KW4 ONTARIO HEALTH TEAM

Report to
Steering Committee

EXECUTIVE DIRECTOR

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Executive
Director

COMMUNITIES AND STAKEHOLDERS WORK

CULTURALLY RELEVANT APPROACHES WITH FIRST NATIONS, INUIT AND METIS PEOPLES LIVING WITH DIABETES

On **April 10, 2025**, the Diabetes with Indigenous Older Adults Working Group, in partnership with the Indigenous Diabetes Health Circle (IDHC), hosted a virtual workshop for health care providers and educators. The session focused on culturally grounded approaches to supporting First Nations, Inuit, and Métis Peoples living with Type 2 diabetes.

Facilitated by **Crystal Bomberr**y (Mohawk Nation - Turtle Clan, Six Nations of the Grand River), IDHC's Training Lead and long-standing advocate for holistic health, the session explored the intersection of historical and cultural factors that shape Indigenous health outcomes. Crystal guided participants through a timeline of policy-driven disruptions to Indigenous ways of life, connecting these shifts to present-day health inequities—especially regarding diabetes.

Participants learned about key characteristics of diabetes in Indigenous populations and how social determinants of health, including colonization, food insecurity, housing, and access to care, affect risk, management, and overall outcomes. The session also introduced IDHC's holistic model of care, which integrates Western and traditional Indigenous knowledge systems.

A highlight of the workshop was guest speaker **Cathy Andrus** (Ojibwa, Turtle Clan, Alderville First Nation). Cathy shared her lived experience as an Indigenous older adult living with diabetes in the Waterloo Wellington region. Through her story, she emphasized the need for culturally respectful care and the role of community support in navigating the health system.

At the core of the session was the message that Indigenous culture and land is not only a source of identity and autonomy, but a critical element of healing and well-being.

Next Session

The second webinar in this series will take place virtually on May 8. Register here to continue learning about culturally-rooted approaches to care.

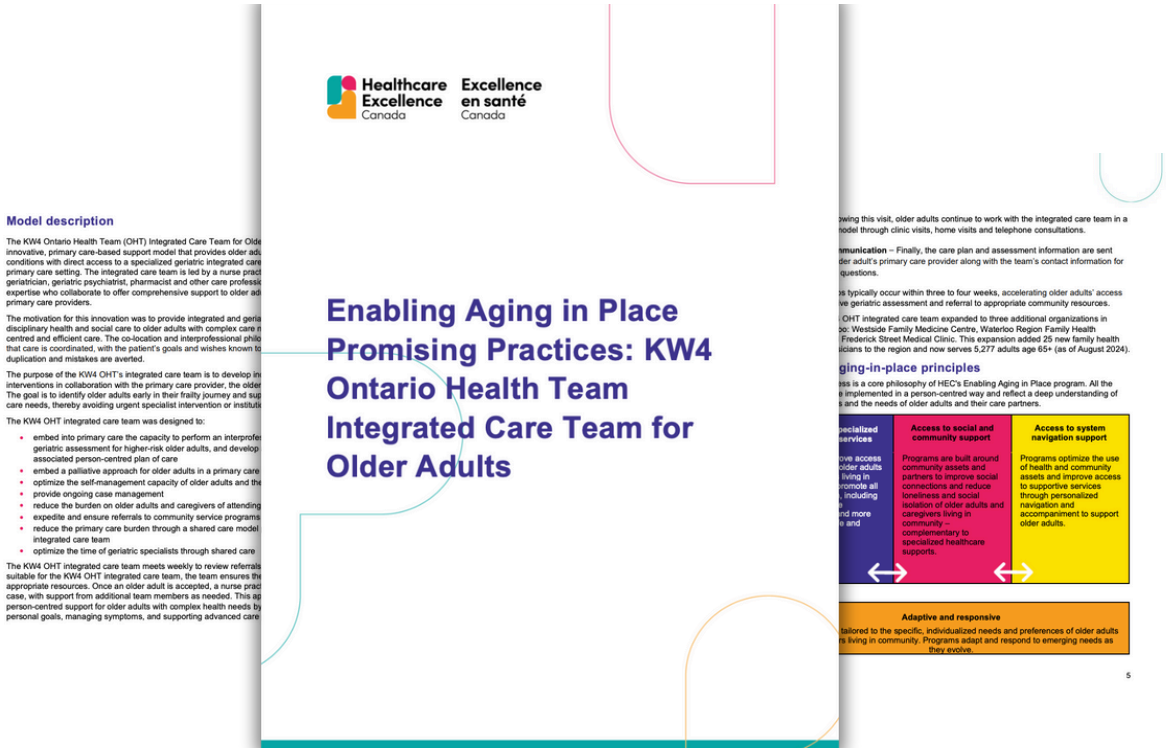
COMMUNITIES AND STAKEHOLDERS WORK

ICT HIGHLIGHTED BY HEALTHCARE EXCELLENCE CANADA

Congratulations to the KW4 OHT Integrated Care Team for Older Adults program on being recognized as a Promising Practice for Enabling Aging in Place by Healthcare Excellence Canada!

This prestigious acknowledgment highlights the team's exceptional dedication to providing comprehensive, person-centered care for older adults with complex health needs. This innovative approach and commitment to excellence have significantly improved patient outcomes and set a high standard in healthcare.

