



City of
Peterborough

To: Members of the General Committee

From: Sheldon Laidman, Commissioner, Community Services

Meeting Date: May 9, 2022

Subject: Support for Community Health Centre, Report CSSH22-010

Purpose

A report to request that Council provide a letter of support to the Peterborough Ontario Health Team for its application to the province for \$7.6 million in annual funding for a Community Health Centre that will serve 6,000 highly marginalized, unattached patients in the City and County of Peterborough.

Recommendations

That Council approve the recommendations outlined in Report CSSH22-010, dated May 9, 2022 of the Commissioner of Community Services as follows:

- a) That the presentation from Cathy Berges (Patient, Family, Caregiver Representative, Peterborough Ontario Health Team), Mark Graham (CEO, Canadian Mental Health Association Haliburton, Kawartha Pineridge; Peterborough Ontario Health Team Steering Committee member), Dr. Jackie Vanek (Physician), and Dr. Vanita Lokanathan (Primary Care Physician, Co-Lead Greater Peterborough Family Health Organization), be received for information; and
- b) That a letter of support be provided by the City to the Peterborough Ontario Health Team in support of its application to the province for annual funding in the amount of \$7.6 million for a Community Health Centre, that will serve both the City and County of Peterborough.

Budget and Financial Implications

There are no financial implications with this request.

Background

Provincial studies and community planning tables have identified the lack of primary health care equipped to serve marginalized populations in Peterborough. Over the pandemic this lack of connection to ongoing health care supports for marginalized individuals in the City and County was further exacerbated. A Community Health Centre (CHC) devoted to marginalized populations would provide care to patients lacking access to the social determinants of health, especially individuals experiencing homelessness. Data to support this includes:

- A 2012 analysis of Ontario communities with large populations with multiple barriers to access to primary health care identified Peterborough as being in dire need of a Community Health Centre (CHC).
- A 2018 study based on 2015/16 data from the Institute for Clinical Evaluative Studies identified Peterborough with the highest primary care need, the highest number of people diagnosed with a mental health disorder per 1,000 populations, and a high number of people diagnosed with a substance-use disorder per 1,000 population. Of the sub regions listing as meeting one or more of these parameters only Peterborough and Haliburton County do not have a CHC.
- Census data of the 20 most populous divisions in Ontario, only Peterborough City/County does not have a CHC.

Peterborough Ontario Health Team (POHT)

In 2019, the Ontario Ministry of Health (MOH) announced the Ontario Health Teams (OHT's) as a new model of care for the delivery of healthcare in local communities. The goal of OHT's is to better connect health care and other providers in ways that would make access easier and more integrated in local communities.

The Peterborough Ontario Health Team (POHT) was formally announced on December 9, 2019. POHT partner organizations share the goal of breaking down barriers to provide better care. This is done by improving transitions that benefit both patients and caregivers, realize better health outcomes, and ensuring efficient services. The POHT is led by a Steering Committee which includes the following organizations:

- Canadian Mental Health Association - Haliburton Kawartha Pine Ridge
- Care Partners
- The City of Peterborough Social Services Division
- Community Care Peterborough

- Curve Lake First Nation
- Hiawatha First Nation
- Hospice Peterborough
- Patient and Family Representatives
- Peterborough Paramedics
- Peterborough Regional Health Centre
- Primary Care
- Riverview Manor

Community Health Centres

CHC's are community centered, non-profit organizations governed by a community board. They focus on addressing the social determinants of health and are committed to health equity and social justice.

CHC's offer a diverse array of health and social services provided by an interprofessional team that includes salaried clinicians. Teams often include physicians, nurse practitioners, nurses, social workers, health promoters, community health workers and often chiropractors, nutritionists, or dietitians. CHC's work with residents to build capacity of the community to improve its general health.

Establishing a CHC would move forward several of the POHT's key priorities and aligns well with strategic directions outlined in several of the City's Plans (10-Year Housing and Homelessness Plan, Community Well-being Plan, Age-friendly Plan). A local CHC would also support the integration work of Social Services and the early aims of the Community Safety and Well-being Plan. It provides integrated and collaborative supports and services from a broad range of social and health providers to the most marginalized individuals and families in the community.

This request does not impact the physician recruitment campaign, as these complement each other in attracting health professionals who are interested in different types of work.

Development of the Proposal

During the fall of 2021 POHT hosted four town hall meetings to seek input on local healthcare priorities and future community priorities. Participants of these sessions offered their perspectives on the work of POHT, as follows:

- Strongly supported the continuation of efforts toward the identified priority populations (frail, complex and elderly patients, as well as those using mental health and addictions services)

- Ranked the following three factors that impact health as top priorities:
 - housing and homelessness;
 - access to healthcare; and
 - income

Five themes emerged from participants' comments. These items are listed below in priority order, as follows:

1. Prioritize timely and efficient access to healthcare to address needs in community
2. Strengthen collaboration and communication among healthcare providers
3. Create better healthcare options for people who face greater barriers to accessing current services, especially senior and homelessness populations
4. Availability of health professionals
5. Address social determinants of health

In response to the feedback above, and other identified needs in the community, the POHT formed a sub-committee, and contracted a consultant to assess the need and seek funding for a CHC to serve 6,000 highly marginalized, unattached patients. Members of the subcommittee included:

- 360 Nurse Practitioner-Led Clinic
- Peterborough Family Health Team
- Fourcast
- Canadian Mental Health Association—Haliburton Kawartha Pine Ridge
- Kinark
- City of Peterborough Social Services Division
- VON
- Peterborough Regional Health Centre
- 2 physicians
- A patient representative

The consultant prepared a proposal that included the input collected from consultations with over 75 health care/service providers and patients as well as guidance from the subcommittee.

Key supporting information from the Report:

- POHT has the 4th highest level of marginalization of the 42 OHT's due to its high levels of dependency, material deprivation, and residential instability. Despite these high levels of marginalization and its significant unattached population, Peterborough does not have a CHC
- Analysis of data on POHT's unattached population indicates that unattached patients are more likely to be younger, poorer, and male, and are disproportionately recent immigrants. Local service and health providers suggest that those who are unable to become attached are precisely those who need the

most care, those being individuals who live with complex mental health and/or addictions, extreme poverty, and disability. Newcomers, racialized individuals, Indigenous persons, and individuals who identify as 2SLGBTQ+ were also identified as facing barriers to obtaining care that meets their needs.

- Local data supports poor health outcomes, higher costs, and a steady decline in the wellbeing of the most disadvantaged individuals in our community compared to other OHT's in Ontario. Of the 42 OHT's, Peterborough's rankings on measures correlated to marginalization are as follows:
 - Premature mortality - 3rd worst
 - Average monthly cost - 12th worst
 - Emergency room visits best managed elsewhere - 6th worst, and 84% higher than the provincial average
 - Ambulatory Care Sensitive Hospitalizations -15th worse, and 63% higher than the provincial average
 - Physician visits after hospitalization - 4th worse, and 11% lower than the provincial average
 - Opioid crisis - 4th highest rate of opioid related deaths and the 3rd highest rate of opioid related hospitalizations in Ontario

Summary

Given the general pressures on local health care human resources and the challenges of serving marginalized populations, the resources of a CHC are needed in Peterborough City and County. The POHT is submitting a request for \$7.6 million in annual provincial funding to support this much needed community resource and is requesting a letter of support from the City of Peterborough for this initiative.

Submitted by,

Sheldon Laidman
Commissioner of Community Services

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