Health Quality Transformation 2014

Partnering to accelerate best care, best health, best value

Session 9 – Health Link Communities & Transformational Change – How Visionary Leadership is Driving Health System Improvement

Lee Fairclough, Vice President, Health Quality Ontario

Presenter Disclosures

- **Nancy Naylor**
- **Kirk Mason**
- **Jonathan Kerr, MD**
- **Tim Rutledge, MD**

- **Have no relationships with commercial interests**

Disclosure of Commercial Support

- This session has received no commercial support

Mitigating Potential Bias

- Not applicable

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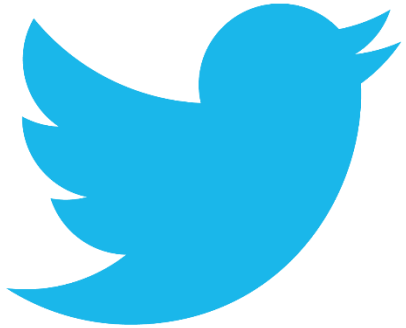

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Health Links

"…through Health Links, we have worked with providers across the system to deliver quality care in appropriate settings, to our most complex patients, and you will continue to build on these successes. It will be a challenging transformation, but you and your health care partners will work together to protect and strengthen our health care system."

From the Premier's mandate letter to the Minister of Health and Long-Term Care, 2014 September 25
http://www.Ontario.ca/government/2014-mandate-letter-health-and-long-term-care

Health Links & Transformational Change

- Unprecedented shift in the delivery of health care
- Integration of services across the continuum of care
- Coordination of care and collaboration among providers
- Focus is on:
  - Improving access to primary care for seniors and people with complex chronic illness
  - Reducing the time from referral from primary care to a specialist
  - Improving the overall experience during the journey though the health system

Time for Reflection

Visionary Leaders

- Provide inspiration
- Lead through uncertainty
- Create new partnerships
- Ensure that services are patient-centred
- Drive culture change

Panelists

- **Nancy Naylor** – Assistant Deputy Minister, Health System Accountability and Performance, Ontario Ministry of Health and Long-term Care
- **Kirk Mason** – family member, care giver for grandfather; participant in North York Central Health Link
- **Jonathan Kerr, MD** – President, Ontario College of Family Physicians; Primary Care Lead, South East LHIN
- **Tim Rutledge, MD** – Chief Executive Officer, North York General Hospital

Engaging, Motivating, and Inspiring

Dr. Jonathan Kerr

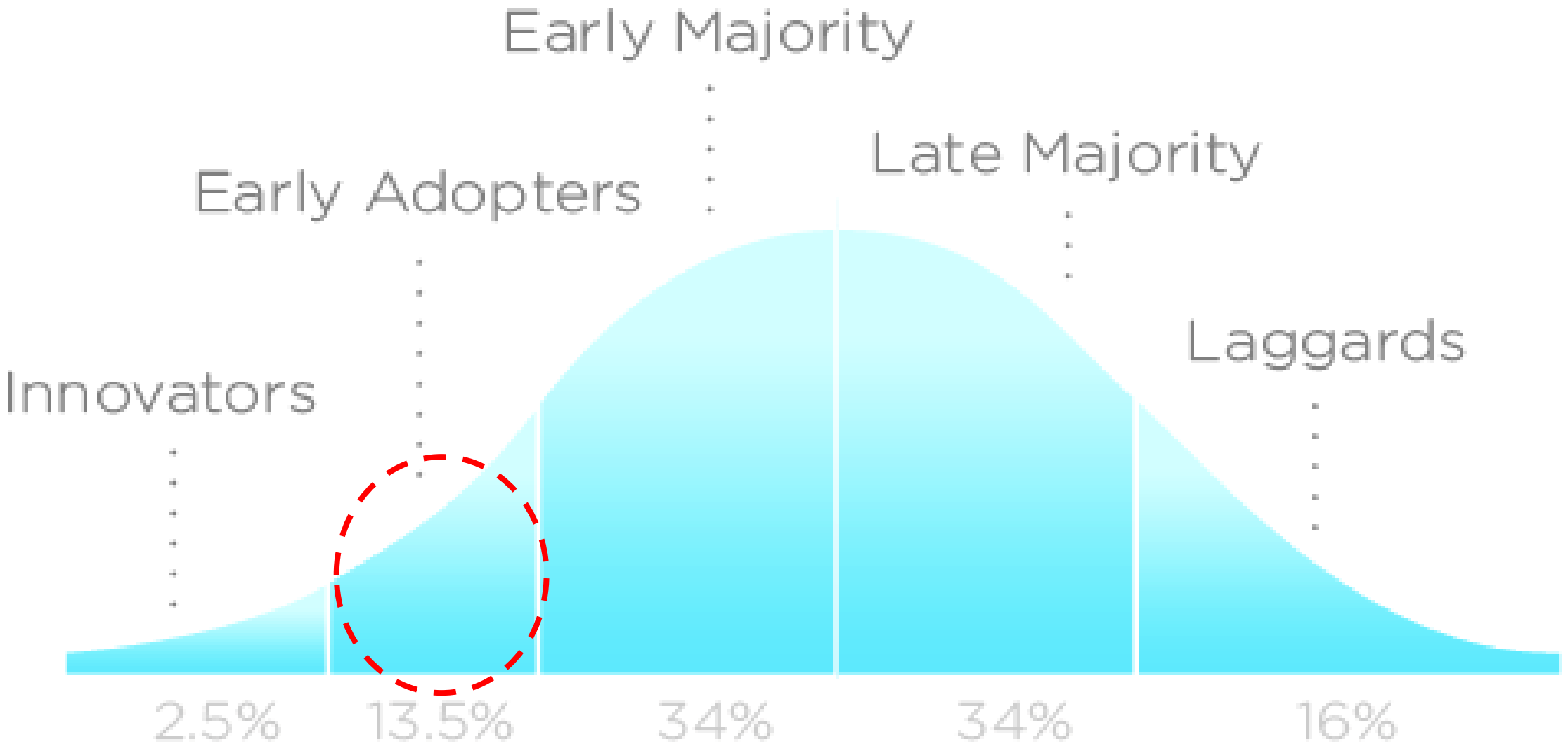
President, Ontario College of Family Physicians
Primary Care Lead, South East LHIN

