

Patients First: Towards Integrated Care

**Presentation to the Association of Family Health Teams of
Ontario 2017 Conference**

October 25-26, 2017

Presenter Disclosure

- **Presenters:** Nadia Surani and Alison Blair
- **Relationships with commercial interests:**
 - NONE

Disclosure of Commercial Support

- **This program has not received financial or in-kind commercial support.**
- **In support of this program, there are no potential conflicts of interest.**

Purpose

- Background and Overview of *Patients First*.
- *Patients First* Transition and Transformation.
- Primary Care Current Areas of Focus.

Components of the *Patients First* Plan

- The *Patients First* plan has five key components:

**Effective
Integration
of Services &
Greater
Equity**

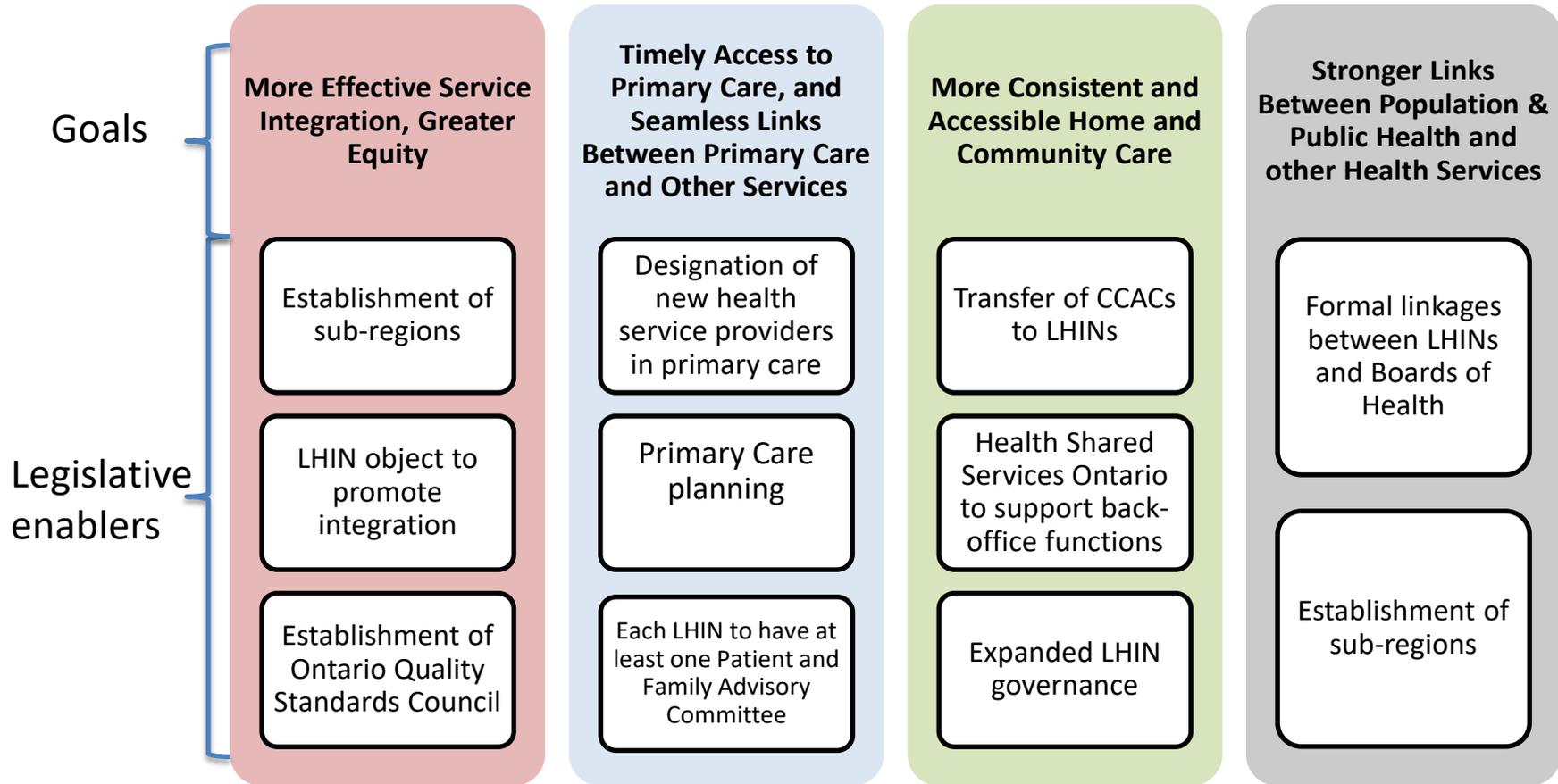
**Timely
Access to,
and Better
Integration
of, Primary
Care**

