and keep up the great work.

Speaker: Thanks so much Janette. We are going to go to our, the results of our most recent poll. The question was if you are feeling unwell how do you first access health care in our community. So our top answer with 63% is the family doctor, 22% the walk in clinic, 6% at the ER, 6% is also Telehealth, 2% for urgent care center and that no one is using the 911, is to call 911. Thanks so much for being with us today at the telephone town hall. We're going to go to our next question with Colinda and he has a question between using the urgent care center versus using the emergency room. Hi Colinda you're at the telephone town hall.

Speaker: Hello.

Speaker: Hi, how are you tonight?

Speaker: I'm good.

Speaker: Thanks so much you can ask question to our panel of local health care leaders.

Speaker: Hi I have a question about the urgent care in the hospital. What is the descending urgent care and emergency in the hospital, 'cause a lot of people doesn't know or like to the emergency they have a little bit pain and there's another emergency that they are sick and the people don't know like the other things and they did the thing that in timely urgent care and emergency and they don't know that (??).

Speaker: Thank you so much for your question. Great question Colinda. And I think I'm going to direct this one over to Matt.

Speaker: Great, thank you very much and Colinda you, you touch on it just in your question. The important things first off and the why do we really care whether you go to an urgent care center or an emergency room and Colinda mentioned in her question, it's all about access to services and the bottom-line is that he can get the emergency room for anything but in the ER we treat the most ill first. So if you're not that sick and you're in the ER, you could be waiting quite sometime as we're taking care of the most sick patients. So in terms of directly answering your questions first and foremost the most important thing for everyone is if you believe you're in a life threatening situation you don't hesitate to call 911 that is the thing that you do, you don't wonder about should I go to this hospital or that hospital you call 911 if you feel you're in a life threatening situation. Outside of that you make an assessment, I was Colinda just mentioned in terms do you feel that you are in an emergency situation or you're in a situation that just requires some timely access in care. Often times in our emergency room, we'll get people who coming in who have been sick for a couple of days, you're not really sure what's going on with them, maybe they've got a bit of a fever or often we also have people coming in more for a confirmation of diagnosis. They think they know what's going on but they just want to get some confirmation. Those are the kind of situation going to an urgent care center is likely a better option for you. Again 'cause when you're in line with both of are not critical and your likely be seen in after wait time. Again anytime if you're in doubt you call 911 or you come to the emergency room but if you think that you're going in more for a, a check up or something that's been nagging you for little bit that's when you will go for an urgent care center. Thanks for the question.

Speaker: Thanks very much for that Matt for that answer. Our next call is (Mineti?). (Mineti?) sorry if I'm saying that wrong and she would like to ask a question about support at home following surgery. Hello you're on the air for the telephone town hall with us tonight. Hello (Mineti?).

Speaker: Hello.

Speaker: Hello I believe that we cannot connect with (Mineti?) at the moment. We'll hopefully get back to her pronto if not well we can answer her question on the website or if you leave a voicemail or get back to us in 48 hours. The next question is with Joanne and Joanne has a question about going to different hospitals for a specialist. Hi Joanne on the air with us.

Speaker: Hello how are you? I've been through William Osler many time and I've always found it very very good. I used to live in Brenton, I now live in Mississauga. The last time I had to call the hospital, I had to go to I believe it was it's the Mississauga Hospital anyway. Now my cardiologist only works at William Osler and he said that he

would like me to go there if I have any problems. Now can I request to go there or not. I mean I understood that you go where there's a spare bed.

Speaker: Thanks so much Joanne for your question. We're going to that question over to Scott.

Speaker: Okay so I... I can start and I'll pass it to Matt as well but the LHIN boundaries when they were established were intended to be permeable in other words they weren't intended for event resident who lived in a different LHIN from seeking care in another land. And so in your case, you're a Brampton resident you move to Mississauga. If your position refers to the specialist at William Osler that's absolutely fine with the system and you know you can also get a referral to that, the other hospital that are in Mississauga but you can certainly get a referral to cardiologist at William Osler from your family physician. Yeah oh we're just (??) no problem and we just need a referral and in fact if you had it sounds that you already had some care at William Osler is probably wiser if you're comfortable going in there otherwise if you just stick with that hospital anyway they got your record, they got your history, it's a definite way to go.

Speaker: Thanks so much for that. We're on our final poll of the evening and also we like to ask you a question. To answer this question all you have to do is push the number on your phone that corresponds best with the options given to you. For our final question is, was this call a good use of your time, press 1 if you think yes, press 2 if you think no. We are on for our final call for the evening and their going to be getting a call from Jane and Jane is would like to find out about care beds within her hospital. Hi Jane you're on the air with us for our final question for tonight's telephone town hall.

Speaker: Yes I was asking about palliative care. My husband passed away about 3 weeks ago. He was on the waiting list to go to (Betlehost?), he never did get there. Three times he was discharged from hospital and he was not capable of coming home. I think with the population of 460 plus thousand people in Brampton alone there needs to be more focus with palliative care. Another caller call about this as well. I just find it, the palliative care unit at William Osler, is not dedicated all the palliative care, it's filled with medical patients as well and the nurses cannot focus on giving holistic support of care. So number one, we haven't got enough hospice...

