KW4 ONTARIO HEALTH TEAM

Report to Governance Table

EXECUTIVE DIRECTOR

OCTOBER 2025

Ashnoor Rahim
Executive Director

TABLE OF CONTENTS

MESSAGE FROM THE EXECUTIVE DIRECTOR

As we move through the final quarter of 2025, I am proud to reflect on the continued collaboration, innovation, and commitment demonstrated by KW4 OHT partners across our region. Together, we are advancing system transformation through initiatives that improve access, strengthen integration, and ensure that equity remains central to all we do.

This fall, the launch of the new KW4 OHT website marked a significant step toward enhancing accessibility, transparency, and engagement for our communities and partners. Designed with the public, primary care providers, and system navigators in mind, the website reflects our shared goal of creating a more connected and informed healthcare environment.

Our ongoing work in equity and system integration remains deeply rooted in partnership. The Providing Safe Diabetes Care with Indigenous Older Adults initiative—co-developed by Indigenous leaders, educators, and community members—reflects our shared commitment to reconciliation and culturally safe care. It serves as a meaningful example of how we can blend traditional knowledge with clinical best practice to support better outcomes for all.

Our communications and engagement efforts continue to build momentum through community-driven projects such as the 2026 Wellness Calendar, co-designed with older adults to promote wellness, inclusivity, and connection. The Healthcare Connect campaign continues, and the OHT is translating the poster into multiple languages. The Pregnancy Clinic launch is another example of local collaboration addressing a critical gap in access to prenatal care for individuals without a family doctor or nurse practitioner.

MESSAGE FROM THE EXECUTIVE DIRECTOR

At the system level, the Waterloo Region Mental Health and Addictions System Transformation Team (MHA STT) continues to make meaningful progress in aligning services, optimizing resources, and improving outcomes for individuals with complex needs. This cross-sector collaboration exemplifies our collective ability to act as one system, using data and equity insights to drive impactful change. Similarly, the Community Support Services (CSS) Navigation Team continues to demonstrate the value of coordinated care by connecting patients and providers to essential community and social supports, with planning underway to expand the model.

Finally, our engagement through the Community Advisory Council (CAC) and rural network ensures that diverse voices shape our priorities. Events such as the Engage Rural Launch and the Managing Diabetes with Indigenous Older Adults Gathering highlight the power of community-led collaboration and shared learning in advancing health equity and inclusion across KW4.

I extend my sincere gratitude to all KW4 partners, providers, and community members for your continued dedication, compassion, and leadership. Together, we are building a more connected, responsive, and equitable health system—one that reflects the strength, diversity, and resilience of the KW4 community.

Ashnoor Rahim
Executive Director, KW4 Ontario Health Team

COMMUNICATIONS & ENGAGEMENT

WEBSITE UPDATE

The new KW4 OHT website officially launched this fall, marking a significant step forward in improving accessibility, transparency, and engagement with our community and partners.

The website has been designed with three key audiences in mind:

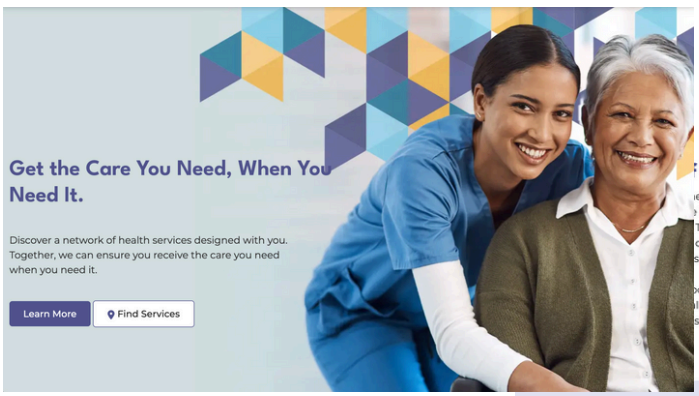
PUBLIC COMMUNITY

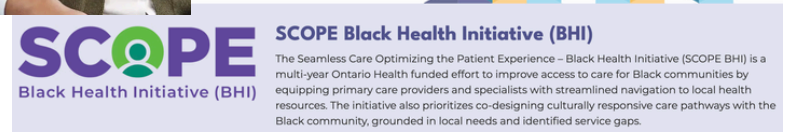
PRIMARY CARE PROVIDERS

SYSTEM NAVIGATORS

Recent efforts have focused on refining content, optimizing accessibility compliance (WCAG 2.1), and enhancing navigation for a more intuitive user experience.