**Stronger
Links to
Population &
Public Health**

**More
Consistent,
Accessible &
Culturally-
Adapted
Home &
Community
Care**

**Inclusion of
Indigenous
Voices in
Health Care
Planning**

How the *Patients First Act* Supports Transformation



Services that Address Needs of Indigenous People Across Ontario

Ontario is engaging Indigenous partners through a parallel process that will collaboratively identify the requirements necessary to achieve responsive and transformative change

The Patients First Journey to Date

**Patients First:
Action Plan for
Health Care**

February 2015



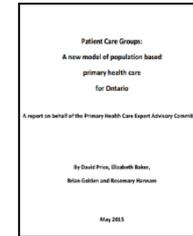
**Patients First:
Roadmap to
Strengthen
Home and
Community Care**

May 2015



**Price-Baker
Report**

May 2015



**Auditor
General
Report on
CCACs
(Phase 1)**

August 2015

**Patients First
Act, 2016
Introduction
(Bill 210)**

June 2016



**Patients First:
Reporting Back on the Province-wide
Proposal to Strengthen Patient-Centred Health
Care in Ontario**

June 2016

Province-wide
consultation
January – April
2016



**Patients First:
Discussion
Paper**

December
2015

**Auditor
General
Report on
CCACs
(Phase 2)**

December 2015

**Patients First
Act, 2016
Reintroduction
(Bill 41)**

October 2016

**Patients First
Act, 2016
Passage**

December
2016

**Launch of
Health Shared
Services
Ontario**

February 2017

**Minister's
Mandate
Letters
Released**

May 2017

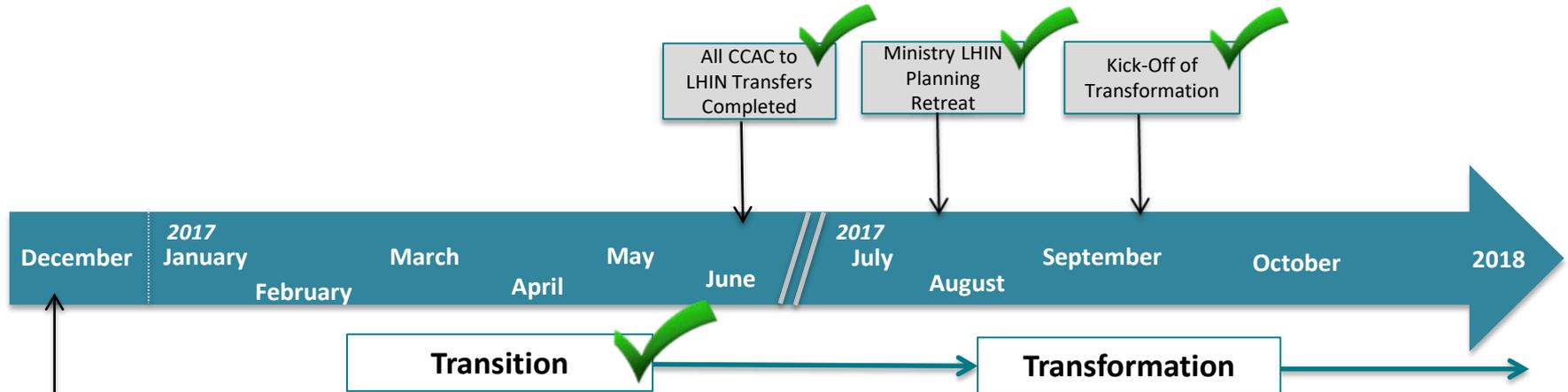
**CCAC to LHIN Transition:
Home care program and
employees transitioned**

