

COMMUNITY OPEN-HOUSE

RE: DRAFT VISION FOR THE FUTURE OF NIAGARA'S HEALTH SYSTEM

WELCOME!

Thank you for taking time out of your busy schedule to attend this open-house regarding a draft vision for the future of Niagara's health system.

It is no secret that Niagara is undergoing rapid and fundamental changes regarding what and how our health services are being delivered. The main forces, or realities, driving this change are lack of funds and consumer demand for quality care. **To do nothing is simply not an option.**

We, in Niagara, have been provided with the unique opportunity to design a local vision for change - a shared vision for the future of our health system. By developing this vision, we have created an opportunity to influence the future of our health system, and in particular the types of changes that should occur.

Developing a future vision for such a complex system is not an easy task. Under the leadership of the Niagara District Health Council, many volunteers from across the Niagara region have spent days meeting, discussing, listening and striving to map-out a draft future vision of a health system which is most suitable for the people of Niagara. The vision that has been drafted focuses on well-being and the role of the consumer, quality care and cost-effectiveness, system management, service co-ordination and integration, specialized care, and advanced communication and information technology.

At this time, we are asking you, the people of Niagara, to let us know what you think of this future vision - in particular, we want to know what parts of it you like or don't like. Your input is very valuable to us and will form the basis for any final changes to the draft vision.

We hope that you will use this opportunity to review our display boards, have your questions answered by our resource staff and volunteers (people wearing blue name tags), and leave us with your comments and ideas regarding the draft vision on the comment form provided. For your convenience, we also have available a handout which includes answers to commonly-asked questions.

In closing, I would like to encourage you to review the information we have provided and share your views regarding the draft vision with us. Our staff and volunteers would be happy to answer your questions.

THANK YOU!

DRAFT VISION STATEMENT FOR THE FUTURE OF NIAGARA'S HEALTH SYSTEM

Commonly-Asked Questions

- 1. How were the volunteers who participated in the development of the draft vision selected?**

These volunteers were selected by the District Health Council's Community Visioning Steering Committee. Their selection criteria included health (e.g., hospitals, public health, physicians) and non-health (e.g., education, business, social services) representation, urban-rural mix and geography. Primary consideration, however, was given to whether or not they were considered to be a community/change leader (i.e., believed that Niagara's health care system required change).

Volunteers were not selected to represent a particular sector or geographic area, but instead were there to reflect a "regional" perspective. Special attention was paid to ensuring a balance of health and non-health people.

- 2. Is this vision carved in stone? How much influence will the residents of Niagara have on the content of the final vision statement?**

1st Question - No, it is only draft at this time. It will not be finalized until we have completed our consultation with the people of Niagara and received their feedback. Consultation activities include a newspaper insert and questionnaire that was distributed to 155,000 homes across Niagara and the five community open-houses.

2nd Question - A lot. In order that this vision represent a shared vision for Niagara, support for the vision and its contents by the residents of Niagara (both providers and consumers) is critical. The Health Council's Community Visioning Steering Committee is committed to revising the content of the vision based on the feedback they receive.

- 3. The vision is very general and appears to lack specifics. For example, it is not clear what structure the single management organization would take.**

This is intentional. A vision is designed to provide a general framework for future change and aspirations, not provide the specifics regarding how it will be implemented. It will be the collective task of the consumers and providers of the Niagara region to work through the specifics of the how the vision will

become reality by identifying implementation strategies which most appropriately address the needs of the Niagara community.

We encourage you to share your ideas for how you would make this vision a reality.

4. When will the final vision be completed?

The anticipated completion date is April 1996. Before the final vision statement can be unveiled to the public, the Steering Committee will need to review all of the feedback received through the newspaper insert questionnaire, and the community open-houses and make final changes to the vision statement.

5. How will you make sure that the views of all residents of Niagara are heard?

Given limited funding, we have not been able to undertake as extensive a public consultation as we would have liked (e.g., 1-800 phone number, random household telephone survey). However, we believe that our newspaper insert and five community open-houses will inform the majority of Niagara residents about the vision and provide them with the opportunity to let their views be known.

We cannot make people participate in this process. They have to want to be involved.

6. How will the final vision statement be used?

We see a number of uses for the vision statement.

Firstly, the vision will be used by the Niagara District Health Council to guide their planning and decision-making over the next several years. In particular, it will be used as a framework for future restructuring of Niagara's entire health system - the first phase of implementation being hospital restructuring. IT IS IMPORTANT TO NOTE THAT HOSPITAL RESTRUCTURING IS ONLY ONE COMPONENT OF A MUCH BROADER SYSTEM'S REVIEW WHICH INCLUDES COMMUNITY HEALTH AND RELATED SERVICES.

Secondly, we hope that the final vision will be used by other health and non-health groups and organizations across Niagara to guide their work as they chart a new course for the future.

Finally, we hope it can be used as a model for other jurisdictions who are faced with the same challenges as Niagara.

7. **The visioning exercise appears biased toward significant change to our health system. What if the majority of the people of Niagara don't want change?**

This exercise is biased toward significant change since we know change is inevitable given the current realities (in particular, economic realities and public demand for quality care). There are going to be further changes to our local system. We can either choose to be part of the solution and drivers of change, or let others (i.e., Queen's Park), who do not fully appreciate the unique health needs of the Niagara community, dictate what changes will be made.

We do not believe that the majority of people are against change since most people are aware of the realities driving change, and the need for change, in our health system. Doing nothing is simply not an option.

8. **Will any of Niagara's hospitals be closing as a result of the visioning exercise?**

Although the hospital sector came up in discussion many times during development of the draft vision, this exercise was not meant to, and did not, identify any specifics regarding future hospital composition in Niagara.

Given the provincial government's desire to find savings from the hospital sector to reinvest in other sectors of the system, it is expected that there will be fewer hospitals, as we know them, in Niagara's future health system. Nothing, however, has been decided at this point. Details regarding this issue will be studied this year as part of the District Health Council's Hospital Restructuring Study. This study is expected to commence in March 1996.

9. **How does the Council's Community Visioning Exercise differ from the Hospital Restructuring Study?**

These two initiatives represent separate components of a larger, more comprehensive project of the District Health Council. In April 1995, the Health Council embarked on a "Visioning and Restructuring Project for Niagara". This project is comprised of the following three components:

- o Community Education - As part of an on-going public education strategy, Council co-hosted a 3-part HEALTH MATTERS speakers series with Brock University in April and May of 1995 as a way of informing the public about the need for change in our local health care system.
- o Community Visioning - Next the Council engaged in a 6-month (Sept.- March 1995) community visioning exercise designed to set-out a future

course for Niagara's health system into the next century. This vision is intended to serve as the framework for future change.

- o Health System Reform - The final vision will be used to guide reform of Niagara's health care system over the next several years. Council's Hospital Restructuring Study will represent the first phase of implementation of a much broader and much more comprehensive system review which will occur over the next two or three years (and beyond !).

The vision is meant to map out a course for the future of Niagara's entire health system, with hospital restructuring being only one component of the implementation of this vision.

The Niagara District Health Council was formed in 1975 and is a local voice for health planning. The role of the Health Council is to provide advice directly to the Ontario Minister of Health regarding the health and health care needs of the residents of Niagara.