



Nipissing Wellness Ontario Health Team [NWOHT]

Annual Report 2024/25



Nipissing Wellness Ontario Health Team
[NWOHT]: *Unified caring health and social services, centred around patients, families and caregivers.*



BIEN-ÊTRE DU NIPISSING WELLNESS NBISIING MINWAY'YAAWIN
Équipe Santé Ontario Health Team | Ontario Bimaadzwin Niigaanwiwaad

EXECUTIVE DIRECTOR'S REPORT

2024/25 marked our fifth year as an Ontario Health Team! This milestone was made possible by each member's commitment to the construct of integrated collaborative care and what it can, and will mean, to our patients and caregivers across the Nipissing District. Congratulations! to everyone who has been part of this work from the inception, and to those who continue to give their time and energy to help enhance our cross-sectoral collaboration.

It is my esteemed pleasure to have the honour of supporting this amazing group of innovative and committed leaders!

As a staff team, we're pleased to present this year in review – an annual report highlighting the "fruits of your labour" and the value your efforts have had for the people and providers of Nipissing.

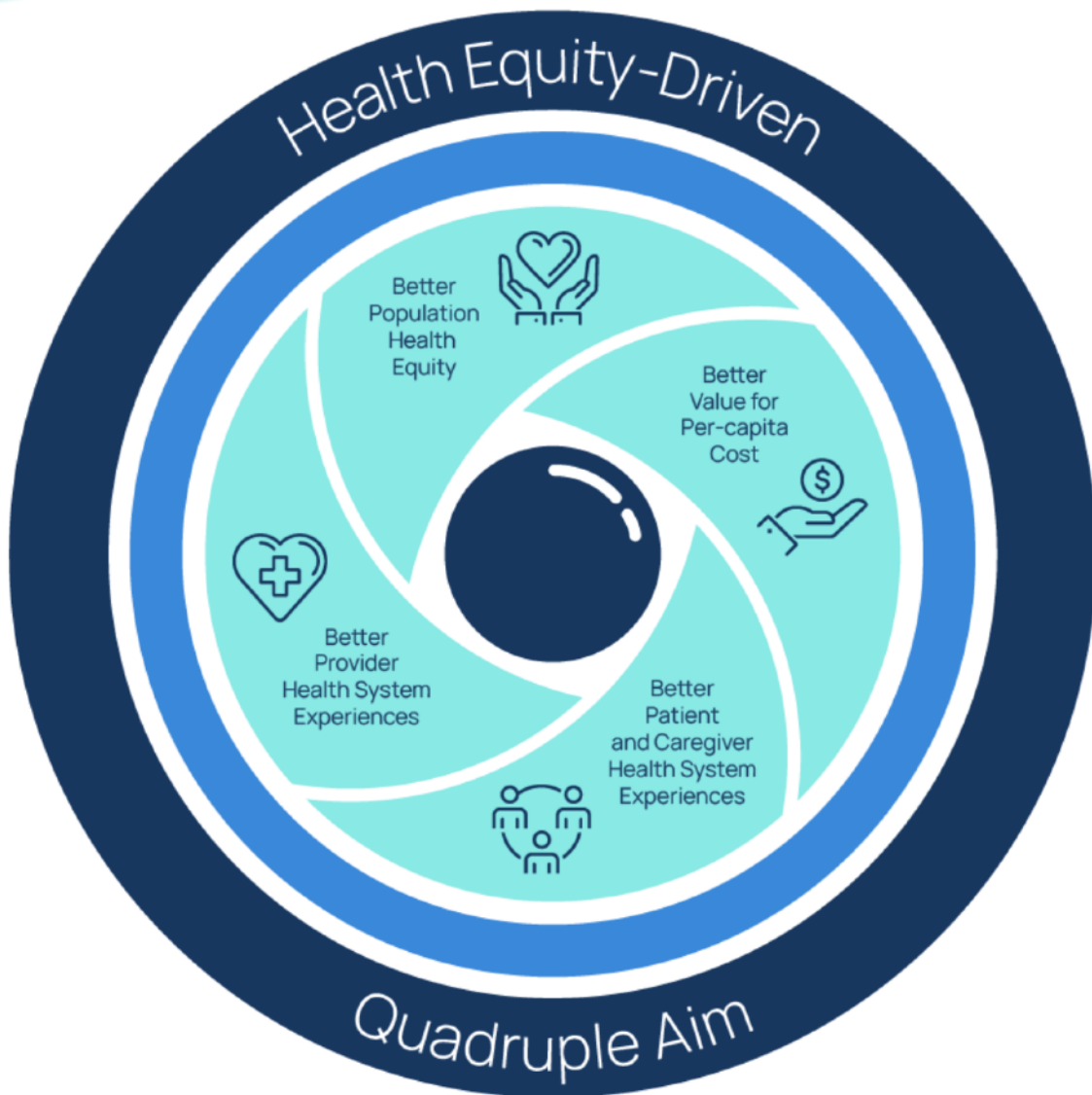
As we look ahead to 2025/26, I'm certain our collaborative culture and commitment to one another will ensure our continued growth as we mature ever closer to our shared vision.



