

Getting Better

SPRING 2018

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CHATHAM-KENT | SARNIA/LAMBTON | WINDSOR/ESSEX



Ontario

Local Health Integration
Network

We Need Your Help!



Dr. Martin Girash
Chair, ESC LHIN Board of Directors

Dear residents,

The Erie St. Clair Local Health Integration Network (ESC LHIN) has been working very hard over the last several years to improve our health care system. This work has included many community engagement activities where we listened to your concerns. Among these concerns was the amount of time you have to wait for services, especially if you come to one of our hospitals' emergency departments (EDs). We know that this concern has been compounded during this year's flu season, which has been described as the worst one in years.

In anticipation of this flu surge, preparations were made last fall to put additional beds in various institutions, including our hospitals. While this has helped, the scope of the outbreak has resulted in the continuation of long waits in the EDs. We are monitoring this situation and making adjustments as quickly as we can.

Although the current situation has been made worse by the intensity of the flu outbreak, it also points to an ongoing problem: namely, that we are attempting to meet our health care needs with approaches that are no longer adequate. This includes using the EDs for primary care services. The ESC LHIN has been working on a number of changes to address this problem, including facilitating increased coordination, collaboration, and communication within our local health care system in order to put your needs first. While steps toward this transformation are proceeding well, it has become clear that we (the local health care system) cannot do this alone. We need your help!

Historically, patients have used hospital EDs for most of our health care needs. This is because other parts of the health care system are not usually available during evenings and weekends, and do not offer the full spectrum of the health care services patients need. We are working to change this situation, but it will take some time.

Some patients, may mistakenly believe that they cannot do much to improve their health or be part of the solution when they are ill. The articles in this newsletter outline some of the ways in which patients have gained the knowledge and confidence they need to contribute to improving their own health. It also shows us that we do not have to do this alone — we are all partners in this work.

Martin Girash, Ph.D., C. Psych.
Chair, Board of Directors
Erie St. Clair LHIN

Connecting You with Support in the Community

The ESC LHIN is committed to connecting residents across Chatham-Kent, Sarnia/Lambton, and Windsor/Essex with information about health and support services available in the community. The LHIN can also help residents complete and submit referrals to agencies that offer these services. These services can be accessed through the LHIN's Information and Referral department or through www.eriestclairhealthline.ca.



Information and Referral

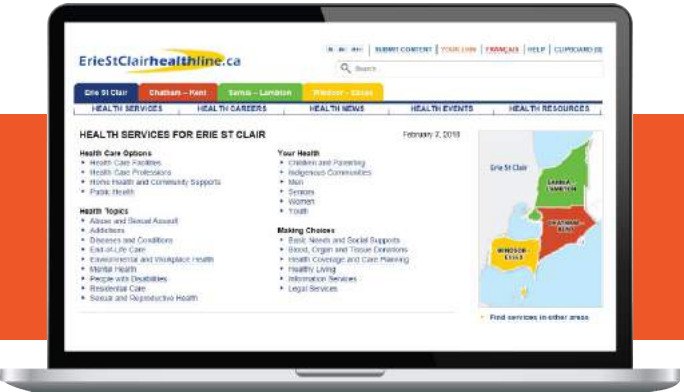
Staff in the ESC LHIN's Information and Referral department have an extensive knowledge of programs and services available across Erie St. Clair. If you are looking for information about a particular support service, or have a medical condition and are wondering what options are out there to help you, this team can provide that information either over the phone or via email (if using email, please do not provide any personal health information). If you prefer, Information and Referral staff can also complete a referral with you and send it to the appropriate agency on your behalf.

To connect with the ESC LHIN's Information and Referral team, please call **1-888-447-4468** or email information.referral@lhins.on.ca.