May – June 2017

**Launch of
Patients First
Health System
Transformation**

Fall 2017

Through Transition Towards Transformation



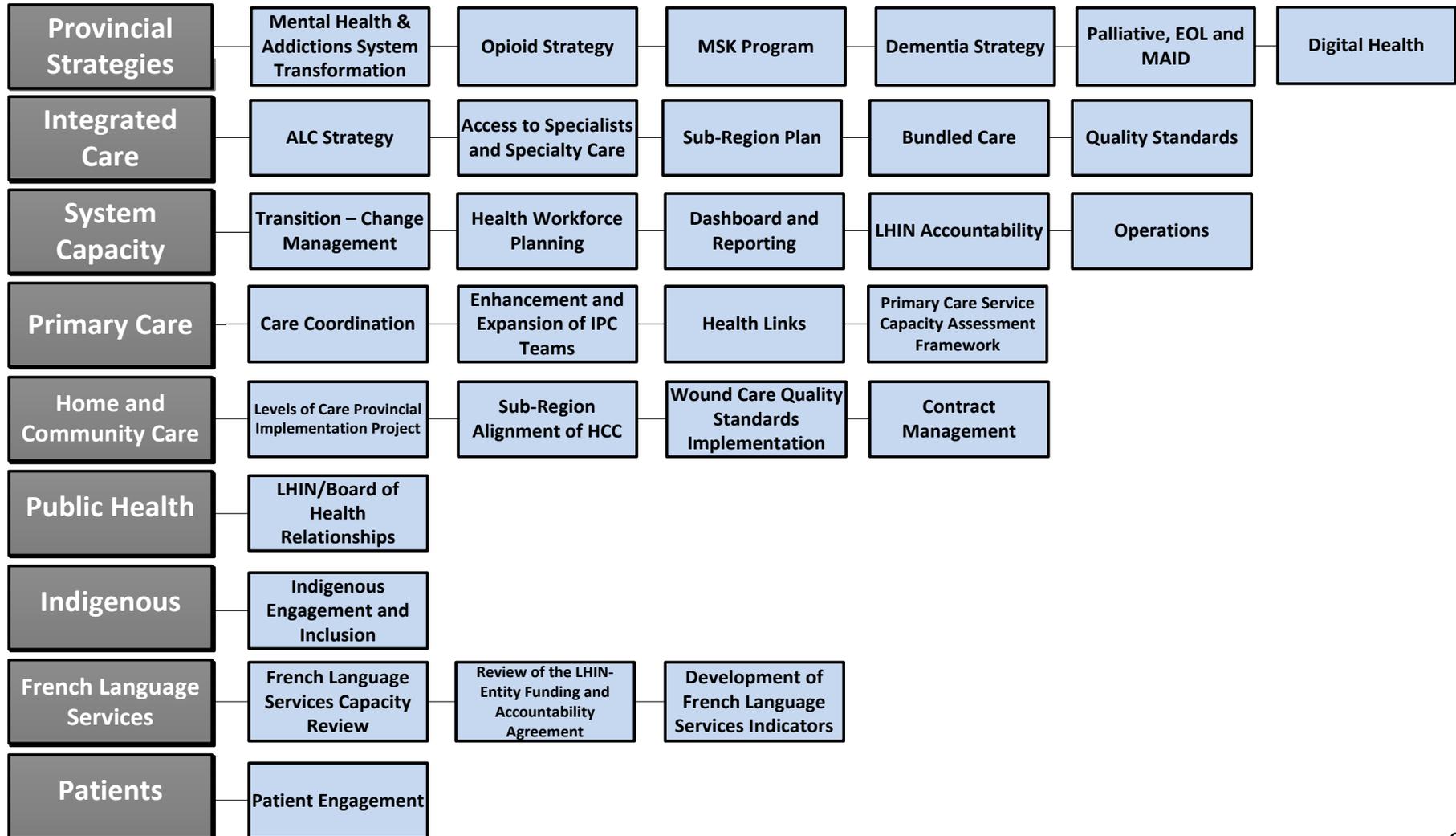
Legislation (Bill 41) passed 3rd reading and received Royal Assent.