Updates include clearer program descriptions, improved visual design, and refreshed imagery that reflects the diversity of the KW4 population. The team is also reviewing all images and graphics to ensure they meet accessibility and compliance standards, with additional refinements planned for early 2026.





COMMUNICATIONS & ENGAGEMENT

WELLNESS CALENDARS

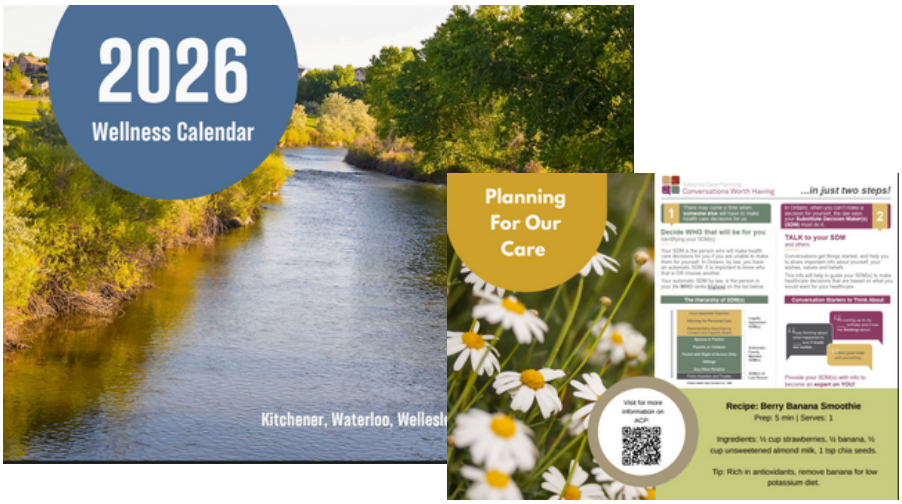
The 2026 KW4 Wellness Calendars have been finalized, printed, and are now available for pickup across the region. This year's calendar was co-designed by older adults and service providers to ensure it reflects the needs, interests, and lived experiences of our community's aging population.

The calendar includes space for appointments, special dates, and health and wellness check-ins, as well as major community holidays, games, and brain teasers — with answers conveniently located at the back. Each month features local health programs, resources, and culturally inclusive visuals that promote holistic well-being and community connection.

A sincere thank-you goes out to the Waterloo Wellington Older Adult Council, the Wellness Calendar Working Group, and all the community partners and older adults who contributed their ideas and feedback to bring this project to life.

We aim to have copies available for pickup at primary care clinics, community health centres, libraries, and municipal offices across KW4.

For those requiring larger quantities or organizational drop-offs, arrangements can be made by contacting Nichola Harrilall at nichola.harrilall@kw4oht.ca. This initiative continues to strengthen KW4's visibility in the community and supports our shared goal of promoting accessible, practical health information for all.



COMMUNICATIONS & ENGAGEMENT

HEALTHCARE CONNECT – FLYER AND TRANSLATION

As part of KW4's ongoing commitment to connecting residents without a family doctor or nurse practitioner to primary care, a new bilingual flyer was developed to promote the provincial Healthcare Connect program.

The flyer, which has been approved by Ontario Health atHome, provides clear, step-by-step information on how residents can register and what to expect after enrollment. Recognizing the linguistic diversity of the KW4 population, translation of the flyer into multiple languages — including Arabic, Simplified Chinese, Punjabi, Spanish, and Tigrinya — is currently underway to ensure equitable access to information. Each translated version will feature a unique QR code, enabling KW4 to gather data on usage and engagement by language group. Once finalized, the flyers will be distributed through community partners, local settlement agencies, primary care offices, and hospital discharge teams to ensure broad reach.

In alignment with the CAC Engagement Framework, the Community Advisory Committee will activelysupport the circulation of theseflyers throughout the communityand provide feedback on strategies for further outreach to maximize awareness. A digital version will also be hosted on the KW4website for easy download andsharing.

