



**Muskoka
Almaguin**
ONTARIO HEALTH TEAM

Grand Rounds

Muskoka Algonquin Health Care

February 18, 2026



Objectives

1. Describe the MAOHT Leadership decision making structure highlight the key leadership roles that clinicians have.
2. Describe the benefits of MAOHT to practices with a focus on HHR recruitment, curated system navigation (SCOPE), MAOHT Advocacy on Health Care Connect.
3. Describe the key roles of the MAOHT Primary Care Network, its current priorities and how to get involved to ensure it works for you.

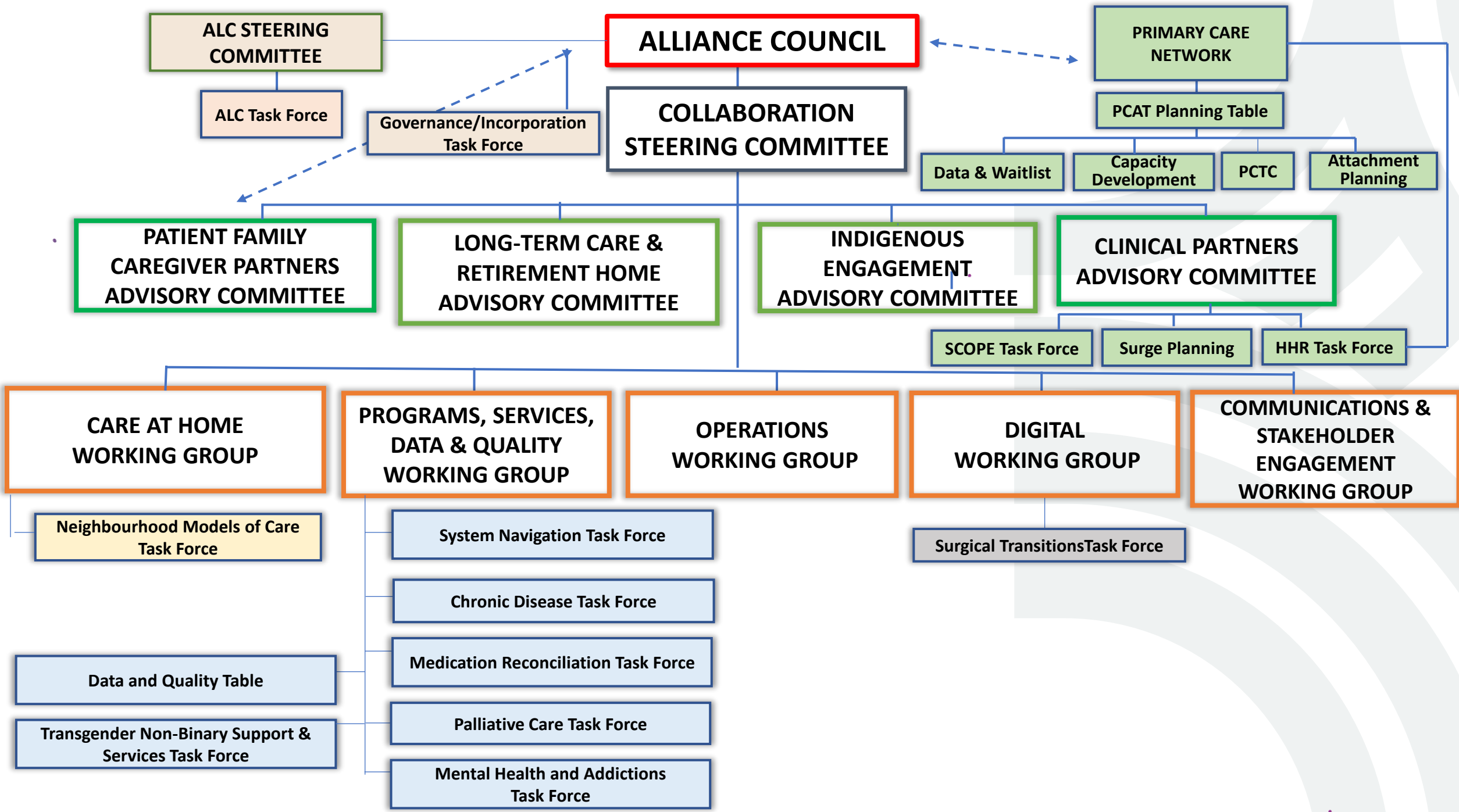
Conflicts

- I receive stipends per meeting attendance



Beginnings





Alliance Council Mandate

Planning and Priorities

- Establish a strategic plan;
- Approval of an annual work plan developed by the Collaboration Steering Committee consistent with the strategic plan;
- Develop the name and central brand of the MAOHT;
- Approve projects and initiatives;

Quality and Risk Management

- Approve, Monitor and oversee safety and quality standards, performance and quality improvement for the MAOHT developed and recommended by the Collaboration Steering Committee;
- Approve a complaints and significant events process for issues that impact more than one Partner.

Co-chairs: [Dr. Keith Cross](#) and [Dr. Catherine Jindahl](#)

Additional Clinical Members: [Dr. Mar](#) and [Dr. Mathies](#)

Total number of members: 19

Collaboration Steering Committee

Planning and Priorities

- Implement a strategic plan;
- Develop an annual work plan consistent with the strategic plan;
- Identify and measure the priority populations for the MAOHT and the impact of decisions on them;
- Recommend, implement and report on Projects and Project Agreements;
- Establish a Patient Declaration of Values and the Patient Engagement, Consultation and Partnership Strategy or Framework, in consultation with the PFCPAC.

Quality and Risk Management