- LHIN Governance expanded
- Combined management
- CCAC staff transitioned into LHINs
- Positive common patient-focused culture
- Clinical Leadership in place
- Corporate Services Entity established
- Sub-regions defined and used for planning health care services
- Management/administration costs will decrease by 8%, with no impact on front-line staff or care

- Sub-regional primary care reform including care coordination, plans for increased access and access to specialists
- LHIN- and sub-regional-specific priorities (e.g., mental health and addictions, opioids, digital health, MSK) based on inclusive planning that engages patients and considers the needs of vulnerable populations
- Sub-regional coordination of home and community care
- Home and Community Care Roadmap progress including Levels of Care
- Improved transitions between hospital and home, including reduced hospital readmissions
- Public reporting of improvement, including patient experience and equity

LHIN Transformation Priorities

- As the Ministry and LHINs move forward with the transformation, work is underway on 30 priority topics. The Ministry and LHINs will be actively engaging with stakeholders through multiple forums as the work progresses.



Primary Care is Central to System Transformation

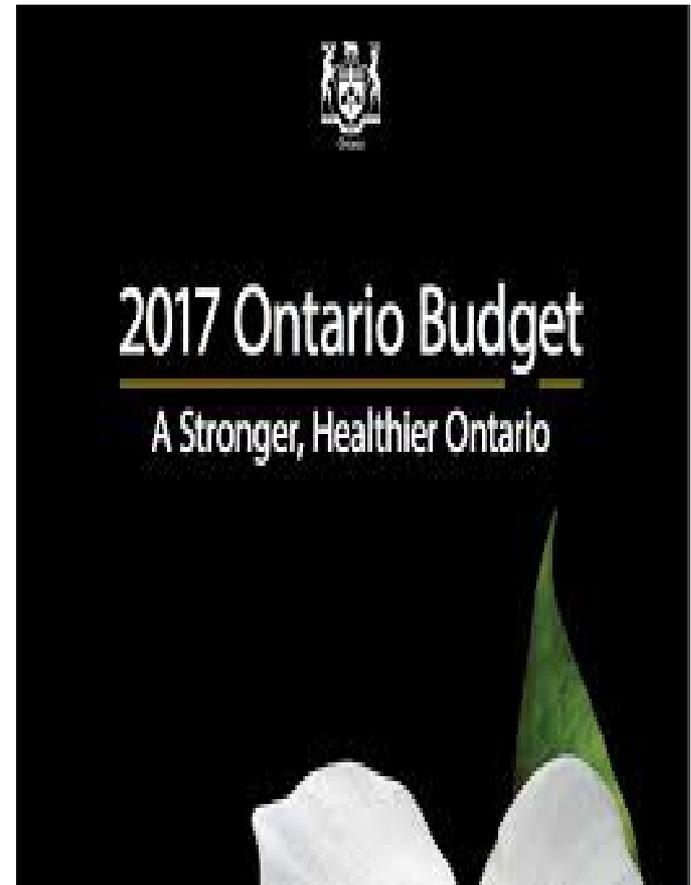
- Ontario's primary care sector is the entry point to the health care system for most Ontarians.
- Research shows that jurisdictions with high performing primary health care sectors are associated with improved health equity and better overall health system performance.
- This is why primary care remains a key area of focus for Transformation initiatives underway as evidenced by:
 - A. 2017/18 LHIN Mandate Letter;
 - B. 2017 Ontario Budget initiatives
 - C. LHIN Sub-Regions
 - D. Other supporting activities