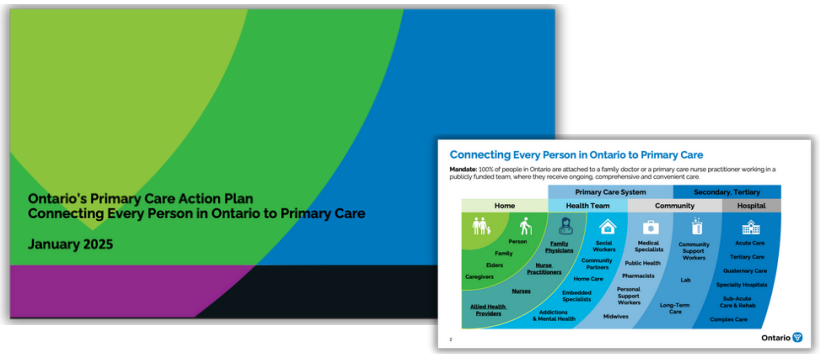
Well done and keep up the outstanding work!



COMMUNITIES AND STAKEHOLDERS WORK

PRIMARY CARE ACTION PLAN – EXPRESSION OF INTEREST

On January 27, 2025, the Government of Ontario announced that it is investing $1.8 billion to support the Primary Care Action Team's plan to attach every person in Ontario to primary care. The action plan includes a suite of initiatives, including a commitment to establish and expand over 300 additional primary care teams that would attach approximately two million more people to primary care by 2029.



For 2025/26, there will be an investment of $235 million which will be used in part to establish and expand up to 80 additional primary care teams across the province that would attach 300,000 more people to ongoing primary care. The Government of Ontario is also committing to ensuring that every person on the Health Care Connect waitlist (as of January 1, 2025) is attached to a primary care team by the Spring of 2026.

Round 1 of the Interprofessional Primary Care Team Expansion proposals was released on April 10th and is a targeted call for proposals based on postal codes with the highest number of people not currently attached to a primary care clinician, including those on the Health Care Connect waitlist.

The KW4 OHT has 4 postal codes identified for consideration in this round, including N0B, N2E, N2M, and N2L. A Working Group consisting of leaders from across primary care, and the entire health and wellness system has been convened and is in the process of drafting proposals to capitalize on this incredible opportunity.

Proposals are due May 2, 2025.

HEALTH SYSTEM UPDATES

AI SCRIBE

The Health Care Unburdened Grant to support the implementation and evaluation of AutoScribe, a Canadian AI scribe technology for transcribing patient-clinician conversations in real time and enhancing medical record documentation, began the second round of onboarding of KW4 OHT primary care providers in April. The registration form to access the 6-month free AutoScribe solution will be open until May 30, 2025.

At the time of reporting, 27 primary care clinicians had activated the scribe, with 13 additional providers in the pipeline to participate. This initiative aims to explore and accelerate the adoption of AI scribe technology while reducing the administrative burden faced by primary care clinicians, benefiting patients and the Ontario health system.

The Canadian Medica Association, MD Financial Management Inc. and Scotiabank proudly support this program, one of several initiatives that comprise their $115 million commitment to supporting the medical profession and advancing health in Canada.

HEALTH SYSTEM UPDATES

HEALTH 811 IDEATION SESSIONS

In April, the KW4 OHT, members and community representatives attended the Health811 Ideation Sessions for 2025. These sessions provide an opportunity for patients, caregivers, clinicians, and administrators to help inform the continued development of Health811. Health811 is the provincial patient platform for accessing health information and services 24/7.

Session 1:
Health811 Supporting Primary Care (April 23)
This session focused on how Health811 could better support primary care and assist people without a family doctor in accessing care and understanding their options. Attendees participated in a brainstorming exercise centered around seven questions, such as

> **"What services would be useful to you while waiting to be attached to a primary care provider or team?"**

> **"How can Health811 connect people to primary care?"**

Ideas from attendees included access to prescription renewals where possible, reminders for preventative screening tests, and easy access to self-management resources for chronic diseases.

Session 2:
Health811 Supporting Mental Health & Addictions (April 24)
This interactive session focused on how Health811 could improve access to mental health and addiction services in Ontario. Attendees provided feedback on how Health811 could support people:

- When they are waiting MH&A services
- How Health811 as a virtual service can help support people to access mental health support from their home
- The types of mental health and substance abuse information and resources would be helpful on Health811

HEALTH SYSTEM UPDATES

HEALTH 811 IDEATION SESSIONS

Session 2:
Health811 Supporting Mental Health & Addictions (April 24)
Ideas from attendees included connecting people with a social worker or peer support while awaiting services, collaborating and utilizing existing services like ConnexOntario, publicly list wait times for mental health services that are relevant to the user, and ensure resources and guidance are culturally safe and sensitive.

The final session, **Improving Health811 Usability & Innovation** (May 8), will focus on how the province can make Health811 easier to use and explore new ideas like AI, access medical records and more.

The Health811 team will compile the results of these ideation sessions, identify key themes, and share this with the attendees in the summer to confirm consensus and prioritize the suggested enhancements. Following this, the Health811 team will assess the feasibility of these enhancements based on attendee consensus and communicate the feasibility and future plans for Health811 in the fall.