- Review, collaborate on, and monitor safety and quality standards and performance and quality improvement
- Identify risk issues and consider risk allocation, mitigation and corrective actions, implement a risk management process

Co-Chairs: [Donna Kearney](#) CEO Hospice Muskoka, [Trish Mintz](#) ED of Cottage Country FHT

Additional Clinical Members: [Dr. Cross](#), [Dr. Mathies](#), [Dr. MacKinnon](#), [Leanna Lefebvre](#)

Additional Standing Guests: [Dr. Mar](#), [Dr. Erven](#)

Total # of members: [23](#)

List of MAOHT Projects

- Ocean eReferral Implementation
- Online Appointment Booking
- Remote Care Monitoring
- Surgical Transitions
- Hospital to Home
- My Chart
- Congestive Heart Failure
- Transitional Care Unit
- Hospice Muskoka TCU
- SCOPE
- Patient Navigation (211)
- HHR Recruiter
- BRAND NEW – develop an Integrated High Risk Foot Clinic



MAOHT HHR TASK FORCE

BACKGROUND

- Program launched in 2022
 - 10,000 Unattached Residents
 - Three-year Pilot Program
 - Initial recruiter hired in January 2023
 - Experienced recruiter brought on board December 2024
- Focus on primary care recruitment due to acute shortage of providers
 - Growing Population
 - Physician Retirements
 - Lack of Succession Planning
 - Needs in the Community and Muskoka Algonquin Health Care

WORKFORCE ANALYSIS WITHIN MAOHT REGION

- 26% of Family Physicians have been in practice for 30+ years.
- 18% of Nurse Practitioners have been in practice for 20+ years.

HHR RECRUITER

- 20 years of experience in community/hospital recruitment
 - Southern Georgian Bay
 - Georgian Bay General Hospital
 - Jack Nathan Health - Director of Recruitment – Canada
- Recognized provincially and nationally
 - CASPR Lifetime Achievement Award Winner
- Board of Directors of CaSPR
 - ([Canadian Society of Physician Recruitment](#)).
- Board of Directors of OPRA / COPRA
 - ([Ontario Physician Recruitment Alliance](#))