A. 2017/18 LHIN Mandate Letter: Primary Care

- Continue to **build primary care as the foundation of the health care system** and work with health care providers to **develop sub-region plans** that:
 1. Use an equity lens to assess the number and proportion of primary care providers based on the needs of the local population.
 2. Improve access to primary care providers, including family doctors and nurse practitioners.
 3. Facilitate effective and seamless transitions between primary care and other health and social services.
 4. Improve access to inter-professional health care providers to ensure comprehensive care.
- As a priority, **develop and implement a plan** with input from primary care providers, patients, caregivers and partners that **embeds care coordinators and system navigators in primary care** to ensure smooth transitions of care between home and community care and other health and social services as required.
- Support the **integration of Health Links into sub-regional planning** with input from primary care providers.

B. Ontario Budget 2017 Initiatives - Overview

- Ontario's \$248.4 million investment over three years to enhance interprofessional primary care teams:
 - \$102 to expand access to interprofessional team-based model of care to ensure that all 76 sub-regions across the province have a team, and;
 - \$145M to address recruitment and retention challenges of interprofessional primary care providers.
- The 2017 Budget commitment is in addition to the \$85 million Budget 2016 investment in interprofessional teams and the creation of **10 new Indigenous-led primary care teams** under the Ontario First Nations Health Action Plan (OFNHAP).



B. Ontario Budget 2017: Primary Care Team Expansion

Objective:

- Increase access to interprofessional primary care through a more equitable distribution of team-based resources to address geographic and population-based variation.

Principles:

- **Access and Equity** – commitment to enhance equitable access to interprofessional teams where there is the greatest need for team-based comprehensive primary care services.
- **Population Health** – commitment to a sub-regional planning approach that uses data to better understand local needs and identify gaps in capacity.
- **Opportunities for all LHINs** – ensuring that sub-regions are identified across all LHINs to ensure opportunities are available in different regions of the province.
- **Ministry-LHIN partnership** – close collaboration between ministry and LHINs at every stage of implementation.

Status:

- LHINs are currently working with community and delivery partners to develop business cases for consideration for funding beginning 2017/18 and 2018/19.

B. Ontario Budget 2017 – Recruitment & Retention

Objective:

- To continue progress in addressing compensation inequities between health professionals and support staff in interprofessional primary care settings with equivalent professions in other health care settings.

Principles:

- **Removal of Barriers:** Support compensation packages that aim to address barriers in attracting skilled professionals from other settings.
- **Greater Equity:** Incremental steps to bridge differences in compensation between interprofessional primary care settings and other health care settings and for certain positions to address internal equity.
- **Broad Application:** Efforts to ensure all staff are able to receive some level of incremental compensation increase.
- **Accountability & Transparency:** Demonstrating value and impact for public expenditures in this area.

Status:

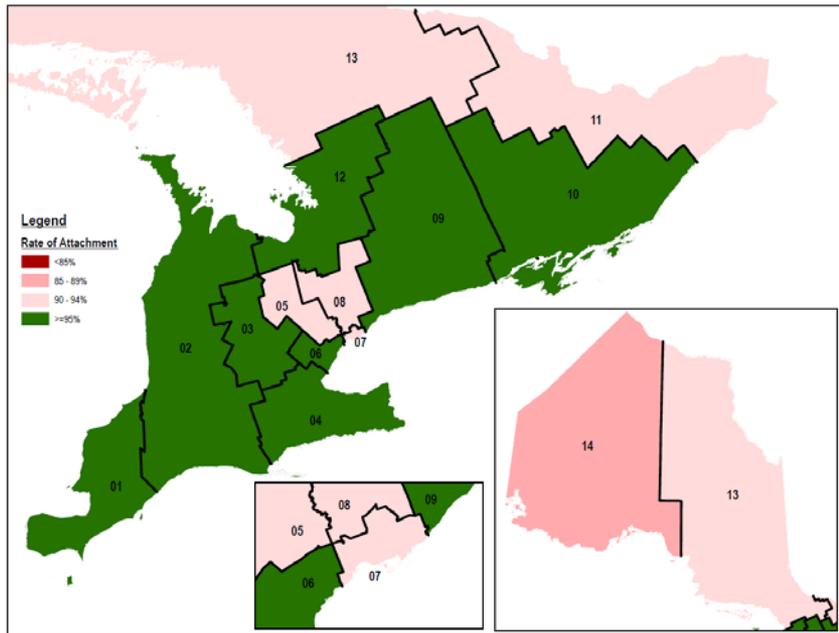
- 2017/18 allocations approved, retroactive to April, 2017; webinars held with all impacted organizations.

C. LHIN Sub-Regions

Objective:

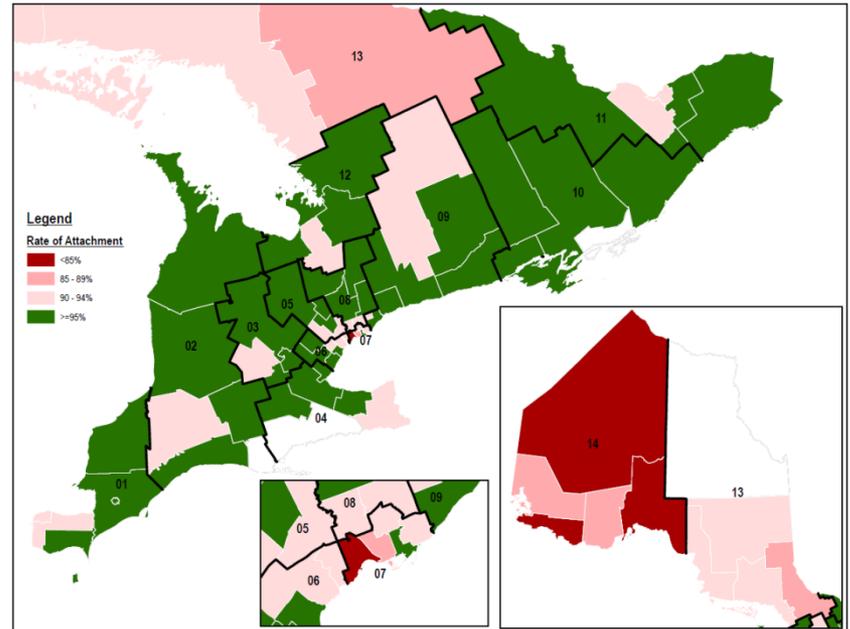
- To enhance population-based planning, improve patient and provider collaboration and better reflect the heterogeneity of community needs and provider engagement, including with primary care.

Primary Care Attachment by LHIN



Hotspots below 90% attachment:
1 LHIN (North West LHIN)

Primary Care Attachment by Sub-Region



Hotspots below 90% attachment:
8 Sub-Regions in 3 LHINs

D. Other Supporting Initiatives

- The ministry with its key partners are also advancing a range of supporting initiatives to bolster the strength of Ontario's primary care sector to further patient-centred system Transformation, including:
 - Renewing the FHT contract to modernize accountability and spread existing best practices;
 - Guidance to LHINs to improve connections between care coordination and primary care settings;
 - Evaluating the impact of the Quality Improvement Decision Support (QIDS) program;
 - Supporting clinical leadership; and,
 - On-going support to LHINs to enhance their primary care planning capacity.

Discussion