Engaging, Motivating, and Inspiring

1. Build Relationships and Trust
2. Focus on the Early Adopters
3. Foster Ownership (not buy-in)
4. Use Patient Stories

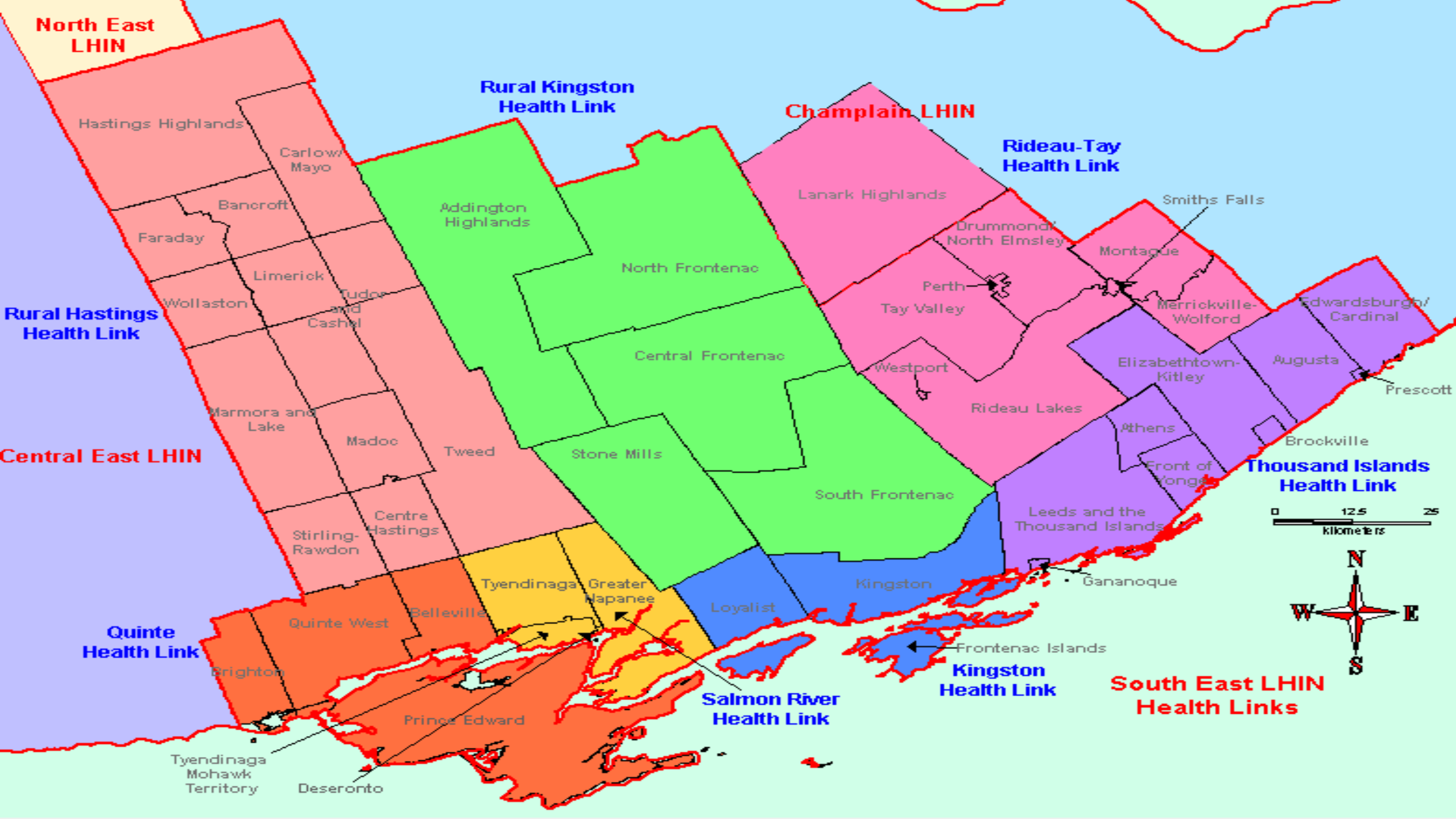
Build Relationships and Trust

Focus on the Early Adopters



INNOVATION ADOPTION LIFECYCLE

Rogers et al. (1957)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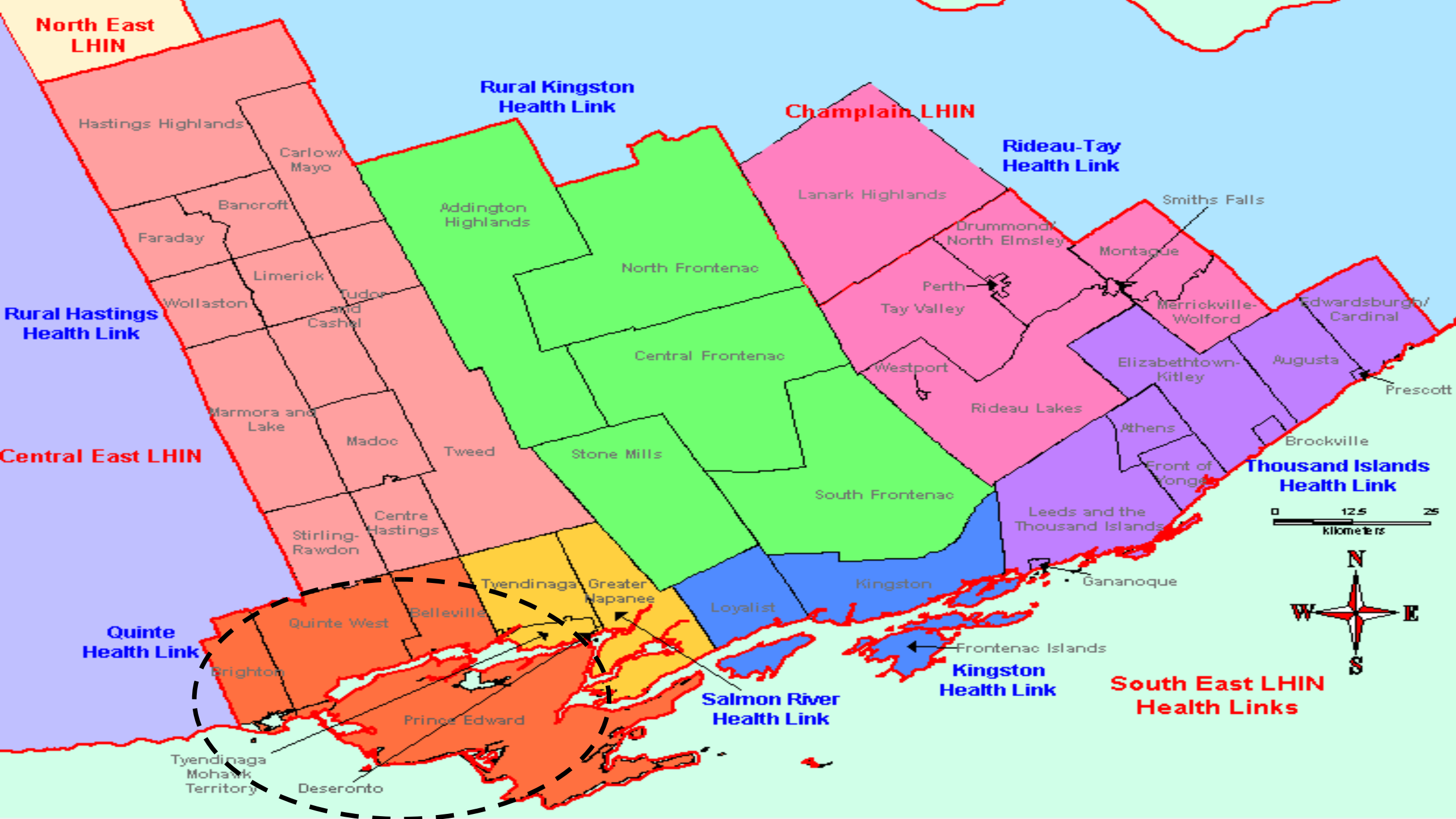
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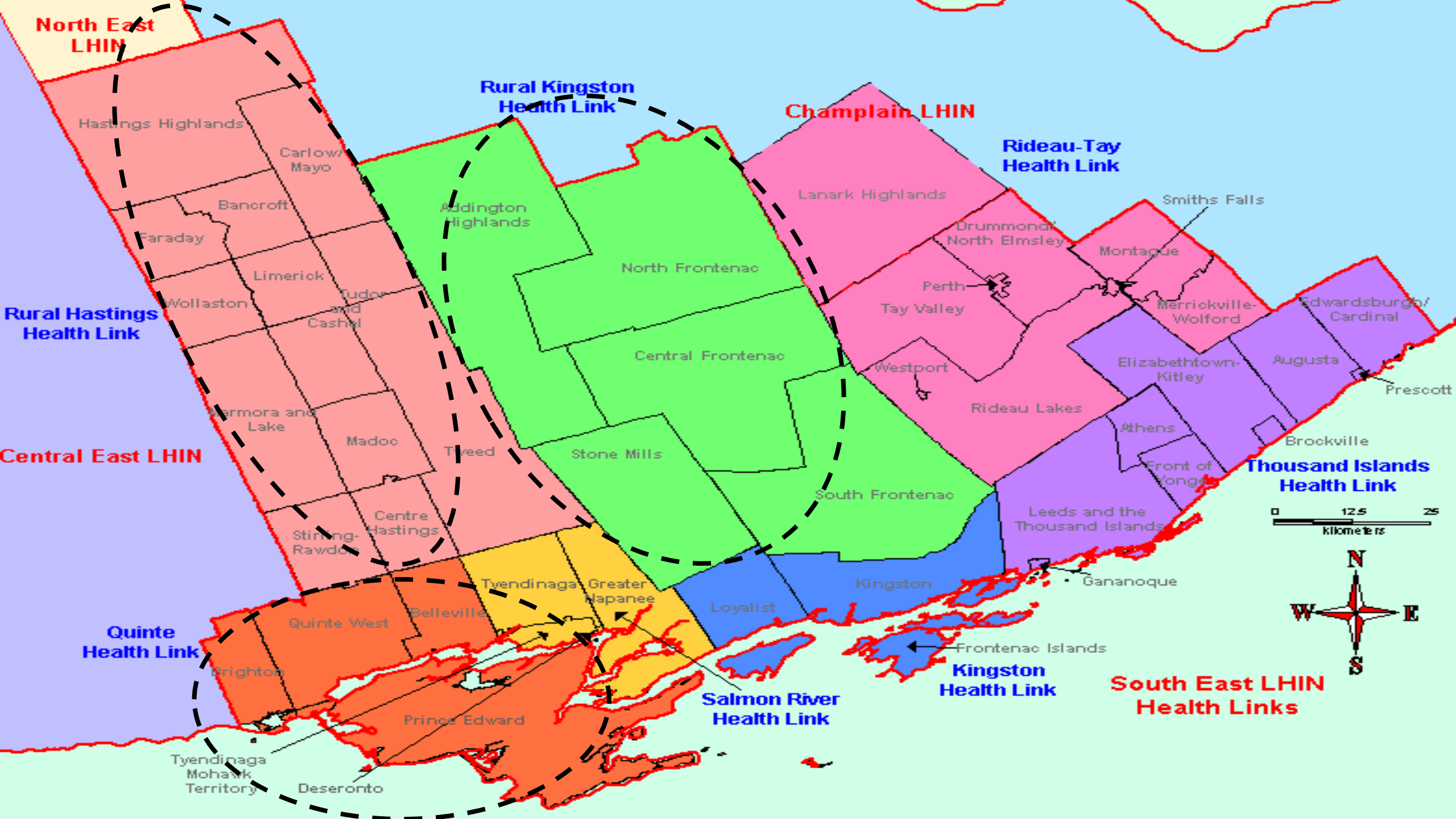
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Buy-in
vs.
Ownership

Buy-in

"*being convinced to implement an idea that someone else has developed*"

Ownership

"*participating freely in the development of an idea"*

How are Health Links Unfolding?

WHAT:

- Identify Complex Patients
- Attaching Complex Patients to Primary Care
- Coordinated Care Planning

HOW:

- Building Relationships
- EMR/IT Connectivity
- Patient Engagement

A true story about one of my Health Link patients…

Benefits to My Practice

- **For my most complex patients:**
  - Easier to obtain health care services
  - Better understanding of their personal goals
  - I feel supported in managing their care
  - Personal relationships developed through working as part of a team
  - Fewer visits to my office
  - Less time per visit to my office
  - Higher professional satisfaction

Benefits to My Patients

- More focused on their goals
- Better understanding of their conditions
- Easier to obtain health care services
- They feel supported in managing their care
- Fewer visits to doctors/hospitals
- Higher quality of life

Dr. Jonathan Kerr

President, Ontario College of Family Physicians
Primary Care Lead, South East LHIN

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HealthLink
North York Central
Let's Make Healthy Change Happen