MAOHT HHR TASK FORCE

PRIMARY CARE and ACUTE PROVIDERS

- Dr. Melanie Mar, Family Physician, AFHT & Co-Chief of Family Medicine HDMH
- Dr. Sarah Mackinnon, Family Physician, SDMC
- Dr. Khaled Abdel-Razek, Chief of Staff, MAHC
- Jane Rolfe, NP, Community

MUNICIPAL GOVERNMENT

- Scott Lucas, CAO, Gravenhurst
- Lauren MacDermid, EDO, Huntsville
- Rod Ward, Chair, AHHC

CO-CHAIRS

- Vacant – formerly Leanna Lefebvre, NP, NM NPLC
- Dr. Kristen Jones, Family Physician, CCFHT

ORGANIZATIONS

- Janine van den Heuvel, AFHT
- Noreen Chan, MAHC
- Deb Raynard AHFHT
- Irene Wright, PFCPAC
- Sandy Zurbrigg, PFCPAC
- Isabelle McWilliams, HM
- Katherine Craine, Huntsville Hospital Foundation
- Leah Walker, South Muskoka Hospital Foundation

FUNDING PARTNERS – FY 2026/2027

MUNICIPALITIES

- 14 municipalities & the District of Muskoka

CLINICAL PARTNERS

- Cottage Country FHT
- Algonquin Family Health Team
- Almaguin Highlands Family Health Team
- Sundridge & District Medical Centre
- North Muskoka Nurse Practitioner Led Clinic
- Muskoka Algonquin Healthcare
- South Muskoka Memorial Hospital Foundation
- Huntsville Hospital Foundation

MUSKOKA COMMUNITY FOUNDATION

- William S. Monk Health Care Development Fund

Funding Committed by Municipal and Health Partners in FY 26-27: \$ 174,000

CELEBRATION of Recent Recruitment

NEW PHYSICIANS – FULL TIME

- Dr. Alireza Pourmohamadjani (FM) Bracebridge (November 2025)
- Dr. Brenda Martin (FM) – Port Carling Health Hub (January 2026)
- Family Physician – Bracebridge (Spring 2026)*
- Family Physician\ER – Huntsville (June 2026) *
- Family Physician\Job Share – Huntsville (July 2026)*
- FT Emerg Specialist – (August 2026) *

* Pending Public Announcement

CELEBRATION

NEW PHYSICIANS – LOCUMS

- Maternity leave partially covered
- Full coverage – Hospitalist Program at South Muskoka Memorial Hospital
“Thanks for all your help this year. It’s been so much easier transitioning to the new hospitalist model with your recruitment efforts.”
Dr. Cole Krensky – Lead Hospitalist, SMMH
- Full coverage – Emergency Department at Huntsville District Memorial Hospital
- Growing / Stable Hospitalist Locum pool at Huntsville District Memorial Hospital
“Awesome. She’s starting in two weeks. You’re the best!”
Dr. Aleena Fiorotto – Lead Hospitalist, HDMH
- Growing Emergency Medicine Pool at South Muskoka Memorial Hospital