COMMUNICATIONS & ENGAGEMENT

PREGNANCY CLINIC

Communications support was provided for the launch and promotion of the new Pregnancy Clinic, which offers prenatal care for individuals who do not have a family doctor or nurse practitioner. The clinic aims to bridge a key gap in access to early and consistent prenatal care in the KW4 region.

A communications package — including a flyer, social media graphics, and website content (coming soon) — was developed to raise awareness among both healthcare providers and community members. Messaging emphasizes inclusivity, accessibility, and ease of referral. The clinic's promotional materials are being distributed.

PMO/PROJECT UPDATES

ONLINE APPOINTMENT BOOKING FUNDING APPROVED

We're pleased to share that KW4 OHT has received funding approval from Ontario Health to continue advancing the Online Appointment Booking (OAB) initiative across our OHT for this fiscal year.

The approved proposal includes 26 primary care sites across the OHT, representing 122 existing online schedules from the previous fiscal year that requested funding to maintain and enhance their use of OAB. In addition, the proposal includes 25 new licenses, enabling additional providers to make their schedules available for patients to book appointments online.

This investment directly supports KW4 OHT's strategic objectives and provincial priorities by:

Expanding digital access to care,

Enabling patients to book appointments at their convenience, and

Enhancing service delivery across participating primary care settings.

The expanded implementation of OAB will improve how patients connect with care, strengthen system integration, and support more timely access to primary care services within KW4 OHT.

PMO/PROJECT UPDATES

WATERLOO REGION MENTAL HEALTH & ADDICTIONS SYSTEM TRANSFORMATION TEAM (MHA STT)

OBJECTIVE:

The MHA STT was created to align MHA cross-sectoral work happening across Waterloo Region to prevent duplication of tables, optimize resources, and improve impact through integrated and coordinated MHA care. The Team leads the identification of opportunities to collaborate, integrate, innovate, and improve social care, and MHA services for residents along with health system partners. Using hospital and community data, the team applies an equity lens to prioritize system improvement initiatives to be implemented based on populations/neighborhood(s) of highest need while also considering the rural-urban dynamic in our region.

The work of the MHA STT is currently focused on the Frequent Emergency Department Visits for Mental Health and Addictions Care indicator.

OHT MEMBERS INVOLVED:

MHA STT membership includes individuals engaged with the system of MHA in Waterloo Region with a goal of bringing together diverse perspectives and views, including;

- Senior leaders from organizations in community MHA services, social services, equity serving organizations, the municipalities, paramedic services, police services, primary care, and acute care
- Patients, families, and care partners with lived and living experience as well as others who are interested in system improvement.
- Supporting members of the CND and KW4 OHTs

PMO/PROJECT UPDATES

CONT'D

UPDATE:

There are six action-oriented Mobilizations Teams.

Mobilization Team	Goal	Work Completed	Next Steps
Frequent Individual Users	Reduce ED visits by patients with 4+ visits in 6 months for mental health/ addictions.	Pilot at WRHN identifying high users. Approach to care coordinated with existing services or case managers. Process being developed for non-consenting individuals to be directed to Service Resolution or Connectivity Table.	Evaluate pilot and build sustainability business case. Explore expanding process to Cambridge Memorial Hospital
Data and Evaluation	Enable data sharing/analysis to coordinate care and identify gaps in the system.	Identified data being collected by police, paramedics, and hospitals. Engaged with Health IM (InterRAI) and IDS. Distributed survey to understand data needs.	Develop consent process. Pilot WRPS–Threshold collaboration. Expand IDS participation. Share de-identified data with UW.
Housing and Homelessness	Improve stability for unhoused via improved hospital transitions, long-acting injections, and transitional housing.	Connected community outreach services to the community triage group. Assessed long-acting injection capacity and demand. Proposed 12-week interim housing pilot to support hospital discharge.	Confirm discharge pilot details. Design injection outreach model with psychiatry.
Supporting People Holistically as a System of Providers	Improve knowledge of referral pathways and communication between primary care and MH&A services.	Updated triage documents for youth/adults.	Share drafts for feedback. Translate/finalize docs. Explore electronic communication loop. Gather wait time data.
Youth MHA Prevention	Work collaboratively to advance prevention strategies that support youth facing barriers and inequities across Waterloo Region to reduce future challenges of substance use and mental health concerns.	Piloted free youth recreation project in partnership with YMCA Completed an evidence review to inform future actions.	Exploring potential for a Youth Wellness Hub to service Kitchener, Waterloo, Wellesley, Wilmot, and Woolwich. Establish action groups for project implementation.
Homeless and Addiction Recovery Treatment (HART) Hub	Offer coordinated care for homeless individuals with MH&A issues.	7 partner agencies providing services. Expanded services at multiple sites. Developed referral pathways and intake processes. Intake started	Explore incorporating ADCs under HART hub umbrella.

