

Local Health Integration Networks launch groundbreaking project

\$40 million invested in health human resources to support seniors with complex mental health needs

Date: August 29, 2011

Ontario's Local Health Integration Networks (LHINs) are enhancing services for seniors who exhibit behaviours associated with complex and challenging mental health, dementia or other neurological conditions by investing in local initiatives that will improve care.

These investments are part of the provincial Behavioural Supports Ontario (BSO) project, which focuses on providing quality care for individuals with these conditions, in an environment that is based on safety, high quality, evidence-based care and practice.

Four LHINs - Central East, Hamilton Niagara Haldimand Brant, North Simcoe Muskoka and South East - will be developing and implementing their local plans beginning November 1, 2011 – with the remaining ten LHINs implementing in February 2012.

One of the goals of the BSO project is to ensure that staff working in health care settings – such as long-term care homes, community services and hospitals – are supported in caring for seniors with complex mental health needs.

The \$40 million investment will allow local health service providers to hire new staff – nurses, personal support workers and other health care providers – and train them in the specialized skills necessary to provide care for these patients with dignity and respect.

The Behavioural Supports Ontario (BSO) project is a collaboration between Local Health Integration Networks, Alzheimer Society of Ontario, Health Quality Ontario, and the Ministry of Health and Long-Term Care.

QUOTES

"We know Ontario's population is aging and that the number of seniors with dementia and other complex health needs is going to increase. Patients deserve to be managed with sensitive care. The Behavioural Supports Ontario Project – the first of its kind in Canada and only one of a handful in the world – will support this vulnerable population."

- **Deb Matthews, Minister of Health and Long-Term Care**

"This is an exciting day for all 14 LHINs. Residents' needs and geography challenges differ from one end of the province to the other. We're going to implement local action plans that will take into account these differences, adapting so that residents in the 14 different regions of the province receive the care they need, closer to home."

- **Bernie Blais, LHIN CEO Lead - BSO, North Simcoe Muskoka Local Health Integration Network**

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Ontario's Local Health Integration Networks

“The Alzheimer Society of Ontario applauds these much-needed investments that will strengthen the capacity of both families and our health-care system to improve the quality of life for this group of Ontarians. Today's announcement responds to solutions suggested by family caregivers and health-care personnel coping with these challenges every day, whether they're in hospitals, long-term care facilities or in their own homes. The Alzheimer Society looks forward to working with the LHINs in implementing this important project.”

- **Gale Carey, CEO, Alzheimer Society of Ontario**

QUICK FACTS

- 65% of long-term care home residents have dementia
- By 2020 the number of persons with dementia in Ontario will increase by 40% to 220,000
- 34% of Alternate Level of Care (ALC) bed days are occupied by people with dementia

LEARN MORE

To learn more about the Behavioural Supports Ontario project, please visit www.bssproject.ca.
For further information related to this release, see attached [backgrounder](#).

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Backgrounder

Older people with cognitive impairments due to mental health problems, addictions, dementia, or other neurological conditions often exhibit responsive or challenging behaviours such as aggression, wandering, physical resistance and agitation. These behaviours, which occur whether the person is living at home, in acute care or in long-term care, are a major source of distress to the individual, their family or caregivers and others providing support.

The number of people with cognitive impairment is growing, which places further strain on individuals and the healthcare system.

Phase 1 of the Behavioural Supports Ontario project (January – October 2010) saw the development of a Framework for Care that would meet the needs of older adults with cognitive impairments and associated challenging behaviours. In Phase 2, four early adopter Local Health Integration Networks (LHINs) - Central East, Hamilton Niagara Haldimand Brant, North Simcoe Muskoka and South East - will be implementing the care pathways and clinical tools identified in the Framework for Care, focusing on quality of care and quality of life. The lessons learned by the four early adopters will then be spread province-wide to the remaining 10 LHINs.

Funding Breakdown:

Local Health Integration Network	Funding Amount (\$M) 2012 – 2013
Erie St. Clair	2.41
South West	3.23
Waterloo Wellington	2.42
Hamilton Niagara Haldimand Brant	3.88
Central West	1.94
Mississauga Halton	2.89
Toronto Central	3.21
Central	3.97
Central East	4.06
South East	2.42
Champlain	3.79
North Simcoe Muskoka	2.26
North East	2.64
North West	1.23
*Local Health Integration Networks will be receiving start up funding for the 2011-2012 fiscal year.	

All 14 LHINs will be provided with funding for new health human resources: nurses, personal support workers and other health care providers (e.g. occupational therapists, social workers) who will be trained to provide care that meets the needs of people with dementia or mental health issues.

The additional health human resources provided through this project will enable local provision of expert assistance and will enhance existing local resources through the creation of mobile multi-disciplinary teams, local behavioural services and community supports.