Wendy Smith (she/her)
Executive Lead, Transformation and Strategy
Nipissing Wellness Ontario Health Team

Chef exécutif, Transformation et Stratégie
Équipe Santé Ontario de Nipissing Wellness





This framework guides Ontario Health in its efforts to improve the healthcare system by ensuring that all aspects of care are considered and that resources are allocated effectively to achieve these interconnected goals.

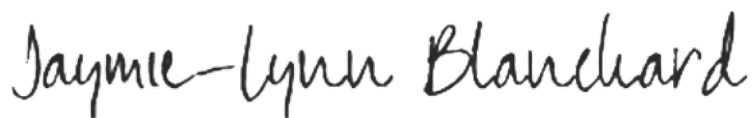
Primary Care Network [PCN]

We are extremely proud of the work of the Primary Care Network. The year 2024/25 brought many opportunities to connect with our colleagues in primary care and to help understand how to best support this important work in our district. Together, I believe we achieved a better understanding of how to allocate resources to support patients, families and caregivers and enhance the experience of providers working within the health care system.

The PCN gathered early in the year to understand a path forward in structuring leadership roles to represent the composition of primary care in our district.

Additionally, our Chair and Vice Chair attended many meetings with key local partners and decision makers. The PCN leadership team participated in political advocacy and reviewed proposals for local initiatives proposed to improve care. Together, the PCN as a whole provided input on how best to direct resources within our district. As a result, funding was directed to support multiple chronic disease management programs, creating pathways for connection to accepting primary care providers, increasing access for unattached patients, assisting seniors to live in their homes longer, and building capacity within our own PCN by providing professional development opportunities! The future is bright for our local Primary Care Network, and it remains essential to have Primary Care lead the way in our health system transformation!

We are truly grateful for the participation of all of our Primary Care colleagues and we look forward to continuing this important work, together!



Jaymie-Lynn Blanchard
Primary Care Network Co-Chair
Nipissing Wellness Ontario Health Team

Coprésident du Réseau de soins primaires
Équipe Santé Ontario de Bien-être Nipissing

Effective, meaningful engagement

In the third quarter [Q3] of 2024/25, the Nipissing Wellness Ontario Health Team [NWOHT] members participated in a self-assessment of our progress towards effective and meaningful engagement with our patients, families and caregivers. The results showed that we have achieved level 2 maturity in 4 of the 5 categories – scoring 80%.

<https://ppe.mcmaster.ca/engagement-capable-oht-framework/>



Patient and Family Caregiver Council [PFCC]

We continue to work to advance our maturity level across all categories in partnership with our Patient and Family Caregiver Council [PFCC] members. The members of the PFCC are very involved. In 2024/25, they generously volunteered 409+ hours of their time to participate, support and guide the Nipissing Wellness Ontario Health Team [NWOHT].



We added three member organizations



Closing the Gap® Healthcare

North Bay Parry Sound District
Health Unit



Bureau de santé
du district de North Bay-Parry Sound



Adding three new members – Canadian Shield, Closing the Gap and the North Bay Parry Sound District Health Unit. This brings our member total to 39!

www.nipissingwellness.ca/partner-category/all-members



Changes in leadership

The end of 2024/25 brought a change in leadership for both our Patient, Family, Caregiver Council [PFCC] and our Primary Care Network [PCN]. We are grateful to Dr. Anthony Giordano, Blanche-Hélène Tremblay, and Mary Schaefer, for their leadership over the last several years.