PMO/PROJECT UPDATES

COMMUNITY SUPPORT SERVICE (CSS) NAVIGATION TEAM

Project Overview:

The CSS Navigation Team began as a pilot project in Spring 2023 with an official soft launch of the new service in Fall 2023. The CSS Nav Team provides access to team-based resources, a centralized point of contact for access to social and community support services as well as system navigation support to Family Health Organization (FHO) providers and their patients. The initial scope of the pilot focused on The Boardwalk in Waterloo due to the concentration of FHO clinics.

KW4 OHT MEMBERS INVOLVED:

Community Care Concepts, FHO Providers at the Boardwalk

UPDATE:

Planning for the expansion of the CSS Navigation Team program has commenced. Several options were reviewed in July 2025; however, further decisions were deferred pending confirmation of funding. An evaluation plan has been developed and is currently under review.

Current Perfomance

Indicator	Current Performance (Aug 2025)	Performance YTD (2025/26)	25/26 Target
# of providers/FHO participating	49 (100% of known FHO providers in the Boardwalk)	49	100% of FHO providers in the Boardwalk
# of clients connected to services	21	112 (avg. 22.5/month)	Targets to be set post expansion decision.
% of referrals for patients in priority neighbourhoods	42.8%	17.9%	

EQUITY & SYSTEM INTEGRATION

PROVIDING SAFE DIABETES CARE WITH INDIGENOUS OLDER ADULTS

Statistics show that Indigenous peoples are diagnosed with diabetes at a younger age, have more severe symptoms when diagnosed, face higher rates of complications, and experience poorer treatment outcomes. The ‘call to action’ by local Indigenous community, to address diabetes care and treatment for Indigenous older adults, has led to the creation of an educational infographic.

Co-designed by Indigenous older adults, an Indigenous artist and diabetes educators from across Waterloo-Wellington, the infographic combines Indigenous experiences with diabetes best practice research, to foster greater health-care relationship building, quality of care and better outcomes for all.

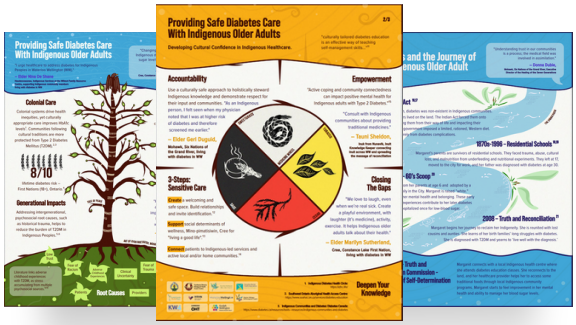
Highlights of the Infographic:

- Contextualizes how colonization increases risks of diabetes beyond genetic risks
- Contains references and links for building knowledge
- Provides actionable steps to foster truth and reconciliation
- Follows the historical introduction and consequences of diabetes within an Indigenous family

Intended Audience:

- Diabetes educators and health service providers who support Indigenous Peoples living with diabetes

Acknowledgement: Artwork by Ryan McTavish, Mohawk Six Nations of the Grand River and Designer Andreea McKague



Partners: Healing of the Seven Generations, SOAHAC (Southwest Ontario Aboriginal Access Centre), WWOAC (Waterloo Wellington Older Adult Council), Canadian Mental Health Association Waterloo Wellington, Guelph Family Health Team, Waterloo Wellington Diabetes, Waterloo Wellington Self-Management Program, Waterloo Regional Health Network, KW4 OHT, GW OHT, CND OHT

COMMUNICATIONS ENGAGEMENT & CAC

MANAGING DIABETES WITH INDIGENOUS OLDER ADULTS THROUGH TWO-EYED SEEING

On October 14th 2025, over 30 participants - Indigenous older adults living with diabetes and healthcare professionals - gathered in a circle, creating a space of respect, shared learning, and cultural humility. The session was hosted by the Diabetes with Indigenous Older Adults Working Group, sponsored by the Waterloo Wellington Older Adult Council.