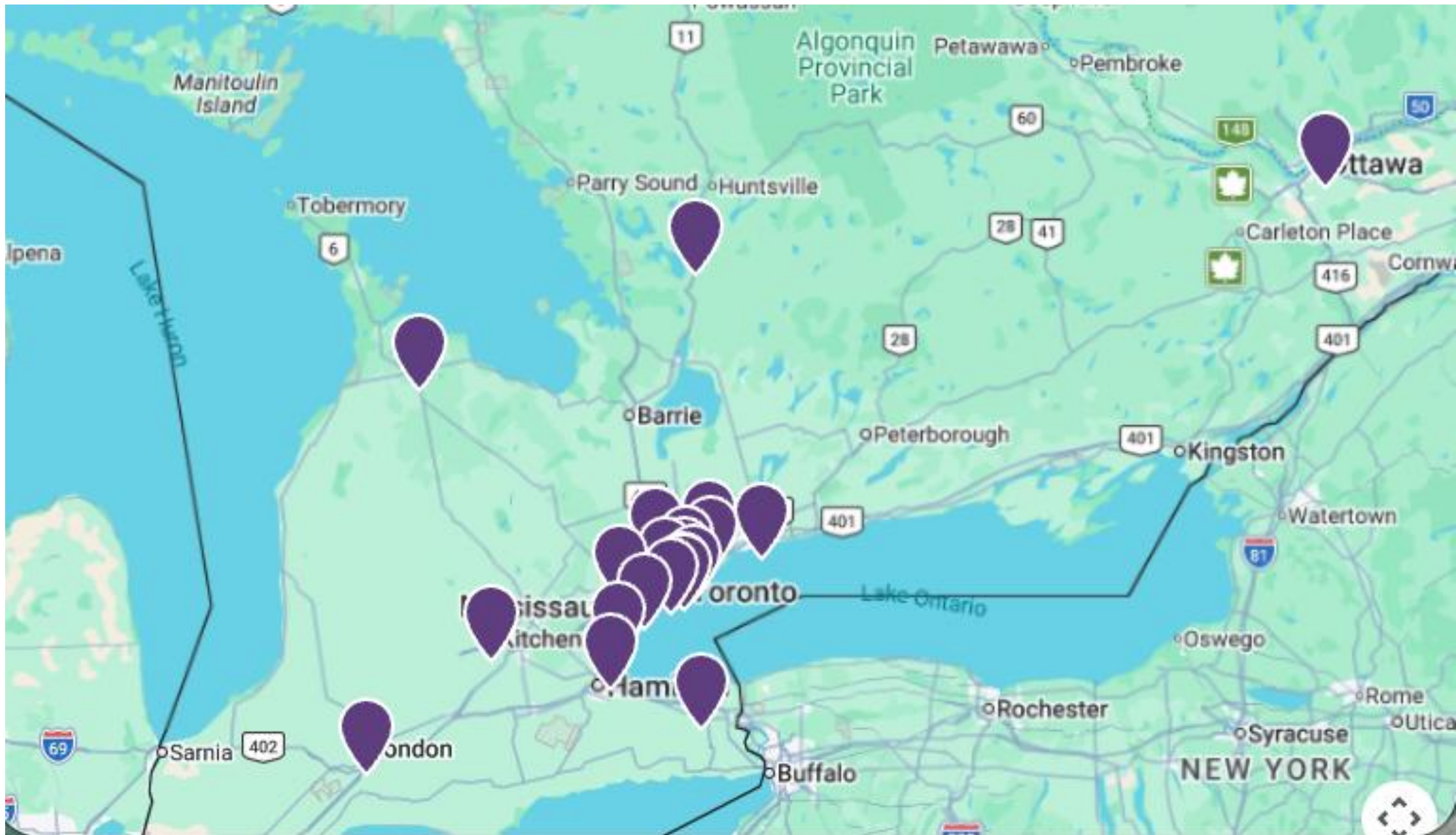
Quick SCOOP on SCOPE

Navigation with Catherine Hansen
Mental Health with Nicole Brumpton

<https://scopehub.ca/>

To Register

<https://wcredcap.wchospital.ca/surveys/?s=XW8N4KWX>



Is this a SCOPE thing?

Every referral enquiry is valid, and if we can't find the unicorn.

We can sometimes find an alternative idea.

PAE for BPH in Hamilton
MSK for MAHC DI
Oculoplastic for 6-year with
chalazion
Menopause clinic in **North Bay**
Clarify Preop for UHN clinic
Gyne Collingwood Women's health
clinic
Ortho foot
CHF RCM
Ortho For Knee
SLP for Burks falls
Primary care in **Little Current** for
new baby
PCP for pregnant women in
Magnetawan
Fibromyalgia Diagnosing
Varicose Vein treatment
Neurology for restless leg
North York for urgent CT for
Muskoka patient
Vertebroplasty for T8 # 86-year-old
Iron infusion in **Ottawa**
Benign hematology
Ortho for Hip
Gastroenterology
ENT for thyroidectomy
MAID information
Ortho in **Ottawa**
BMD in **Sudbury**
CMHA Simcoe county for Foot care
Gyne
Neurology
ENT
CBT Insomnia
EEG before Feb 2026
Spine program