Erie St. Clair Healthline

ErieStClairhealthline.ca is an online resource that provides accurate, up-to-date information about health care services available across the Erie St. Clair region. The website features:

- More than 1,700 service profiles for a variety of organizations and programs serving people who live in Chatham-Kent, Sarnia/Lambton, and Windsor/Essex
- A variety of search options to help users find the services they are looking for
- Health news, events, careers, and educational opportunities
- French-language resources
- Links to other health resources
- Virtual tours of long-term care homes



Are you a health service organization?
If you are not already listed on eriestclairhealthline.ca,
visit the website to add a new service profile or event.

Telehomecare Empowers Patients to Self-Manage Chronic Disease

I would still be sitting in a chair in the corner of the room, terrified of everything, if it wasn't for Telehomecare and the teaching that came along with it.

Sandra Bainton, who lives alone on a farm in Dresden, was hesitant when someone first suggested to her that she try Telehomecare to help self-manage her medical conditions. The 60-year-old had been diagnosed with cancer and had endured five surgeries over five years. After one of the surgeries, Bainton contracted bacterial pneumonia, which damaged 49% of her lungs and led to chronic obstructive pulmonary disease (COPD).

"I was petrified when I left the hospital," said Bainton. "COPD was foreign to me and I was a very active person. I really didn't get the whole point about Telehomecare."

What is Telehomecare?

The ESC LHIN Telehomecare program provides patients with weekly, in-home health coaching and daily monitoring of vital signs. Patients learn how to check their own blood pressure, weight, heart rate, and pulse. Using a touch-screen tablet provided through the LHIN, patients send their results, along with answers to a few simple health questions, to their Telehomecare nurse through the Ontario Telemedicine Network.

The nurse will contact the patient if their readings fall outside the normal range.

Additionally, the nurse provides health coaching about diet, exercise, and other factors that lead to optimal health outcomes.

During 2016, Telehomecare served more than 150 patients across Erie St. Clair and there is capacity to take on even more patients.

"The great part about self-management is that once a patient feels confident and in control of their chronic disease, their quality of life improves," said Patient Services Manager Jennifer Jovanovski. "Telehomecare supports people to stay in their home and out of hospital, which is something most of our patients want."



ESC LHIN staff member installing Telehomecare equipment in a patient's home.

After six months of using Telehomecare, Bainton is now successfully managing her condition on her own.

"The teaching part is the best," said Bainton. "As I got further along and I'd get that phone call because I lost weight or my blood pressure went up, I started to see the pattern — that's because I was cutting the lawn; that's because I went to a party. I was learning what set me back and I was becoming more confident."

Bainton credits her Telehomecare nurse for supporting her on the road to successfully managing her condition. "The nurse I had was exceptional. She would explain everything to me in great detail, not just, 'take this and go home.' She didn't make me feel stupid, which helped keep me motivated," said Bainton.

If you think Telehomecare might be right for you, please contact the ESC LHIN at **1-888-447-4468**.

After School Program Supports Healthy Living for Students

Every year, more than 200 students take advantage of the North Lambton Community Health Centre's (NLCHC's) After School Program. The program started in 2005 in the community of Forest, in Lambton County, and has now expanded to Kettle Point, Thedford, Watford, and Aamjiwnaang. **"It all began as a need identified by parents: How do we get our kids to reduce their television viewing and video-game playing after school?"** said Bel Jamieson, Health Promotion Team Lead at NLCHC. "The After School Program provides children in grades one through eight with a safe place to do physical activities, eat a healthy snack, and learn some healthy living tips along the way."

Jamieson said that the NLCHC took a close look at the country's social determinants of health and equitable access when deciding which communities and/or neighbourhoods would benefit most from the program, which is currently funded through a grant from the Ministry of Tourism, Culture and Sport, and is of no cost to parents.

