



association of family  
health teams of

AFHTO's Health Link Community of Practice met on September 21<sup>st</sup>. This communique provides an overview and highlights key items discussed:

- [Shaping the Future: Advanced Health Links Model](#)
- [Health Link CoP: Building a Partnership with the Ministry](#)
- [NSM Integrate Project](#)
- [Care Coordination Tool](#)
- [Primary Care Update: what we know & what we're doing about it](#)

*The **Health Link CoP** provides a platform for Health Link leaders within AFHTO membership to advance best practice knowledge transfer and exchange, enhance collaborations and creates the opportunity for practice members to work together to surface operational, governance or other Health Link related matters.*

## Shaping the Future: Advanced Health Links Model

In June 2015, the Ministry of Health and Long-Term Care announced the introduction of the [Advanced Health Link Model](#), to be introduced over the course of the 2015-16 fiscal year. Based on the learnings from 69 established Health Links, the Advanced Health Link model identifies four areas of focus that include enhanced performance management and oversight, elements of standardization, funding model redesign (including sustainability planning) and wider system integration. The Advanced Health Link model also illustrates the accountability of LHINs for their respective local Health Links. Through this renewed commitment to advance Health Links, the Ministry has acknowledged the need for stable, operational base funding and for better alignment between primary care and strengthened integration/collaboration, specifically with primary care teams. The evolution from the 'pilot phase' to a more mature state will also put in place formal processes to identify and disseminate emerging/best practices as a way to build on the successes achieved to date. A health links guide will be released end of September or early October that will set out the new expectations of the model, including key functions of lead organizations.

## Health Link CoP: Building a Partnership with the Ministry

The Health Link CoP was pleased to have Ministry representation at the September 21<sup>st</sup> meeting, including the acting Director (Michael Robertson) and his colleagues from the Capacity Planning and Priorities Branch as well as representation from the Primary Care Branch. Through open and transparent discussions, members highlighted a number of ongoing challenges for FHT led Health Links, including:

- **Timing of funding:** it is widely recognized that the absence of stable base funding creates significant challenges in terms of sustainability, planning, HR retention, and maintaining the ongoing momentum of health links. Many FHTs are faced with the risk of using reserves to bridge the funding gap or obtaining loans from health service partners, such as hospitals or CCACs.
- **Reporting burdens:** Streamlining and/or minimizing the numerous reporting obligations (for some FHTs this includes reports to: HQO, LHIN, Ministry, CCAC and/or hospital) could minimize the associated work load and promote more consistent, standardized reporting. The movement to reporting through the Self Reporting Initiative (SRI) could also help to enhance consistency.
- **Inconsistent direction:** there has been some concern with inconsistent direction being received across the FHT led health links between the Ministry and the LHIN. For example, the Ministry contract identifies physician engagement as an eligible expense, however many LHINs have been providing conflicting advice. There is a desire to improve standardized messaging, materials and expectations, and develop a more common approach across the LHINs.

Member leadership from the CoP, with the support of AFHTO, will continue to work closely with the Ministry in finding possible solutions to the challenges identified. There is a strong commitment from the Ministry to maintain ongoing communication and participation with the Health Link CoP!

## NSM Integrate Project

The Health Link CoP continues to be a platform to share achievements and spread success stories! The Integrate Project was launched by Cancer Care Ontario and the approach is being piloted in select regions of Ontario (from 2014-2017). Members received an overview of [INTEGRATE project piloted in the North Simcoe Muskoka LHIN](#). This project is enabling early identification and management of patients who could benefit from a palliative care approach across settings. The collaborative method is transforming the palliative care system from one with a lack of service integration and fragmentation to a system with integrated care across care sites and improved patient related outcomes.

## Care Coordination Tool (CCT)

East Toronto Health Link (ETHeL) is going live with its first published CCT on Wednesday, September 23<sup>rd</sup> – despite the very tight timelines and delay in funds, they are on track to meet this deliverable for the Ministry and Orion! The administrative burden/challenges that arose from the management of this initiative have been highlighted to the Ministry with the intent to inform subsequent roll-outs of the Care Coordination Tool, including the need to provide input to the Ministry on non-clinician feedback as it pertains to implementation. Further conversations with the Ministry are planned to occur before the end of the CCT proof of concept in March.

Just a reminder that ETHeL has already done a legal review on all three agreements (DSA, ESPA and EULA) and comments from the lawyers are available for use by any Health Link that will be participating in the CCT proof of concept. In addition, ETHeL has its agent agreement (for authoring model #3) that they are happy to share for any Health Links using that model. If you would like any of this information please contact Kavita at [kavita.mehta@setfht.on.ca](mailto:kavita.mehta@setfht.on.ca).

## Primary Care Update: what we know & what we're doing about it

Over forty AFHTO members from around the province – the combination of AFHTO's [Physician Leadership Council \(PLC\)](#) and [ED Advisory Council \(EDAC\)](#) – came together on September 17<sup>th</sup> to **dialogue with the Ministry** to gain further clarity on what is known (and not known) as it plans for primary care. One of the key messages is that work to develop policy and strategy is underway and that there will be further discussion and consultation as this progresses. For further details from this meeting please see the [meeting summary](#) and/or [full report \[PDF\]](#).

Members expressed interest in conducting a face to face meeting in early 2016. Further details will be provided over the coming months. For any further questions, or if you are interested in participating on the Health Link CoP, please contact:

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