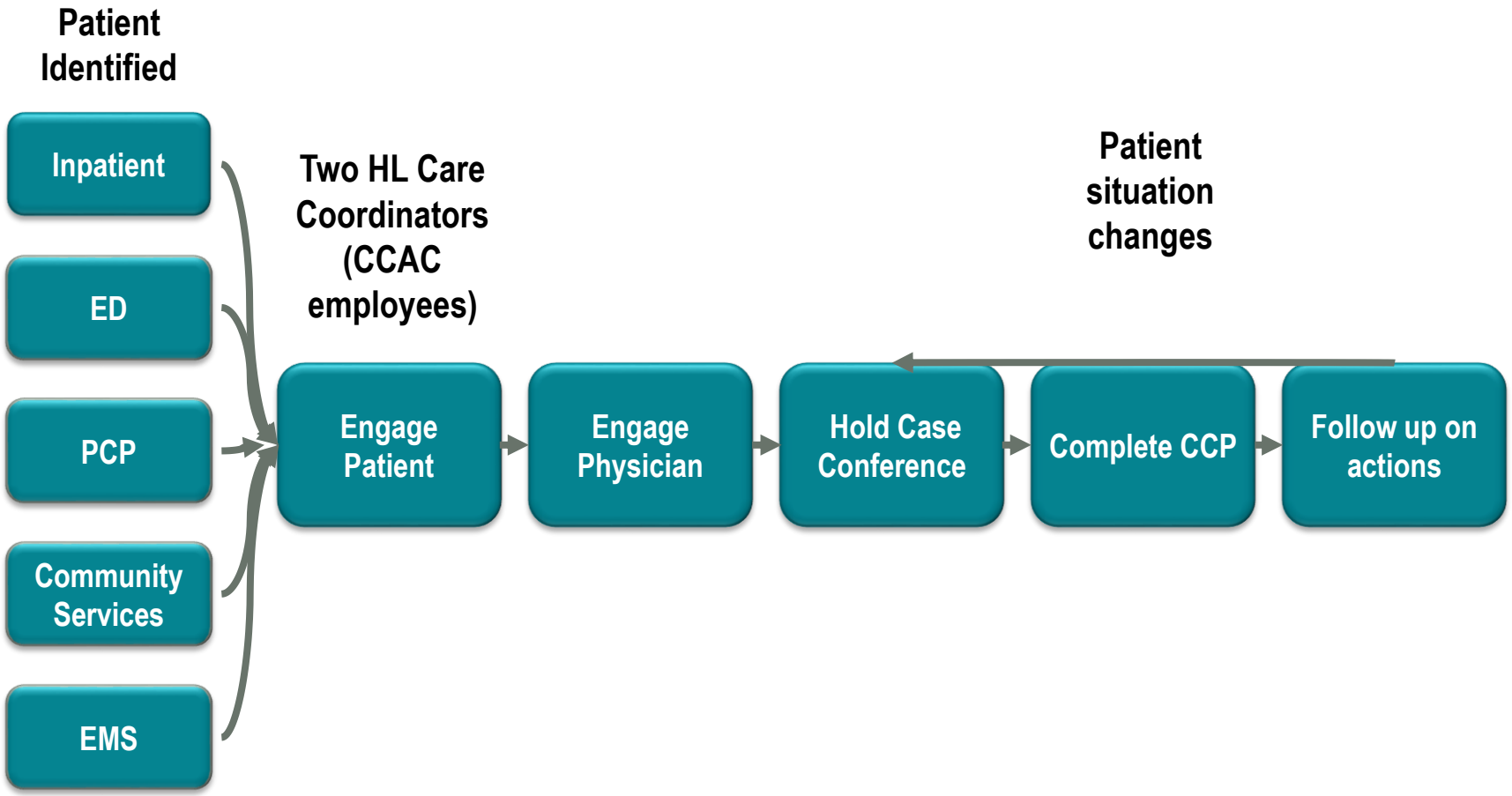
North York Central Health Link

HQO Transformation Conference
November 23, 2014

Ontario

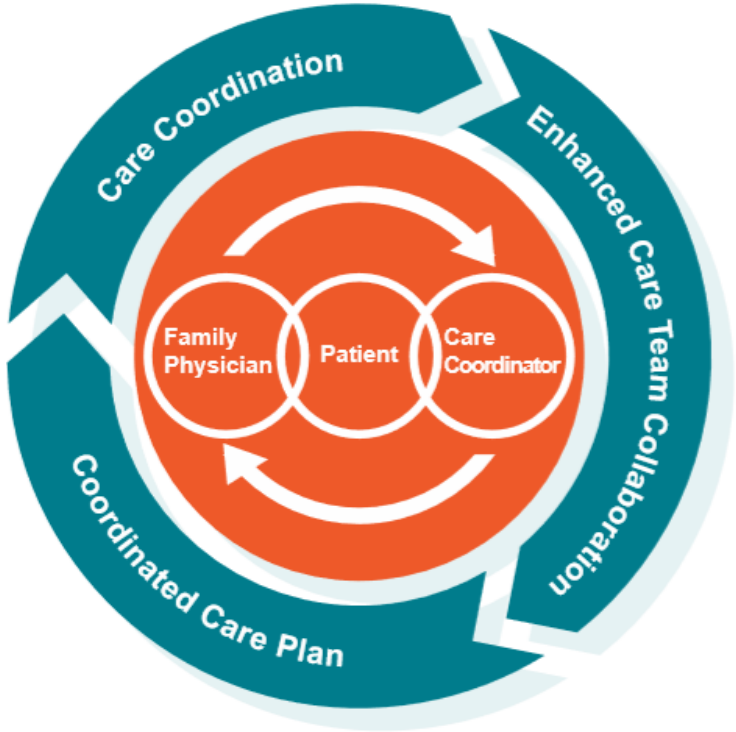
North York Central Health Link: a Partnership

The NYCHL model engages the patient and care team to collaborate



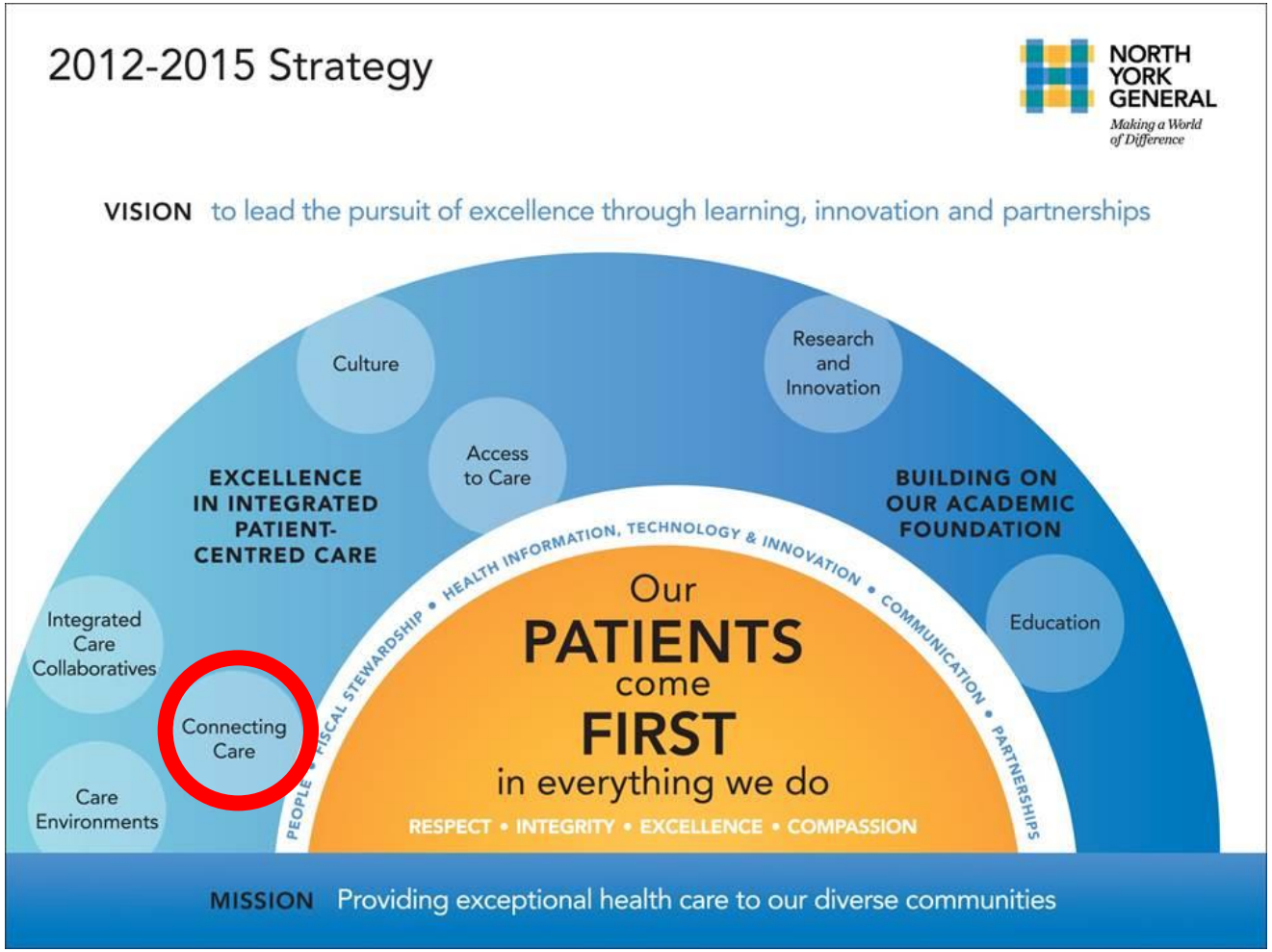
NYCHL benefits from strong family physician engagement