Urgent Plastics for Hand 5th digit
Addictions in **London ON**
Peads Derm
Twin Anatomy ultrasound
expedited
RHD feral NIPT
cryoglobulin Blood testing
locations
Ottawa Iron Transfusion.
OHIP funded breast Reduction
Neurodevelopmental testing
ENT for vertigo
Kait at Sunnybrook for colorectal
surgeon
ENT for septorhinoplasty
Neurologist in the **GTA**
SLP for voice in **Orillia**
ENT
Hand surgeon
Wound care for pt moving to
Cobden
Scoliosis support
Pediatric methacholine challenge
POP shorter waitlist
Spine surgeon
Thyroid fine needle aspiration
Endocrinology in **Ottawa**
Laser for nail pincher
Counselling for Brain Injury
Addiction programs
Haematology escalation
Vascular consult for diabetic foot
TMJ care
Timely ultrasound before 12.4
weeks
Timely EMG
Evening Ultrasound options

Navigation for foot care
OT/PT for burns
Sacroplasty
Ortho for lower spine
Timely ultrasound
Hand surgeon
Neurologist in **Sudbury**

Weight loss support in **Barrie**
Gyne escalate
Vasospastic Angina care
Plastics in **North Bay** for
granuloma Rt Thumb
Long covid and MCAS
Fibro scan
Psychological services
Alopecia
Endo Ablation
Chronic Fatigue
Hair loss
Peads sleep clinic
Spine surgeon
AVM upper arm
MacKenzie health for
RAC Hip and Knee
Community Paramedics navigating
Bariatric care
Pain Clinic for Lidocaine/Ketamine
infusion
OHIP funded Breast reductions
MRI with Cochlear implant
Neuro-ophthalmology
Surgeon for complex hernia with
ileal conduit
Long COVID clinic

Mental Health Therapist

Nicole Brumpton provides 10 sessions of psychotherapy

Nicole's skills in case navigation are **INVALUABLE** to our team
She can review CMHA records and enhance opportunities for patients.

Examples: psychiatry, assessments for ADHD, ASD, transportation services for medical appointments, funding for adaptive equipment, supports for seniors or physically disabled, connecting clients with housing providers and income programs/government subsidies supports specific to diagnosis such as addictions, caregiving support groups, brain injury, developmental services.

What helps SCOPE work well for you.

Referral details !

I have been known to secure reduced wait times, most often a result of your comprehensive clinical assessment and a detailed referral — and perhaps a little of my charm.

- ✓ I am unable to escalate non-urgent cases.

Identifying the lowest wait times has become more challenging, as administration and booking staff commonly advise that referrals are triaged based on clinical priority.

To help manage my imposter syndrome: I am not magic.

❖ **Navigating health-care resources in Ontario and beyond is inherently challenging, and outcomes can vary despite thorough effort, experience and strong systems knowledge.**

- If I am missing opportunities, please please let me know, quick call, text or email.
- I also appreciate feedback if the suggested resource I offer is declined or if feedback of outcome is less than PCP satisfaction, this helps refine future recommendations.



A virtual team for primary care providers

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I feel that SCOPE has been one of the most helpful initiatives put forward by the health team. I think it is been instrumental for increasing access to services for our patients.

I feel that because of SCOPE, I have had less declined referrals.

I have also really appreciated cases where the scope nurse was able to advocate for my patients who needed to be seen urgently, versus myself calling specialist offices on a daily basis.