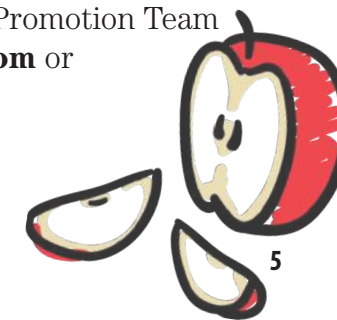
According to the NLCHC, **77% of children said that they tried new foods after attending the program**, and 84% said that they had learned a new game. Parents also saw positive results: **80% of them said that the amount of time their kids are spending looking at a screen had decreased significantly**.



"We received really positive feedback from parents. They're happy to have a safe place for their kids to go after school that's supervised and provides a healthy snack and health education sessions delivered by community partners, including the Ontario Provincial Police and the St. Clair Child & Youth Services, to name a few," noted Jamieson. "Kids love the program as well. The games, cooking days, and, of course, the snack, are their favourites! They also enjoy coming together and making friends with other children they don't necessarily go to school with."

The After School Program also includes a leadership component through which the older children are provided opportunities to build their leadership skills. Many of the participants return to the program to work as program leaders after they graduate.

If you are interested in the After School Program, contact Bel Jamieson, Health Promotion Team Lead, at **bjamieson@nlchc.com** or **519-786-4545 ext. 273**.



Combating the Opioid Crisis Across Erie St. Clair

18 of every 100 people living in the Erie St. Clair region filled at least one prescription for opioids in 2015–2016 — the highest rate in the province.

The rise in opioid overdoses is devastating communities across Ontario and Canada, and the Erie St. Clair region is not immune to this crisis. Since 2003, the number of opioid-related deaths in the province has increased by 136%, including 850 Ontarians in 2016 alone, according to Public Health Ontario.

Erie St. Clair LHIN data shows that there were nearly 150 opioid-related emergency department visits between April and September 2017.

Jessica, of Sarnia and the Aamjiwnaang First Nation, began using drugs at the age of 12 and, as a 15-year-old, turned to Percocet. “At first I didn’t think it was so bad because everyone was doing it — we were all just popping them,” said Jessica, who is now 29 years old. “But after a couple of months, the Percocet wasn’t doing anything anymore, so my friends started snorting it. And then that wasn’t enough so we started taking opiates intravenously.”

Addressing the crisis

The Ministry of Health and Long-Term Care (MOHLTC) is addressing the opioid crisis by investing \$222 million over three years to enhance the province’s Strategy to Prevent Opioid Addiction and Overdose.

The funding will help add more frontline harm-reduction workers, expand the supply of naloxone (a drug that temporarily reverses an opioid overdose), expand harm-reduction services such as needle-exchange programs, and introduce or develop supervised safe-injection sites. Funding under the strategy also supports withdrawal management, rapid access to addiction medicine, and increased access to comprehensive community-based addictions services and supports.

In Erie St. Clair, \$1 million of that funding has been invested in several programs, including residential withdrawal beds at Bluewater Health in Sarnia, which complements their existing community-based withdrawal management services. Additional investments include:

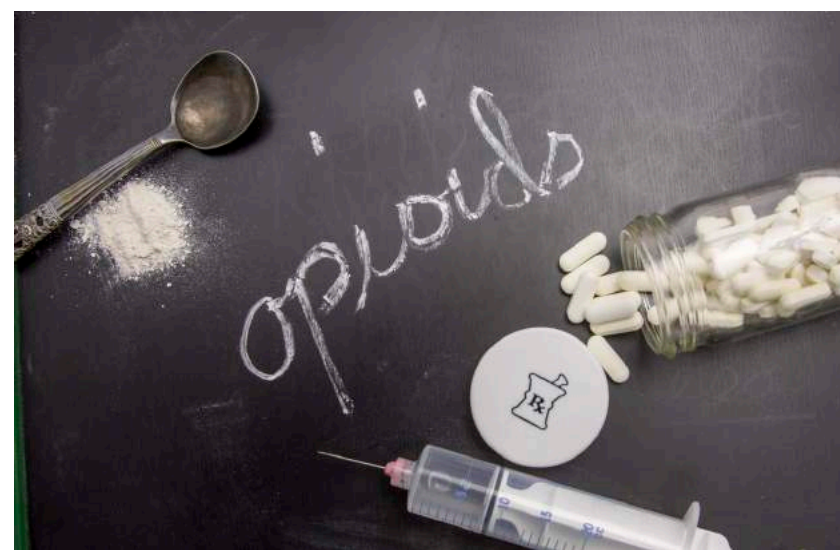
- New community withdrawal management workers to complement existing residential withdrawal beds at Hotel-Dieu Grace Healthcare in Windsor
- Community withdrawal management support staff for the Chatham-Kent region
- Expanding the regional Chronic Pain and Addiction Program, which is led by nurse practitioners. This expansion will focus on the Wallaceburg and Leamington areas as identified opioid “hot spots”
- On-the-ground addiction support workers through the Windsor Essex Community Health Centre, to be located at opioid hot spots (such as downtown Windsor and Leamington)

The MOHLTC also announced an Opioid Emergency Task Force in fall 2017. The Task Force will bring together province-wide system partners — including frontline workers in harm reduction, addiction medicine, and community-based mental health and addiction services — and people with lived experience of opioid addiction. The Task Force aims to ensure that those who are closest to the crisis are providing critical insight about what is happening on the ground.

In fall 2017, Jessica sought treatment at House of Sophrosyne in Windsor while pregnant with her fourth child.

“Getting high just wasn’t enough. I had been in and out of jail my whole life. I never actually lived; I just survived. After years and years of living on the street, trying to get the same feeling as I got with my first high, it never came back. So if I can’t get that feeling from pills anymore, maybe it’s time to walk away,” said Jessica, who has also used heroin and fentanyl over the years. “I never got to be a mother to my children and I’m just tired of that lifestyle.”

Jessica, who tried to get sober years ago, said she really benefitted from the House of Sophrosyne program. “When I used to think about getting sober, it wasn’t realistic for me. Now that I’m talking about my problems, it’s not as scary as I thought. I’m really looking forward to getting my life back. I’ve really never experienced living.”



What is an opioid?

Opioids are natural or synthetic substances used to reduce pain in clinical settings. While they can be an effective part of pain management for some medically supervised patients, opioid-related harms include addiction and overdose. Some of the most common prescription opioids include:

- Codeine
- Morphine
- Fentanyl
- Methadone
- Oxycodone (ie. Percocet)
- Tramadol (ie. Tramacet)
- Hydromorphone (ie. Dilaudid)

Getting help

There are many health service providers in the Erie St. Clair region that offer resources to help overcome opioid addiction, including:

- Brentwood Recovery Home
- Westover Treatment Centre
- House of Sophrosyne
- Bluewater Health
- Chatham-Kent Health Alliance
- Hôtel-Dieu Grace Healthcare
- VON - Chronic Pain & Addictions Program
- Canadian Mental Health Association Windsor-Essex and Lambton-Kent

For a full listing of local addiction support services, including methadone clinics, visit: www.eriestclairhealthline.ca

Other resources

ConnexOntario: Free, confidential health services information for people experiencing problems with alcohol, drugs, and mental illness. The service is funded by the Government of Ontario and operates helplines that are staffed 24/7, including:

- Drug and Alcohol Helpline: 1-800-565-8603
- Mental Health Helpline: 1-866-531-2600

Why Do You Have to Wait When You Get to the ED?

by Dr. David Ng

Hospital emergency departments (EDs) can be overcrowded and chaotic places with long wait times. Although the health care system is working hard to provide timely care, a stay in the ED can still vary from a few minutes to a number of hours. Here's why you may have to wait when you get to the ED.

What happens when you get to the ED?

When you arrive at the ED, a triage nurse will take a look at you, assess your condition, and determine how sick you are. If you are having a heart attack or a stroke, you will be seen immediately. The purpose of triage is to identify those who are the sickest so that they can be treated first.