- 300 members in Department of Family Medicine
- Strong Primary Care network in Central LHIN
- Reach out to physicians through existing venues

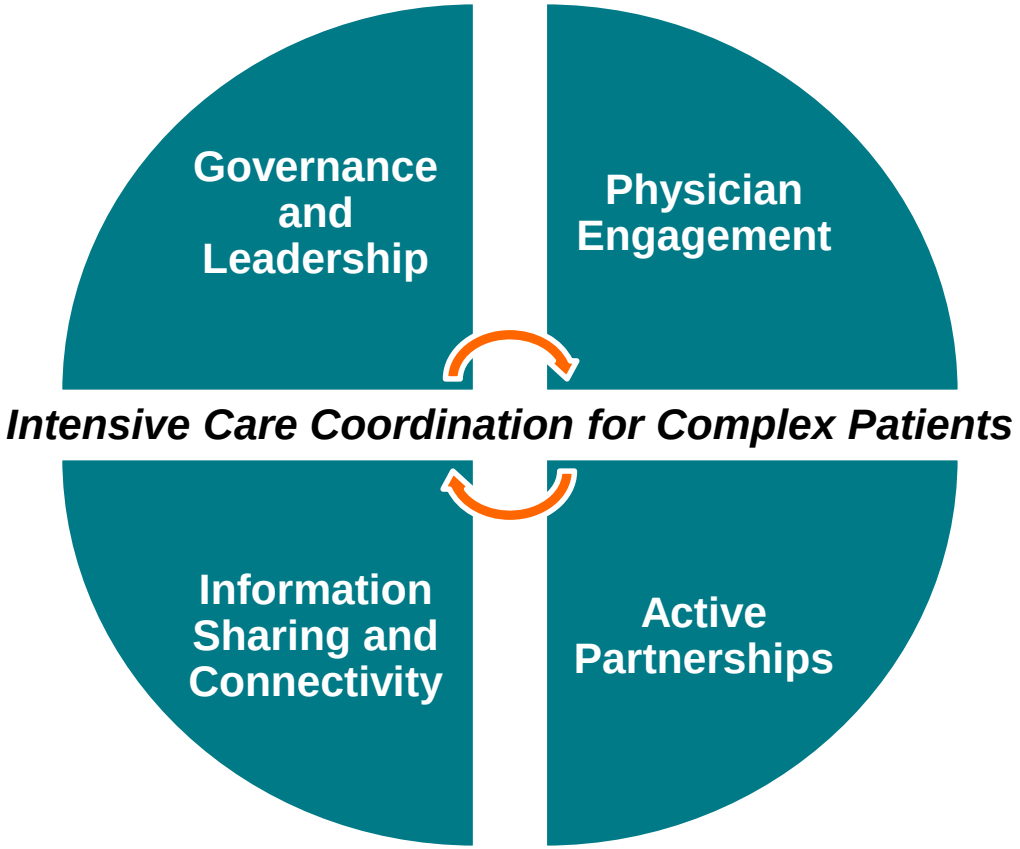


NYCHL builds on NYGH's Connecting Care Initiative

- Fax notifications
- Warm hand-offs
- Physician directory
- e-Consult



NYCHL is focused on four areas to ensure sustainability



NYCHL: Key success factors

- Culture, Leadership, Collaboration
- Focus on the needs of Patients and their Families – supports the concept of the patient-centred medical home
- Just get going!