Dr. Anthony Giordano has been instrumental in the implementation and development of our NWOHT Primary Care Network and supported the membership as one of our Collaboration Council Tri-Chairs – 2023-2025.



Blanche-Hélène Tremblay is a courageous and committed volunteer leader who has continued to champion the need to engage our patients and families in health system change.

Mary Schaefer has been gracious in her willingness to share her experiences working in healthcare and as a member of a rural community.



*Thank you for your
courageous leadership
through this time of change.*

NWOHT – adding value, one project at a time...

We're excited to share **10 projects** from our 2024/25 calendar that demonstrate our value to patients, providers, and the broader healthcare system. [Check out our website](#) and social feeds for more information about these and other projects in the coming year.

1

NWOHT Integrated Care Pathways [ICPs] identified and supported 786 unique patients living with Chronic Obstructive Pulmonary Disease [COPD] or Heart Failure within the Nipissing district. Through the **Best Care Heart Failure Service**, hospital visits and unscheduled primary care visits decreased.

Hospitalizations
decreased
by

83%



Identified heart failure patients made 59 hospital visits in 2023 vs. just 10 in 2024.

Visits to primary
care providers
decreased by

30%



Identified patients made 115 unscheduled visits to primary care in 2023 vs. 28 in 2024.

2

In the first quarter [Q1] of 2025, our newly launched **Community Care GAP [Gaining Access and Preventative care] Clinic** saw 30 patients without a primary care doctor or nurse practitioner. Of those patients, 11 received cancer screening.

www.nipissingwellness.ca/gapclinic

30

patients without
primary care
visited the
GAP Clinic



11

received cancer
screening



3



As part of the Home First Initiative, **The Hospital to Home Program [H2H]** launched in February, 2025. Aligning with Ontario Ministry of Health's objective to modernize the healthcare system, the aims are to alleviate hospital Alternate Level of Care [ALC] pressures and to fill gaps in the current system – standardizing services for people requiring in-home support from hospital receive it in a timely and efficient manner.

By providing comprehensive care in patients' homes, the H2H Program also aims to reduce emergency department visits and hospital readmissions.

This initiative was collaboratively developed by NWOHT members and is being implemented by the North Bay Regional Health Centre in partnership with Closing the Gap.

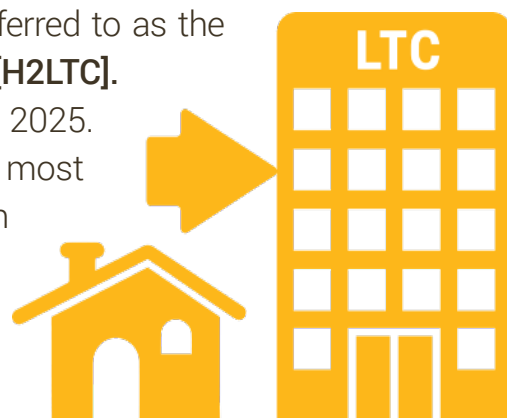
www.nipissingwellness.ca/hospital-to-home-program

4

The Home Care Leading Project is now referred to as the **Home to Long-Term Care [LTC] Program [H2LTC]**.

The first patient was onboarded in March, 2025.

This program is designed to support the most vulnerable and high needs older adults in the community while they await LTC. The H2LTC and H2H Programs fit alongside each other – within the Home First Initiative in the Nipissing District.



www.nipissingwellness.ca/home2ltc/

5

Another non-traditional, community service, our **SMILE [Seniors Managing Independent Living Easily] continues to be a great success!** This program connects seniors and vulnerable community members at risk of losing their independence with local services, helping them to remain in their homes.



Recently, the SMILE program transitioned to being fully managed by the North Bay VON team, and was able to support **2,267 community members**.

