

TO: Chair and Members of the Board of Health

FROM: Christopher Mackie, Medical Officer of Health / CEO

DATE: 2018 July 19

NURSE PRACTITIONER (NP) SECONDMENT FOLLOW-UP

Recommendation

It is recommended that the Board of Health receive Report No. 045-18 re: “Nurse Practitioner (NP) Secondment Follow-up” for information.

Key Points

- This report provides responses to questions raised by the Board at its May 17, 2018 meeting.
- A Nurse Practitioner (NP) has been seconded from the Middlesex-London Health Unit by Addiction Services Thames Valley to provide interim support to Rapid Access to Addiction Medicine clinics in London and at Chippewas of the Thames First Nation.
- This service is to be provided on a temporary basis until the end of 2018. It is anticipated that funding from the Southwest Local Health Integration Network will then be in place to continue the service.

Background

At its May 17, 2018 meeting, the Board of Health approved the temporary secondment of an MLHU employee with the position of Nurse Practitioner (NP) to work in addiction treatment with Addiction Services Thames Valley (ADSTV) and the Southwest Ontario Aboriginal Health Access Centre (SOAHAC). At that time, the Board heard a delegation from SOAHAC and the South West LHIN detailing the need for addiction treatment services that are specifically adapted to Indigenous people. A commitment was made to provide further detail at the Board’s June 21 meeting. The Board members’ questions, with further information, are given below.

How will the role be split between ADTSV and SOAHAC?

In the attached report from ADSTV (see [Appendix A](#)), role allocation between that agency and SOAHAC is described in further detail. In essence, the seconded NP will assist in providing services at two Rapid Access to Addiction Medicine (RAAM) clinics supporting Indigenous clients in London and at Chippewas of the Thames First Nation. With respect to time allocation for the Nurse Practitioner, 0.6 FTE will be spent at the ADSTV London site and 0.4 FTE will support the SOAHAC clinic at Chippewas of the Thames First Nation.

Will the proposed allotment of 0.4 FTE be sufficient to serve the needs of Indigenous communities?

The current agreement supports provision of service at Chippewas of the Thames First Nation as an interim measure. A request for permanent funding that reflects the full need identified in the community will be submitted to the South West Local Health Integration Network (SWLHIN) by SOAHAC. The SWLHIN has already identified an opioid substitution clinic as a priority for Indigenous health in its upcoming budget, and the SOAHAC request is anticipated by the SWLHIN.

What is the long-term plan for this service, and how it will be funded/delivered after the secondment expires?

SOAHAC plans to apply to the SWLHIN for ongoing funding beyond 2018, and this initiative has been identified as a priority by the SWLHIN. Recruitment of two full-time NPs to work at ADSTV, funded from their core budget, will begin soon. Upon expiry of this secondment agreement, SOAHAC and ADSTV will provide services to their clients independently via their own staff.

Next Steps

The Health Unit has finalized the secondment agreement with ADSTV and SOAHAC (see [Appendix B](#)), and service began on July 3. Staff and reporting relationships have been identified at each agency to ensure optimal communication and service delivery between partners.

This report prepared by the Environmental Health and Infectious Disease Division.



Christopher Mackie, MD, MHSc, CCFP, FRCPC
Medical Officer of Health / CEO