Toronto abi Network

FROM PLANNING TO ACTION

Annual Report
2017/18

In 2017/18, the Toronto ABI Network launched its **NEW STRATEGIC PLAN.**

The plan is focused on the needs of people with acquired brain injury (ABI) and lays out three priorities: We need to improve transitions for people with ABI as they leave hospital to return to the community. We must improve coordination of services for people with complex needs and advocate for resources to fill the gaps. And we need to strengthen collaboration among Network members to help us find solutions to these and other challenges.

The new strategic plan was developed through strong engagement with our members — and that energy continues. New committees have been formed with broad participation from across the acute, rehabilitation, outpatient and community sectors and are already at work to move the strategic priorities into action.

RENEWED ENERGY. **SHARPENED FOCUS.**

The Toronto ABI Network connects people with ABI to the rehabilitation and community services they need. A leader and collective voice for ABI, the Network brings together organizations from across the health care and social services sectors.

HELPING PATIENTS TRANSITION

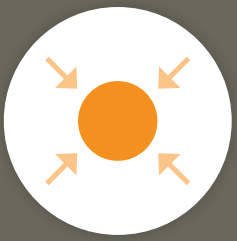
FROM HOSPITAL BACK TO THE COMMUNITY

For patients with ABI and their families, returning to life in the community after a brain injury can be very challenging. They need help and coordinated support to make that transition safely and effectively. However, every hospital supports the transition from hospital to home differently. Often there are gaps, and patients and their families may leave hospital without support services in place and with no idea where to find them.

The Network is working with its members to standardize the transition process across all acute and rehabilitation hospitals and to create clear guidelines on what should happen as patients return to the community.

To determine what good transition planning should look like, a committee is reviewing existing evidence-based best practices and assessing their relevance for patients with ABI. The Network will also survey providers in the coming year to examine current practice. And focus groups will be held with patients and families to find out what is and isn't working from their perspective.

All of this information will be used to develop an ABI-specific tool kit to help hospitals improve the transition planning process and ensure that patients and families get the support they need.

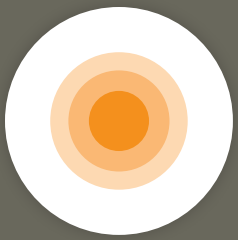


IMPROVING COORDINATION
OF SERVICES FOR PEOPLE WITH COMPLEX NEEDS

Many people with acquired brain injury have complex needs, including issues related to substance use and mental health. Often they require support from multiple organizations, and many face barriers in getting the services they need.

The Network is leading efforts to improve coordination among organizations and address these barriers at a system level. As a first step, the Network will gather information from its members on the number of people with complex needs who are receiving services and the current gaps in support. Members have identified the need for additional resources to meet these needs, and the Network plans to regularly track and report this data to the LHINs and other key stakeholders to support future advocacy efforts.

A review of best practices will also be conducted to identify the best models of care to support people with complex needs. In addition, the Network secretariat will consider what role it can play to help organizations coordinate their efforts to provide this care.



STRENGTHENING COLLABORATION AMONG NETWORK MEMBERS

To connect their clients to services, providers must know what resources are available. This year, the Network hosted a series of nine informational webinars to build that knowledge and strengthen working relationships among its members. Member organizations from across the acute, rehabilitation, mental health and community sectors presented on their services and how to access them. Approximately 450 front line staff from across the GTA participated in the sessions.

Other forms of member engagement also increased this year. Secretariat staff visited a number of member organizations to talk about their needs and how the Network can support them. A large number of members volunteered for the committees leading the work on the Network's new strategic priorities. The Network's fall 2018 ABI conference will offer an opportunity for health care professionals and community providers to connect with each other and share the latest knowledge and best practices in ABI. And, as always, the Network continues to support members through our centralized navigation and referral services.

CONNECTING PEOPLE
WITH SERVICES

The Network provides a single point of entry for referrals to all community-based services. We also facilitate referrals to inpatient ABI rehabilitation for providers who don't have access to the Resource Matching and Referral (RM&R) system and help our members find appropriate health care and community resources for individuals with complex needs.

Individuals with ABI and their families turn to us as well. We help them navigate the health care and social service system to find and access the support they need through the various stages of recovery.

2017

Referrals to Inpatient Rehabilitation

For hospitals that do not have access to the Resource Matching and Referral (RM&R) system only

= 159

Referrals to Community/ Outpatient Services

Outpatient ABI rehabilitation; mental health services; recreational, vocational and supportive housing programs

= 1004

Data reflects referrals received by the Toronto ABI Network only and is not an indication of incidence or prevalence. Referrals received for more than one service are counted for each service type.

A STRONG VOICE FOR ABI

CHAIR: Hedy Chandler, Community Head Injury Resource Services

ACUTE CARE

Mackenzie Health
St. Michael's Hospital
Sunnybrook Health Sciences Centre
University Health Network

INPATIENT & DAY HOSPITAL REHABILITATION

Bridgepoint/Sinai Health System
Holland Bloorview Kids Rehabilitation Hospital
Ontario Shores Centre for Mental Health Sciences
St. John's Rehab/Sunnybrook Health Sciences Centre
Toronto Rehab/University Health Network
West Park Healthcare Centre

COMMUNITY SERVICE AND SUPPORT

Central LHIN Home and Community Care
Community Head Injury Resource Services
Cota
March of Dimes Canada
PACE Independent Living
Peel Halton Dufferin Acquired Brain Injury Services
Toronto Central LHIN Home and Community Care

EX OFFICIO

Brain Injury Association of Durham Region
Brain Injury Society of Toronto
Ontario Neurotrauma Foundation
University of Toronto

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