HealthLink
North York Central

Let's Make Healthy Change Happen

Thank You

North York Central Health Link Team
HealthLinks@nygh.on.ca

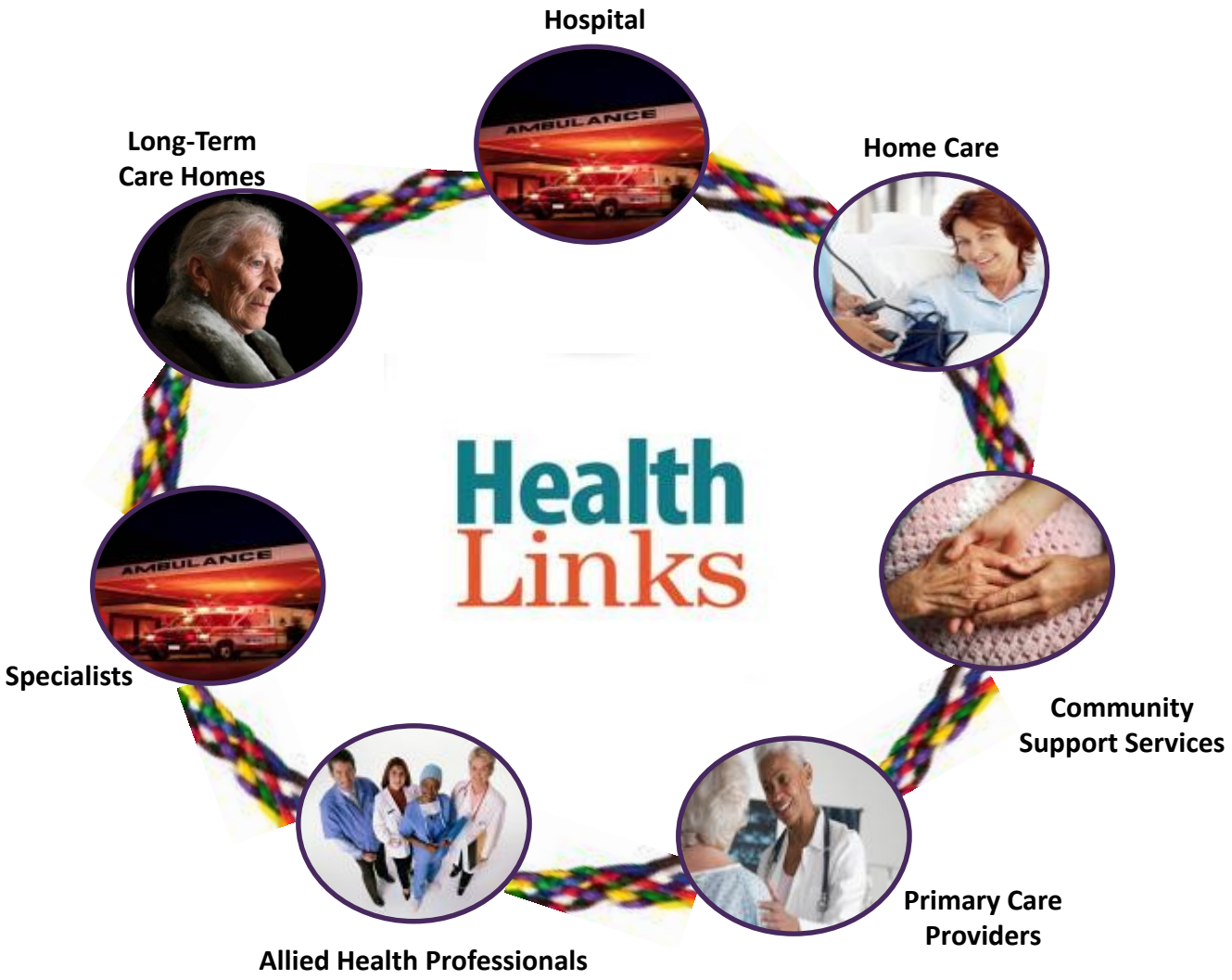
Ontario

From Start-Up to Sustainability and Beyond: Maturing the Health Links Model for Ontario

Nancy Naylor
Assistant Deputy Minister
Health System Accountability and Performance
Ministry of Health and Long-Term Care

November 20, 2014

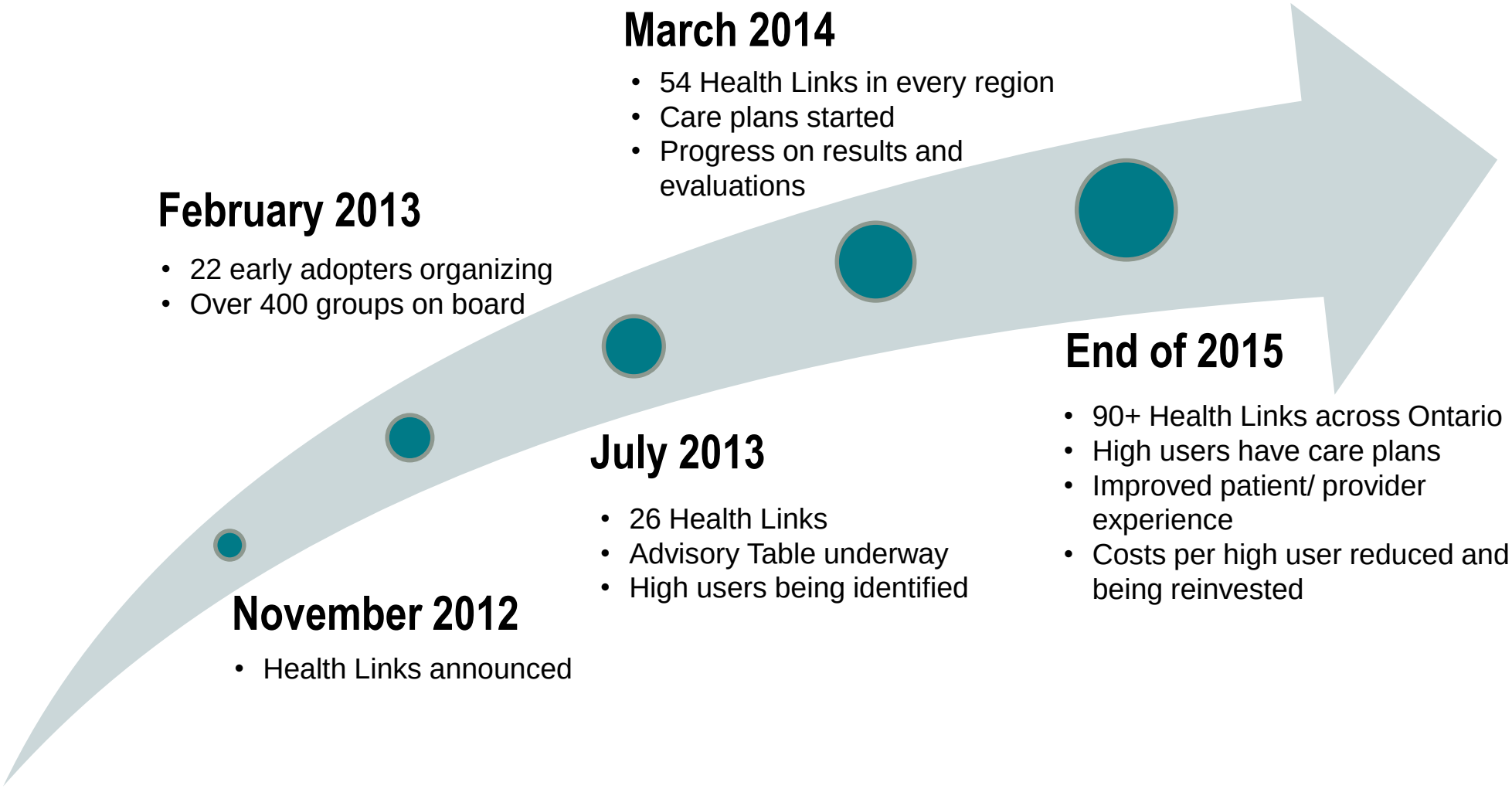
Better Integration Through Health Links



Coordinated and integrated care is the heart of Health Links:

- Health Links launched December 2012.
- New model to improve care for high needs patients.
- All providers working at the local level to integrate clinical care and coordinate plans at the patient level.
- Initial focus on people with complex health conditions.

The Health Links Journey



November 2012

- Health Links announced

February 2013

- 22 early adopters organizing
- Over 400 groups on board

July 2013

- 26 Health Links
- Advisory Table underway
- High users being identified

March 2014

- 54 Health Links in every region
- Care plans started
- Progress on results and evaluations

End of 2015

- 90+ Health Links across Ontario
- High users have care plans
- Improved patient/ provider experience
- Costs per high user reduced and being reinvested

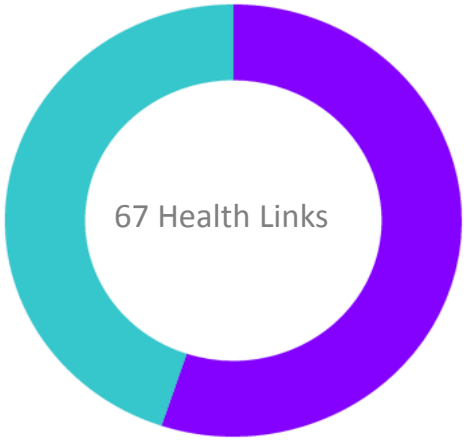
Health Links Progress – To Date

ALL LHINs

sit on provincial privacy forum to facilitate exchange of best privacy and data sharing practices

68%

of the projected 98 Health Links have been approved in to date.