What causes delays in the ED?

Delays in the ED are common — mostly because the available ED beds are rapidly filled, a reflection of the entire hospital being overcrowded. When the hospital is full of patients and there are no inpatient beds available, there is often a lengthy delay to move admitted patients out of the ED. This impacts the ED's ability to bring in new patients from the waiting room or from ambulance stretchers. Hospital overcrowding is a complex challenge to solve because it is caused by a lack of capacity and coordination in the health system to provide comprehensive care to a growing and aging population.

Sicker patients with complicated medical problems take more time to treat, and may have to wait in an ED bed for a lengthy testing procedure (e.g., CT scans, bloodwork) or for a specialist to consult with them. As the day continues, more patients arrive in the ED, filling up the available beds. As all the spaces become occupied, it becomes increasingly more difficult to admit new patients into the ED.

There are peak times during the day when high numbers of patients tend to show up at the ED — usually between 11:00 a.m. and 5:00 p.m. and from 7:00 p.m. to 9:00 p.m. — thus affecting wait times. At other times, caring for a critically ill patient (such as a person who has been in a serious car crash) will divert a significant amount of time and resources from the rest of the ED.

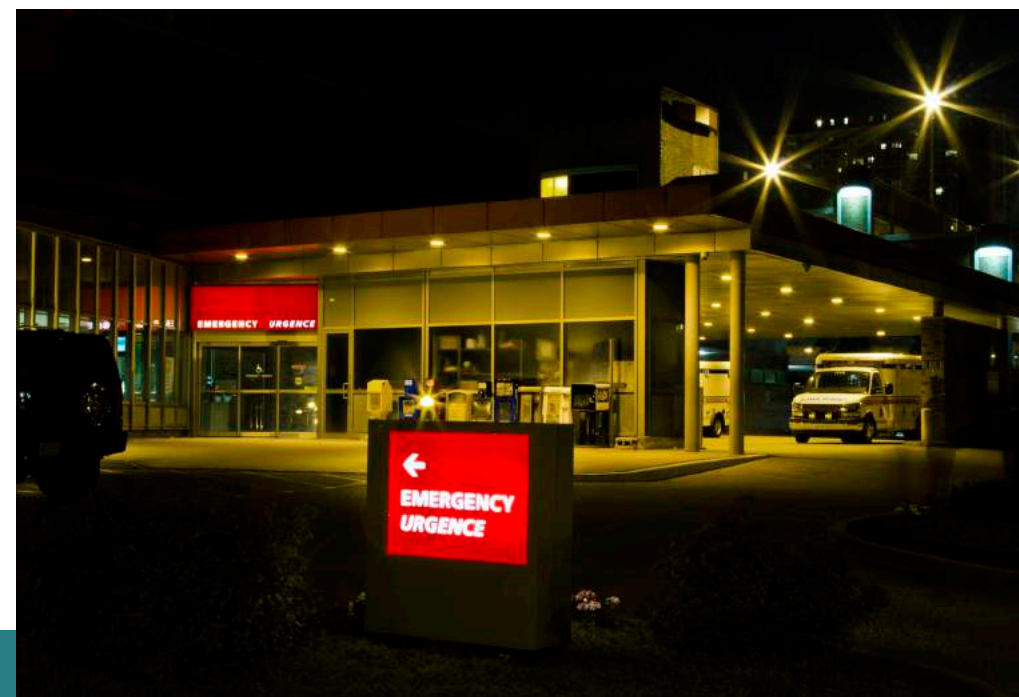
On the other hand, someone with a minor problem, such as a sprained ankle or a simple cut, can be seen sooner than a sicker patient because their problems do not need a lot of testing or a bed from which to receive care. Most people with minor problems go to urgent care clinics or are able to see their family doctor in a timely fashion, but after-hours, these resources may be hard to access. So patients with minor problems often come to the ED, especially if urgent x-rays or tests are needed. At other times, patients are worried about their symptoms and arrive at the ED seeking help because they do not know how severe their illness might be.



