

**Regionalized Model for Maternal/Newborn
and Paediatric Services**
Working Together for Children's Health

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Background/Context

- In October 2003, the GTA Child Health Network (CHN) established an Internal Review Committee (IRC) to determine the optimal number, size and location of maternal/newborn and paediatric services across the GTA.
- Ministry supported the work in response to concerns raised at the time, including:
 - role and scope of hospitals and their 'designated' level;
 - capacity pressures and impact on access to care;
 - human resource issues, particularly paediatrician coverage.

Background/Context (con't)

- Great work and energy in trying to make the system better
- Despite challenges, positive developments include:
 - recent work in the east GTA around paediatric alternative payment options
 - improvements in the application of perinatal data to guide planning at CHN facilities
- Members agree: status quo - not a sustainable strategy for the future
- Benefits of an enhanced regional system:
 - stronger collaboration, linkages and shared services between hospitals
 - improved coordination between acute and non-acute programs;
 - more equity of service across the geography
 - raised “quality” bar;
 - clearer role definition and accountabilities.

“Strengthening the Maternal, Newborn and Paediatric System by Design”

- GTA CHN submitted its report, “Strengthening the Maternal, Newborn and Paediatric System *by Design*,” to the Ministry in March 2005.
- Report contains several recommendations related to paediatric and maternal/newborn care in the GTA in the following areas:
 - Human Resources
 - Tertiary Centres, Regional Centres, Community Hospitals
 - Primary /Level I Centres
 - Ambulatory Care
 - Transportation
 - Accountability
 - Communications
 - Final Sizing and Costing
 - Strengthening Community Linkages and Coordination Across the Continuum

Where we are

- Internal Ministry Review Committee (IMRC) conducted a review of the report's recommendations.
- Summary of IMRC review presented to Deputy Minister of Health and Long-Term Care in early November.
- Process of further analysis of the recommendations is ongoing - within the ministry and in collaboration with the GTA CHN.
- Need for additional information and analysis before presenting options to government for its consideration.
- Ministry appreciates work and committed to moving this process forward.

What we support

In general, based on its analysis of the report to date, IMRC:

- Endorses the general direction of the report.
- Agrees that steps need to be taken to build a better system for maternal/newborn/paediatric care in the GTA.
- Supports the concept of planning and service determination through regional centres for paediatric and maternal-newborn care.
- Acknowledges that community access to low risk maternal/newborn care may not be the same as it is today.

What we support (cont'd)

In general, based on its analysis of the report to date, IMRC (cont'd):

- Endorses the inclusion of performance objectives as part of performance/accountability agreements.
- Agrees that perinatal data continue to be developed and used by the ministry and CHN in planning and evaluation of the maternal/newborn system.
- Commends the use of Local Health Integrated Network (LHIN) boundaries as a basis for discussion and review of consolidation options.

More to do

- IMRC identified the following areas where further work and collaboration with GTA CHN and other partners is needed in order to inform the final ministry position:
 - Detailed financial analysis;
 - Capital constraints;
 - Mitigating strategies for areas where consensus was not fully achieved;
 - Need to develop a dynamic plan;
 - Provincial impact;
 - Role and importance of primary care services in the context of a regional approach.

Strategic Linkages - Local Health Integration Networks (LHINs)⁹

- LHINs - key component of government's plan to improve health care.
- LHINs are designed to:
 - Improve the accessibility of health services through greater integration of services on a geographic basis;
 - Bring economic efficiencies to delivery of health services;
 - Promote service innovation;
 - Improve quality of care;
 - Make the health care system more sustainable and accountable.
- GTA CHN report supports the direction of greater integration of services at the local level.
- Ministry needs to consider its response to the recommendations in the context of the role and mandate of the LHINs and upcoming LHIN legislation.

Moving Forward

- Complete the package of information
- Create a regional system for mothers, newborns, and children