**Dr. Lisa Tsugios,
Primary Care Physician
Bracebridge | SCOPE User**

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Partnership with Ontario Health @ Home

Strengthening Integration, Data Access & System Navigation for MAOHT

Direct Access to Home & Community Care (HCC) Coordinator

- Enables rapid escalation and faster resolution of service delays
- Improves coordination for complex, high-needs patients
- Creates a consistent point of contact for primary care providers seeking clarification on eligibility, service options, or care transitions

Co-Design of Localized Workflows & Processes

- Opportunity to shape HCC operational processes that reflect MAOHT's geography and needs
- Ensures that standardized provincial/HCC procedures are adapted to local context where appropriate
- Supports alignment of community services with primary care workflows, reducing administrative burden and navigation challenges for providers

System-Level Advocacy & Issue Identification

- Joint mechanism to surface policy, procedural, and operational barriers (e.g., referral criteria, waitlist management, service gaps)
- Strengthens MAOHT's ability to advocate for flexible policies that better serve MAOHT population
- Provides a structured pathway for identifying recurring system challenges affecting access, flow, and patient safety

Access to HCC Database & Analytics Capacity

- Enables better understanding of unattachment, attachment trends, and flow between primary care, HCC, and community services
- Supports population health planning, resource forecasting, and identification of high-risk groups
- Allows the PCN to ground advocacy in real data—highlighting unmet needs, regional disparities, and patterns unique to MAOHT

Direct Provider Impact

- More transparent pathways and service expectations for patient referrals
- Faster resolution of issues that commonly disrupt care (delays, miscommunication, unclear criteria)
- Greater situational awareness of HCC capacity, wait times, and service availability
- Ultimately smoother transitions and improved experience for both patients and providers

MAOHT Primary Care Network Development

MAOHT PCN Vision:

PCNs will connect, integrate, and support primary care clinicians within MAOHT to improve the delivery and coordination of care for patients (OH), families and caregivers. Initially, the PCN will include Family Doctors, Nurse Practitioners and Midwives

MAOHT PCN Key Objectives :

- Organize the local primary care sector in OHT planning and provide a voice in OHT decision-making
- Serve as a vehicle to support OHTs in the implementation of local and provincial priorities.
- Articulate, advocate and drive local primary care priorities (*MAOHT-PCN*)
- Develop and implement an engagement strategy across the Primary Care sector (*MAOHT-PCN*)
- Provide for effective and efficient two-way communications with primary care network members from PCN leadership on opportunities, information to assist practices and ensure the voices in the field are heard. (*MAOHT-PCN*)

PCN Current Key Area of Focus

PCAT Submission (Nov 2025)

- Submitted and awaiting 2026 funding approval (North Muskoka \$355K and South Musoka \$2.36 Million)
- Focused on improving **patient attachment**, stabilizing primary care capacity, and supporting population-based planning
- Aligns with provincial direction on access, continuity, and team-based care

Primary Care Supportive Funding (2025–26 Allocation Completed - \$125,000)

- Funding directed to initiatives that support attachment, navigation, and coordinated care (3 projects funded)
- Prioritized projects that improve integration between primary care, HCC, and community services

Planning for 2026–27 Funding Allocation Primary Care Supportive Funding (\$125,000)

- Process underway and communicated to PCAT Members

Establishment of a PCN Governance Structure + Ongoing Leadership

- Creating a formal structure for decision-making, accountability, and resource stewardship
- Ensuring alignment across MAOHT partners, primary care practices, and system supports
- Strengthens ongoing clinician engagement and shared planning
- First General Meeting Scheduled on March 31st from 6 to 8pm – Register for the Event!

MAOHT PCN General Meeting



Date: Tuesday, March 31, 2026

Time: 6:00 p.m. – 8:00 p.m.

Location: In person (includes dinner) & virtual

Event Registration: [MAOHT PCN Save the Date](#)

Why Attend?

- *Connect with primary care colleagues across Muskoka & Almaguin*
- *Hear updates on regional primary care initiatives*
- *Share your insights to help shape the future of the PCN*
- *Convenient evening format with flexible participation option*

Have you registered to the MAOHT Primary Care Network?

Become a member of the Primary Care Network, register here:

[Primary Care Network | Muskoka Almaguin Ontario Health Team](#)