How can you help us help you?

ED staff are extremely dedicated and committed to providing the best care for you. Direct, face-to-face patient care is just the tip of the iceberg in caring for you. A lengthy amount of time is needed to research your medical history, coordinate your care, draw labs and queue for x-rays, complete computer order entry, and provide care for basic needs such as using the washroom and feeding, or cleaning your room, for example. Each patient encounter requires multiple steps amongst a team of providers, and a misstep or short cut could be dangerous. Your patience is appreciated by everyone involved in your care.

If you can, it is important to give the ED's health care providers clear information about your condition. Many sicknesses arise as a result of complications from previous health problems, such as diabetes and high blood pressure, or from habits like smoking or drinking, so being clear and complete about your medical history is very important. If you are taking medications, remember to bring a list of them when you come to the ED (or bring them with you). The health care providers need to know about your allergies and drug sensitivities in order to avoid drug errors that could hurt you.



Don't forget to follow up

Although health care providers in the ED work hard to diagnose and treat patients' condition, despite our best attempts, we won't always be able to solve your problem during the course of your ED stay. Often, a diagnosis doesn't become clear until after the patient has left the ED and the illness progresses, so it's important to follow-up with a visit to your primary care provider soon after your visit to the ED.

Your primary care provider will want to know about any ED visits, as they may not receive all the information about the care you received. As crucial as it is to have quality, episodic care in the ED, it is the continuity of care and preventative care that your primary care practitioner provides that has the greatest impact on your health and well-being. It's important to return to the ED should your symptoms get worse before your primary care visit.

Indigenous Traditional Healing: The First Medicine

by Tanya Baniak, ESC LHIN Indigenous Lead
Endorsed by the ESC LHIN Indigenous Health Planning Committee

The inclusion of traditional healing as part of the health care system requires the development of supportive strategies that promote the merit of traditional wellness as a collaborative approach to health care. Patients' health care outcomes can be improved through educating providers about the value of combining both traditional and Western practices into their patients' health care management.

What is traditional healing?

Traditional healing is a process of restoring a person's physical, mental, emotional, and spiritual balance and well-being. With the help of a Traditional Healer, Elder, or Medicine Person, the patient reflects on all aspects of their health and then creates a customized healing plan that sets out certain steps and activities that lead to better physical and emotional health. The healing plan can include a variety of components, including sacred and ceremonial activities, the use of traditional medicines, and traditional counselling and teachings. Because the process and the healing plan are customized, there is no single definition that can effectively describe or encompass the expansive elements contained within traditional healing practices.

The Traditional Healer, Elder, or Medicine Person's role is to support the patient as they work to improve and rebalance their health. Each Traditional Healer, Elder, or Medicine Person has unique gifts and abilities. Although Traditional Healers, Elders, and Medicine Persons are often born with their gift of healing, it is through extensive mentorship, learning, training, and constant refining of their gift(s) and knowledge that they are able to provide guidance and healing to others. It is a lifelong learning process.

Finding a Traditional Healer

Finding the right Traditional Healer, Elder, or Medicine Person is important. It may take a long time to find the healer who has the gift and knowledge best suited to help you. Local community leaders, Elders, Indigenous community-based health practitioners, or one of the following health service agencies can help:

- Chatham-Kent Community Health Centres — Walpole Island
- Kettle & Stony Point Health Services
- Southwest Ontario Aboriginal Health Access Centre (Windsor)



The traditional healing room at the Chatham-Kent Community Health Centres' Walpole Island site.

Nourishing the Body and Soul

Food is essential for life. It also provides a sense of comfort and social connection. For some seniors, though, shopping for and preparing food becomes a difficult task as they age. But this doesn't have to be a reason to give up independent living.