The session opened with a talk by Grandmother Renée Thomas-Hill, who spoke on “Returning to Our Original Instructions.” Rooted in love, gratitude, and healing, her message included a ceremony that set a powerful tone for connection. A key teaching for health professionals was:

"You need to learn to cry. Crying allows you to unclog emotions and release grief."

This highlighted the importance of acknowledging emotional and spiritual health alongside physical care when supporting Indigenous older adults.

The gathering focused on diabetes management and offered a valuable opportunity to learn from both community members and healthcare providers.

Keri Howell, Registered Dietitian with Diabetes Care Guelph, presented on “Food and Blood Sugars,” introducing the Nourished Plate Method, based on her work with the Six Nations Department of Wellbeing. Her presentation covered:

- A basic overview of nutrition and blood sugar
- Eating behaviours and food substitutions
- Local food access points

COMMUNICATIONS ENGAGEMENT & CAC

ENGAGE RURAL LAUNCH EVENT – STRENGTHENING RURAL VOICES ACROSS KW4

On October 2, 2025, KW4 OHT was invited to attend the Engage Rural Launch Event at The Timber Barn in St. Jacobs.

Engage Rural is a collaborative of eight rural health and social service agencies across Wellesley, Wilmot, Woolwich, and North Dumfries, united by a shared purpose:

- To strengthen and amplify rural voices
- To recognize the distinct needs of rural communities
- To advocate for equitable resources and access to services

The group plays a vital role in identifying needs and gaps, leveraging member expertise, and ensuring rural perspectives inform broader regional strategies.

The launch featured keynote speaker Gwen Devereaux from Gateway for Rural Excellence, who shared insights on advancing collaboration, innovation, and advocacy in rural health.
This event marked an important step forward in KW4's ongoing efforts to promote health equity, collaborative planning, and inclusive engagement across both urban and rural communities.

COMMUNICATIONS ENGAGEMENT & CAC

VELOCITY HEALTHCARE PANEL – “TECHNOLOGY NEEDS TO KEEP UP WITH HEALTHCARE, BUT HOW?”

On October 7, 2025, KW4 OHT attended a healthcare panel hosted by Velocity in partnership with Amplify Care, bringing together leaders from Ontario Health Teams across the province, including Guelph Wellington, Cambridge North Dumfries, Grey Bruce, and Huron Perth & Area.

The discussion focused on a central question:

How do we ensure digital health tools are not only built right, but also deployed, sustainable, and evaluated effectively?

The event provided valuable insights into how innovators and health system partners are collaborating to strengthen Ontario’s digital health ecosystem. A key takeaway from the discussion was that collaboration and adaptability are essential to advancing a more connected and resilient healthcare system.

COMMUNICATIONS ENGAGEMENT & CAC

THE RAPID ACCESS TO PRIMARY CARE CLINIC (RAP) - COMMUNITY HEALTHCARING KW AT THE ASSOCIATION FOR FAMILY HEALTH TEAMS ONTARIO (AFHTO) CONFERENCE

On Friday, October 24th, Tara Groves-Taylor, CEO, and Wajma Attayi, Director, Primary Care, at Community Healthcaring KW, presented Rapid Access to Primary Care: Harnessing the Power of Your Partners to Create Capacity and Improve Patient Experience at the Power of Primary Care Conference Hosted By AFHTO Conference in Toronto.
The presentation engaged audience members in:

Addressing Two Big System Issues
Primary care providers are reporting that they are over capacity and hospitals are entering a time of fiscal constraint. How do we achieve the provincial goal of 100% primary care attachment from the Primary Care Action Team?

Acting like a System
Family Health Teams (FHTs) are a key part of the health system and a RAP Clinic can help reduce pressure from FHTs as they take on previously unattached patients. Working with the strengths of each partner across the system helps reduce pressure on any single clinic.

Since February 2024, the RAP Clinic has provided primary care access to patients without a primary care provider. The patient's immediate needs are addressed, and patients are provided with care in their preferred language using VOYCE technology.

Congratulations to Community HealthcaringKW and to Tara and Wajma on a job well done!