Speaker: And we're going to put that question over to Matt as we are short with time.

Speaker: Great, great. Thanks Jane and probably we're also ask others if they want to get in this call as well and you're absolutely right for palliative care. We did have a similar type of caller earlier in our show this this evening. A couple of things first is that we are focus on a major palliative care program at the hospital and actually have recruited several palliative doctor just recently the Brampton Civic which is I think is

going to help up our program. You also made a comment about getting to hospices and we talked a little bit about hospice earlier and I really think that that's the answer long term. We certainly need to have you two care beds there for the acute palliative stage but as we know in and seen with many, its much more appropriate for folks to be at hospice or at home and the question really is we're working on at the hospital how do we make sure that our specialist are there to support the doctors and the family over the community area in the hospice. That's really where we like to go with palliative medicine. Maybe Cathy may want to add a few more comments with that.

Speaker: Yeah I can't agree with Matt more. When we talked to people we hear from the vast majority of people that they would love to stay at home for as long as possible and many many people their goal is to die at home and unfortunately sometimes it's the pain, it's the symptom and it's the lack of ability to get timely medical attention which can drive them to the emergency department or drive them to the hospital and I think Matt's strategy is great on the money in that the more we can get specialist position care to support people over the community nurse practitioners and palliative care are also coming on board. We're hiring 5 new specialized nurse practitioners in palliative care at the CCAC. They're going to be available to help support people with their pain and their symptoms and allow them to have good pain management, good symptom control and choose to end their final days peacefully in the location of their choice. So my sincere condolences on your lost. I know that 3 weeks is very fresh for you so please accept my sincere condolences on your lost and know that we are all collaboratively dedicated to working very hard to improve palliative care services in this region because we couldn't agree with you more if something we had desperately need more of.

Speaker: Thanks so much Cathy for that. So we're going to go to the results of our poll. So does you guys think that this is a good use of your time with this telephone town hall. And 90% of you answered yes. So thank you for being with us tonight here at the telephone town hall. Our questions, next question for tonight is from Mary and she'd she had a question for us about cancer support for children.

Speaker: Hello.

Speaker: Hi Mary you're with us tonight for the telephone town hall.

Speaker: Hi good evening. My question is to the panel is there any support for children who have survived cancer in Brampton.

Speaker: Hi Mary. It's Janette from the Region. And I'm going to take a crack at this one and others made something. Often Brampton available to tow it in and Brampton and surrounding communities who's a cancer support center called Wellspring (Tencusi?). It's an amazing beautiful house on a residential neighborhood that specializes in support groups for both people that have doubt with cancer and methods of



treatments for their family members. So I would highly recommend to give them a call and again Wellspring (Tencusi?) and their number is 905-792-6480.

Speaker: Thanks so much Janette for that and the final question for tonight is from Guy and he has a question about walk in clinic. Hello you are on the air with us.

Speaker: Okay, I'll try to make it brief and it's in keeping the line with a lady by the name of Elizabeth. As for, I have a friend that operates a walk in clinic consequently I visited quite recently and in 90% of the time when I'm there I see basically the same set of pieces and it's always packed anyhow. That it seems to me and it's not to the ineffective but in some cases that its taking off like a recreation of place to hang out. I'm saying, would it be against the ministry guidelines to charge just a minimal amount, say two dollars or five dollars to see a doctor. That would...

Speaker: Thank you for your question. We're going to, we're bending low on time, with only a couple of minutes left. I'm going to put this question towards Scott.

Speaker: Thanks for your... so for short answer to your question about can you charge a fee, answer is no. The ministry doesn't allow that and we're under current policies I think the bigger discussion around this is the initiative around primary care and health links initiative which brings together primary care specialist, CCAC and many other providers together to deal with what are the most difficult to manage cases so that it doesn't become as you sort of just a bit of a social club you're dealing with patients who needs care through the most specialize group of providers with primary care at the center and it's a new way of bringing providers together around the needs of the individual patient and I don't know whether Cathy or Mattie want to I just can I as well just add that I think on the focus is around folks who are relying on urgent care or emergency room very very frequently and or even walk in clinics. Anybody whose using those such of services very frequently over a short period of time that's where we want to start focusing on. I'm trying to understand better why did they feel they need that kind of service and perhaps we could coordinate services that'd be better around this folks so that they're not relying on the emergency room or walk in clinic or urgent care center. Try to help them receive their care and lots of information there for sure that if we get the people before they get into a crisis situation to help through they are, the easier the service provision and better for the system as a whole. So I think that's probably a great path for us to head down and to address some of those challenges.

Speaker: Thanks so much. Once again we appreciate everybody here for sending the part of the evening with us. Our local house organizations will be using feedback with this to during this call to help informed the ongoing integration initiative. The group has to continue to hold more telephone town hall meetings in the future and we hope that you will join them again. Tonight over 8000 connected to us over the course of the call as I mentioned at the beginning of the call, the host organizations will summarize the question frequently asked this evening and post the information on their website that



you can refer to for more information about their services and how they work together for the community. If you have a question that you would like to leave for the host organization you can also stay on the line after the call. Calls will be returned to you within 48 hours. Thank you again for joining us and have a wonderful evening."