

Personal service worker part of health-care panel

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As a personal service worker for disabled people at Cheshire Homes, Charlene Ervine makes a difference in lives.

Now, she has a chance to make a difference on a larger scale as part of a 36-member panel that will make recommendations to shape local health care services for the next three years.

“I think knowledge is power,” the Belleville resident said, talking about why she jumped at the opportunity to participate in Engage 2009, learning more about health-care in southeastern Ontario and giving opinions on the issue.

The panel was established by the South East Local Health Integration Network, the body that holds the purse strings for most health-care funding and is responsible for the meshing of health-care services, in a large territory stretching from Brighton east to Cardinal (east of Brockville), north to Algonquin Park and Smiths Falls and south to include Prince Edward County.

The panel “will help shape the delivery of health-care services for the next three years,” LHIN officials said.

The panel was selected from a random mailing to 5,000 households in the southeast sector of the province. Those that returned the mailing were then whittled down to 36 by a random draw.

“It was literally like a lottery,” Ervine, 39, said.

The panelists met recently in Gananoque and will meet twice more — once this Saturday in Kingston and again in Gananoque, March 21.

“As we prepare our next integrated health-service plan, we have an excellent opportunity to take a careful look at our regional health-care priorities for the next three years,” said Georgina Thompson, LHIN chairwoman. “It is our job to work with the health-care community and citizens to ensure our priorities and standards are the right ones.”

Ervine said she believes the LHIN is sincere in its quest to seek input and consensus.

“They (LHIN officials) are very willing to listen,” she said. “They engage in conversation.”

There are two panelists from Belleville and one from Picton and Brighton, said the LHIN's Julie White.

The 36 are were broken into six groups of six, with a good mix of young and old, immigrants and people with disabilities.

"They've done well to bring a focus from different angles," Ervine said.

Paul Huras, the LHIN's chief executive officer, said diversity is key to providing proper mix of services.

"We understand the importance of getting this plan right," he said. "It is a tough task and it requires balancing many different and important interests..."

Each person was asked to contact three neighbours, friends or family members to get their opinions on health-care needs in this area, so the 36 members are more like 100, he said.

Some opinions have come as a surprise.

"They thought the health-care system was fine," Ervine said, "(but) a lot of people want change" to create a more efficient system.

She gave an example. Her 12-year-old son recently broke his collarbone while snowboarding in Trenton. He was taken to that city's hospital, an X-ray confirmed the break and the break was set in a brace, Ervine said.

But, she was told to go to Belleville hospital to see a bone specialist when she returned home. After a two-hour wait, there was another X-ray made and the specialist said the bone was indeed broken.

"Why?" Ervine said of the double X-ray and examination.

Others said the scarcity of doctors means they should be put to the best use, such becoming members of Family Health Teams to see as many people as possible. As well, more emphasis should be put on preventative health care.

"This is the feedback that I've gotten," Ervine said.

The groups of six will present a final report to the LHIN and, along with the opinions of health-care professionals and community organizations, will be used to help formulate health-care services for the future, Thompson said.

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