3,264

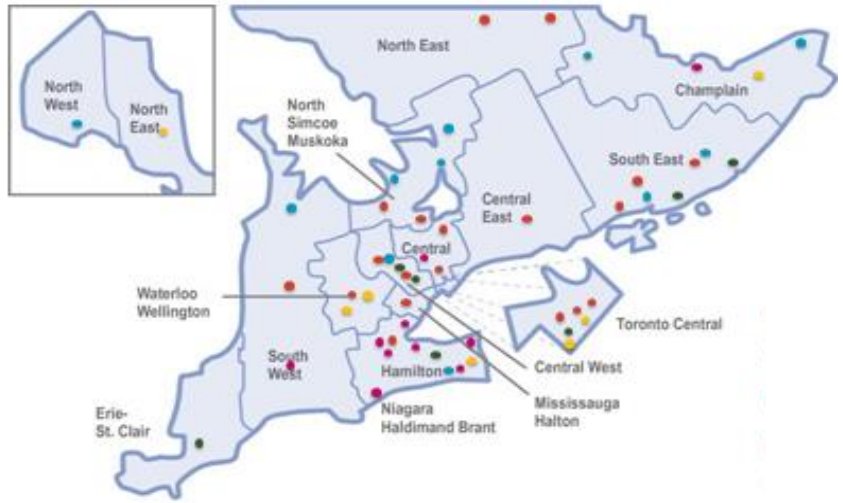
CARE PLANS PRODUCED

Health Links have surpassed their initial targets for the fiscal year 2013/2014

8,197

ATTACHED PATIENTS

Health Links have been using Health Care Connect and other resources to find unattached patients



Health and social service providers have joined their local health links to service and plan for their communities better

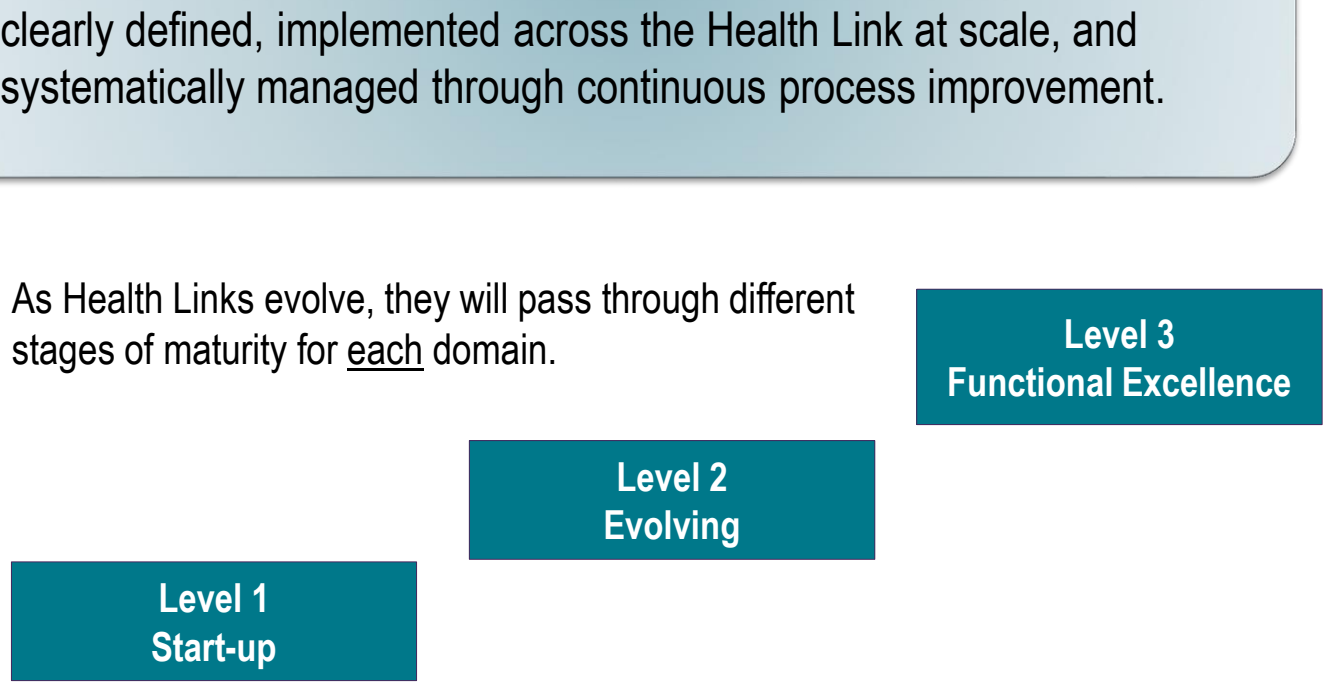
40

Introduction to the Health Links Maturity Journey

Health Links Maturity Journey: a five level process maturity continuum based on leading practice review.

Population Impact at Scale is demonstrated by processes that are clearly defined, implemented across the Health Link at scale, and systematically managed through continuous process improvement.

As Health Links evolve, they will pass through different stages of maturity for <u>each</u> domain.



<u>Maturity Journey Evolution</u>

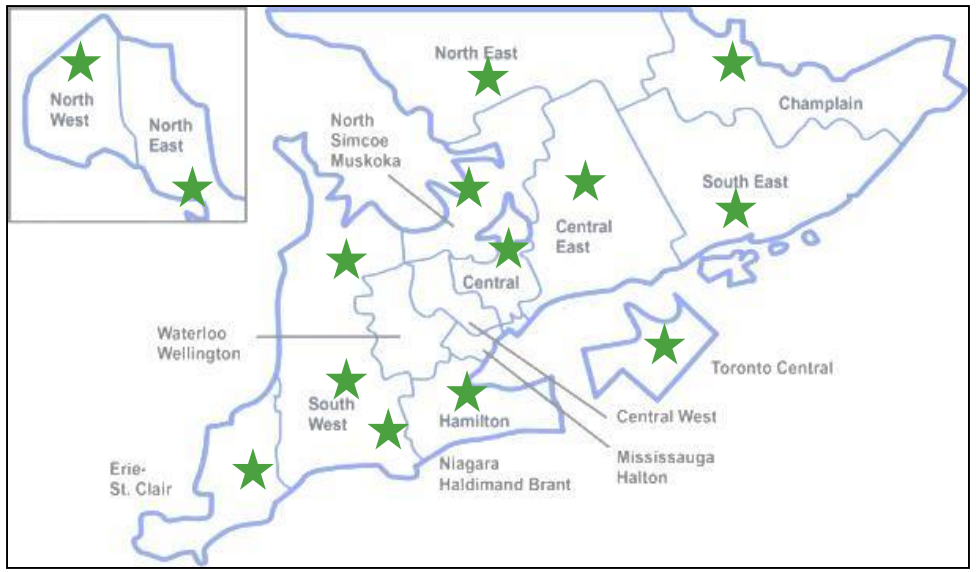
Level 1: planning level only
Level 2: experimenting and testing
Level 3: implemented, piloted, proven
Level 4: integrated across all partners
Level 5: used at scale, across all settings