With services like Meals on Wheels, provided through St. Andrew's Residence in Chatham, and the Frozen Meals Program, provided through Community Home-Support Assisting People (CHAP) in Chatham, people across Chatham-Kent have access to healthy food delivered by volunteers at a reasonable price. The food choices provided also cater to many specialty diets and restrictions.

Regular volunteers get to know the clients on their routes and are often the ones who notice that something might be wrong with a regular customer — perhaps no one comes to the door, or the client complains about recent falls. The volunteers also provide a short social interaction with clients, which is important for people who may not be able to get out as much as they used to. A nutritious meal, on a predictable schedule, delivered by a volunteer who has their best interests at heart — now that's feeding the soul, too.

Longtime volunteer Gayla Cleeve agrees. "I started because I wanted to learn about volunteering, and that was over 20 years ago. I love that this service is offered and that they get a really, really good meal when they can't get out. And I love that we can check on people and call for help when it's needed. It is very social, with the people we serve and with the other drivers."



The Meals on Wheels Chatham-Kent delivery truck.

One of the biggest challenges is the misconception that you have to be very ill to receive Meals on Wheels services. Unfortunately, some seniors put off signing up for a meal service because they don't think they are sick enough to need it. However, if they end up getting sicker and going to hospital or long-term care, they will have missed out on an opportunity for this kind of assistance. Meals on Wheels and the Frozen Meals Program are available to anyone who is in need of a meal and who finds it challenging to prepare one themselves. Maintaining good nutrition and starting a meal plan early on is a great way to maintain health and wellness, and help people live at home longer.

Meals on Wheels Chatham-Kent (519-351-6325) and the CHAP Frozen Meals Program (1-855-437-5368) service the entire municipality of Chatham-Kent. Meal delivery services are also available in Sarnia/Lambton and Windsor/Essex:

Sarnia/Lambton:

- Canadian Red Cross: 519-332-6380
- Lambton Elderly Outreach: 1-800-265-0203

Windsor/Essex:

- Victorian Order of Nurses: 1-888-470-2717
- Community Support Centre of Essex County: 1-855-728-1433
- South Essex Community Council: 519-326-8629
- Amherstburg Community Services: 519-736-5471

Supporting Students

More and more students across the Erie St. Clair region are **rising above the stigma** of mental health and seeking support to overcome their struggles.

The ESC LHIN's mental health and addictions nurses (MHANs) support students in every school board in Windsor/Essex, Chatham-Kent, and Sarnia/Lambton. These nurses made more than 5,000 visits last year to more than 700 students.



ESC LHIN mental health and addictions nurses.

“We see a lot of anxiety issues and depression,” said Caroline White, Vice-Principal at Great Lakes Secondary School in Sarnia.

“Anecdotally, I’d say that 75% of our school’s referrals to the MHAN program are for various mental health issues, while the other 25% are addiction related. However, the two very much go hand-in-hand.”

Across Erie St. Clair this school year, the MHAN team received 233 referrals between the beginning of September and the end of November. Mental health and addictions nurse Linda Zoccano is working with students at Great Lakes Secondary School as well as other schools in the area.

“Every year in the MHAN program, we seem to experience an increase in the number of students we see,” said Zoccano. “I believe that as we break down stigma over mental health, more people are willing to talk about it and ask for help. Drug use continues to be an issue amongst youth and there are now added concerns due to the opioid crisis. We have also noticed an increase in students experiencing anxiety.”

Olivia Mayer, a 15-year-old student at Great Lakes, began working with Zoccano about a year ago and is having a much different experience than what she had with various therapists over the years. “She’s really helping to connect the dots,” said Mayer. “She’s not just someone to rant to. She ties everything together and puts me in touch with the right people who can truly help. I had been talking to different therapists for four years and this is the most help I’ve ever had. She shows me doors I didn’t know were open.”

with Mental Health and Addictions Issues

Mental health and addictions nurses work closely with school faculty and support staff, as well as community services, to ensure that students are able to succeed inside and outside of school.

