

Service Coordination and Integration for Complex Needs Group

Terms of Reference

Background

The Toronto Acquired Brain Injury (ABI) Network was established in 1995 to address issues of fragmentation in the system and inequitable access to service for individuals with an acquired brain injury. Since that time the Network has become a leader in furthering equitable, accessible, responsive, cost-effective and quality publicly funded services.

In addition to managing a centralized referral system, the Toronto ABI Network works to address system level issues related to ABI service delivery, increase the profile of acquired brain injury and promote best practices across member organizations. A recognized leader in ABI, the Network is a strong and reputable advocate for the needs of those with acquired brain injury. Clients, families, ABI stakeholders, the Ontario Ministry of Health and Long Term Care, Local Health Integration Networks and others rely on the Network for information and advice, and as a forum to identify and resolve issues affecting the coordination of ABI services across the Greater Toronto Area.

Objective

Individuals who live with the effects of a brain injury may require services and expertise from various organizations and/or sectors at different stages of their lives. A coordinated and responsive system can help support people with complex needs.

By enhancing coordination and service integration, we will enhance system capacity to support people with complex needs following brain injury.

Deliverables

These may be subject to change depending on the discussions of the task group and the potential influence of other initiatives. Any significant change in deliverables will be discussed and the Advisory Committee will be consulted.

- Identify system pressures/gaps for people with complex needs and confirm desired outcomes
- Investigate and recommend ideal model of care that illustrates feasibility, sustainability and value (e.g., enhances timely access, reduces LOS and readmission rates)

Membership

- Chair: Judy Moir, *Community Head Injury Resource Services (CHIRS)*
- Group Members: TBD

Note: Members are expected to identify an alternative representative who will attend meetings on their behalf in the event they are unable to attend and to provide the alternative attendee with information required to support their participation. The alternative will communicate the proceedings, decisions and any actions required to the member.

Term

The term of this task group is up to 3 years October 2017-2020.

Meetings

Meetings will occur quarterly, or as required, throughout the course of the term. Additional meetings may be required to complete work according to project timelines.

Webinars, teleconference and other formats will be used to facilitate meeting attendance.

Minutes

Minutes shall be recorded for all meetings and circulated to committee members for dissemination/distribution to relevant stakeholders within each organization.

Communication

Updates will be shared along with other project communications to stakeholders.