Lessons Learned – Rapid Cycle Evaluations

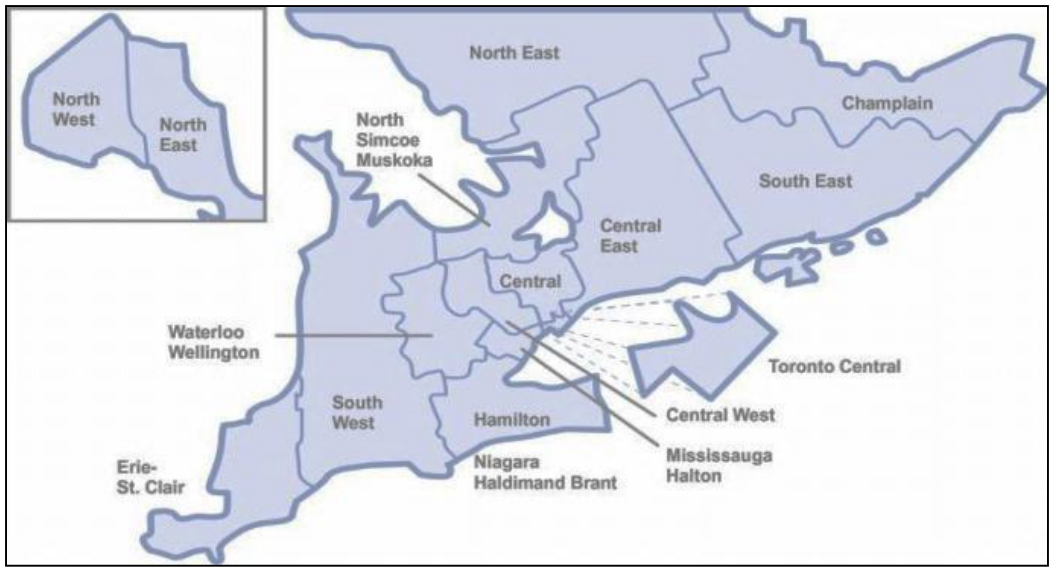
Supporting and accelerating the Health Links maturity journey	• Health Links and LHINs will face new challenges integrating and scaling across sectors • New capabilities will need to be developed at each level • Focus on process, tools, communication is required at each level
Balancing tension between operational optimization and continued innovation	• Operational excellence tends to reward incremental gains and optimization of process rather than breakthrough innovation • Latter stages require as much or more innovation as early stages from Health Links, providers, and LHINs • Need to plan and develop the structures and metrics to enable continued innovation through the Health Links journey
Understanding impact of characterizations on trajectory along maturity journey	• Selecting the best evolutionary path for Health Links based on characterizations may accelerate progress and benefits realization • Intra- and inter-Health Link structures, relationships, and processes may be constructed to optimize maturity journey

Developing Health Links

Pockets of excellence through early adopters



Full Provincial Coverage through Health Links at Scale



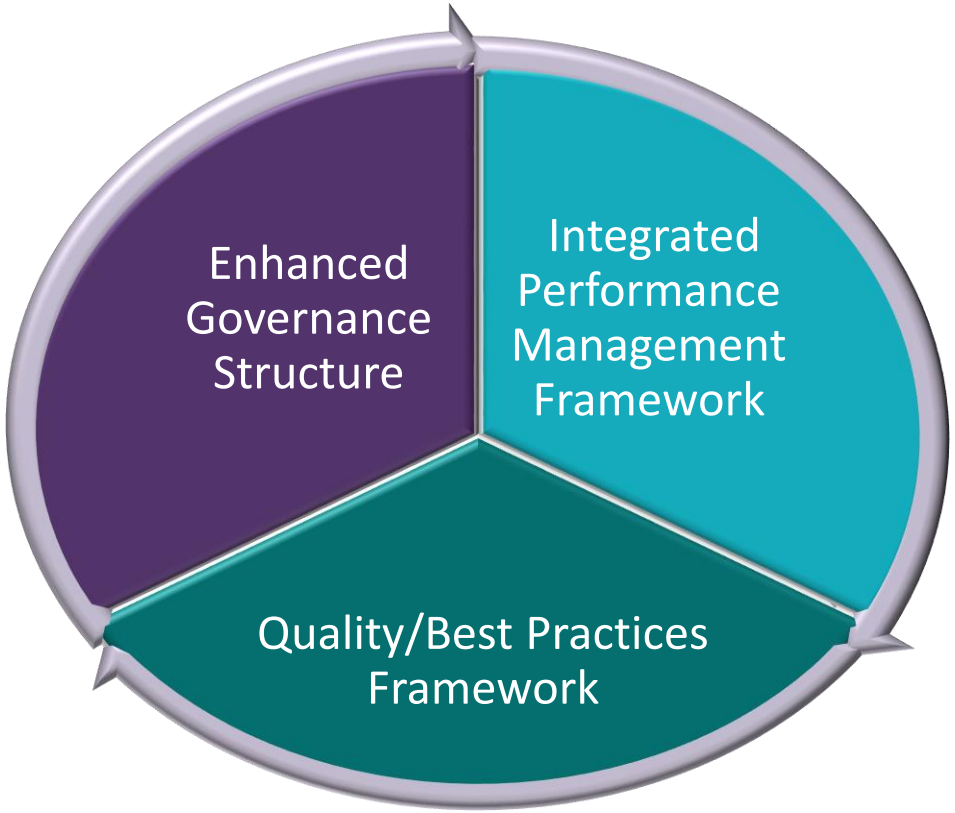
Tools the sector has asked for:

- CCT across the Province
- Flexible Funding to support maturity
- Tools to support Complex Patient ID
- KTE and Best Practices
- Stimulation of Provider Engagement

Maturity Strategy:

An Advanced Health Links Model
Governance Reform: Roles and Responsibilities
Performance Management
Fostering and Disseminating Best Practice

Advanced Health Links Model



HealthLinks

An Advanced Health Links model is proposed to move from early implementation to a provincial model that will:

- Enable coordinated care at scale through 90+ Health Links
- Promote quality care across the continuum and sectors and an improved patient/provider experience
- Ensure shared accountability with LHINs for performance
- Drive to sustainability of Health Links and health system savings
- Drive broader health system integration

Health Links: The Ground Game for Transformation

HealthLinks

- Coordinated patient-centred care at scale for complex patients
- Support upstream / early patient identification
- Driving improvements in health and social needs of vulnerable populations (e.g. mental health, palliative)
- Integrated delivery of health, social and community services
- Support adoption of integrated funding mechanisms to facilitate integrated care