von.ca/en/smile

6

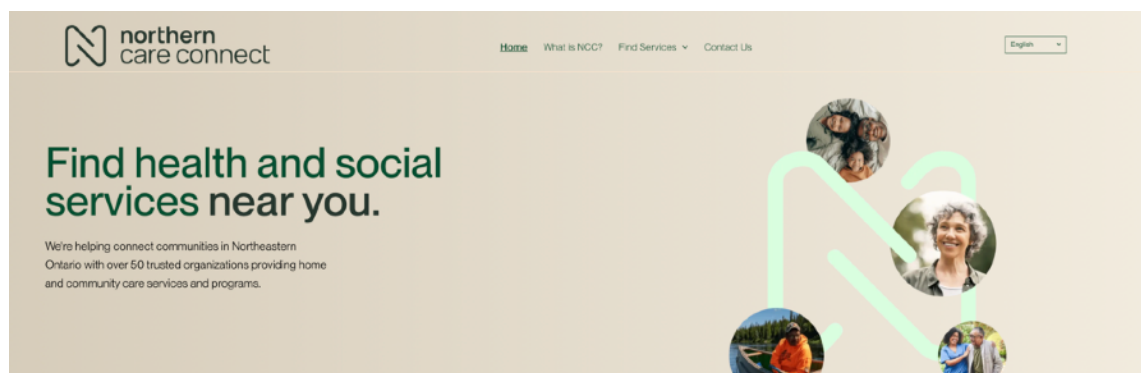
The Navigational Services Community of Practice has continued to grow through the 2024/25 year. Healthcare and social services professionals come together – virtually or in-person – to learn about community services available to support patients, families, and caregivers. Over the year, topics covered virtually, included Social Prescribing, Harm Reduction, Transgender Health, and Housing. In November, 2024, we held our second in-person event to work through patient journeys and identify opportunities for improvement.

For more information about the Navigational Services Community of Practice, contact NWOHT at info@nipissingwellness.ca

7

A new tool called **Northern Care Connect [NCC]** launched in December, 2024. NCC is a collaborative initiative bringing together seven Ontario Health Teams [OHTs] in the North East Region of Ontario. Together, we developed this tool in response to the provinces' goal of improving access to navigational supports for the public.

NCC provides a hyperlocal focus on services offered in our communities. With the support of 50+ partner organizations, we provide access to a variety of services, including mental health and addictions services, children's services, Indigenous care, social services and home care services.



We are all committed to fostering a connected and responsive healthcare system that meets the unique needs of Northeastern Ontario.

www.northerncareconnect.ca

8

In response to the rise in cybersecurity attacks, NWOHT provided funding to its members and partners to support **cybersecurity** efforts.

Training was completed by NWOHT staff, as well as by members and partners.



9

Together with the District of Nipissing Social Services Administration Board [DNSSAB], NWOHT launched the **Clinical Access Mobile Partnership [CAMP]** on January 29, 2025. This new mobile clinic, enhances healthcare accessibility across the district and aligns with both NWOHT and DNSSAB's strategic plan to create healthy, sustainable communities.

www.nipissingwellness.ca/camp



10

Thanks to continued funding from the Ministry of Health/Ontario Health, we expanded the use of **Online Appointment Booking [OAB]** in 2024/25. NWOHT's Collaborative Council remains committed to supporting the ongoing sustainability of OAB licenses.

www.ontariohealth.ca/digital/standards/online-appointment-booking

Other NWOHT initiatives

In August 2024, the NWOHT Palliative Care Planning Table re-established the work of the former local planning table, the North Bay and District Palliative Integrated Services Committee. This renewed initiative focused on fostering communication, education, and adoption of best practices in palliative care services.

The planning table aimed to leverage past successes while addressing current challenges in palliative care services.

As an initial step, a governance structure was established to ensure inclusion of all key partners. This was followed by initiating an environmental scan to assess availability of palliative care services across Nipissing communities.

To further inform the planning table on community needs, a series of Palliative Care Community Collaboration sessions was launched throughout the Nipissing district. Patients, families, and caregivers who had a progressive life-limiting illness, or who had cared for someone who had passed away from a progressive life-limiting illness, were invited to share their experiences and insights. They shared challenges they faced as well as what worked well in our current local health care system.

More sessions are scheduled in 2025/26, engaging healthcare professionals and members of the Nipissing First Nation community. This feedback will help to identify gaps and barriers in the system, enabling informed plans to address these challenges that are patient and caregiver driven.





The Nipissing Wellness Ontario Health Team [NWOHT] is supported by funding from the Government of Ontario.

The views expressed in this publication are the views of the funding recipient [NWOHT], and may not reflect those of the Government of Ontario or Ontario Health.

For more information about the Ontario Health Teams,
visit www.ontario.ca/page/ontario-health-teams
or email ontariohealthteams@ontario.ca



Équipe Santé Ontario Health Team
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