“The nurses have an exceptional working relationship with their colleagues,” said White. “Whenever we deal with difficult situations, Linda is so important to our team.”

“Over the past few years, there have been a number of suicides in our community and it affects students in different ways. Some students become overwhelmed with it. It is nice to have a professional who is able to help triage which students we need to be most concerned about and those who are able to continue talking with a caring adult in our building. We all find it reassuring to have Linda’s guidance,” White noted.

Referrals for a mental health and addictions nurse can be made by anyone, including students, parents, school faculty, police, physicians, and hospitals. For more information or to start a referral, please contact the ESC LHIN at 1-888-447-4468.



Adult Day Programs



Do you have a loved one living at home on their own who is frail and elderly? Are you or a family member supporting and caring for a loved one with a disability? Do you know someone living with Alzheimer’s? If you answered yes to any of these questions, you and/or your loved one may benefit from one of the Adult Day Programs offered across Erie St. Clair.

Adult Day Programs offer supervised recreational and social activities in a group setting. Making new friends and engaging in stimulating activities can help your loved one stay healthy and independent longer. These programs (also known as respite programs) offer a much-needed break for caregivers.

There are many different Adult Day Programs offered across Windsor/Essex, Chatham-Kent, and Sarnia/Lambton. To find out if you or your loved one is eligible for one of these programs, contact one of the Erie St. Clair LHIN-funded local health service provider agencies listed below.

Windsor/Essex:

- Alzheimer Society of Windsor and Essex County: Day Away Program
- Assisted Living Southwestern Ontario: Participation Industries
- South Essex Community Council: Adult Day Program

Chatham-Kent:

- Alzheimer Society of Chatham-Kent: Adult Day Programs, Chatham and Wallaceburg
- New Beginnings ABI and Stroke Recovery Association
- St. Andrew’s Residence: Seniors Day Out Program

Sarnia/Lambton:

- Victorian Order of Nurses Sarnia-Lambton: Adult Day Program
- Lambton Meadowview Villa, Petrolia: Adult Day Program

*Note: Most programs offer subsidized rates for eligible participants.

OHIP+: Children and Youth Pharmacare

Ontarians under 24 years old can now get prescription medications at no cost

Did you know that since January 1, 2018, OHIP+ has provided no-cost drug coverage for children and youth who are covered by OHIP and aged 24 and under? In Erie St. Clair, more than 186,000 youth are now benefitting from this new program.*

Who is covered?

All babies, children, and youth aged 24 and under who have OHIP coverage are now automatically covered by OHIP+.

How does it work?

Patients do not need to enroll or register to access OHIP+, nor do they need to pay any upfront costs. Those who are eligible for OHIP+ only need to give pharmacists their health card and a valid prescription.

What medications are covered?

- OHIP+ completely covers the cost of more than 4,400 drug products that are currently available through the Ontario Drug Benefit Program, including:
- Antibiotics to treat infections
 - Inhalers for asthma
 - Various insulins, oral diabetic medications, and diabetes test strips
 - Epinephrine auto-injectors (i.e., EpiPen®)
 - Drugs to treat arthritis, epilepsy, and other chronic conditions
 - Medications to treat mental health conditions (e.g., antidepressants)
 - Attention deficit hyperactivity disorder drugs



For more information about the OHIP+ Children and Youth Pharmacare Program, visit ontario.ca/ohipplus or call ServiceOntario at 1-866-532-3161.

*Source: Registered Persons Database, PCCF 2015-08 LHIN to Sub-Region file (distinct count of OHIP registrants by LHIN less than 25 years of age — as of 2017-12-27).

Connect with us:

www.eriestclairhin.on.ca

www.healthcareathome.ca/eriestclair

1-888-447-4468

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