

# PATIENTS FIRST:

## A Proposal to Strengthen Patient- Centred Health Care in Ontario

Overview for  
Consultation  
2016



# Today's Objectives

1

Provide a brief overview of the local health care system

2

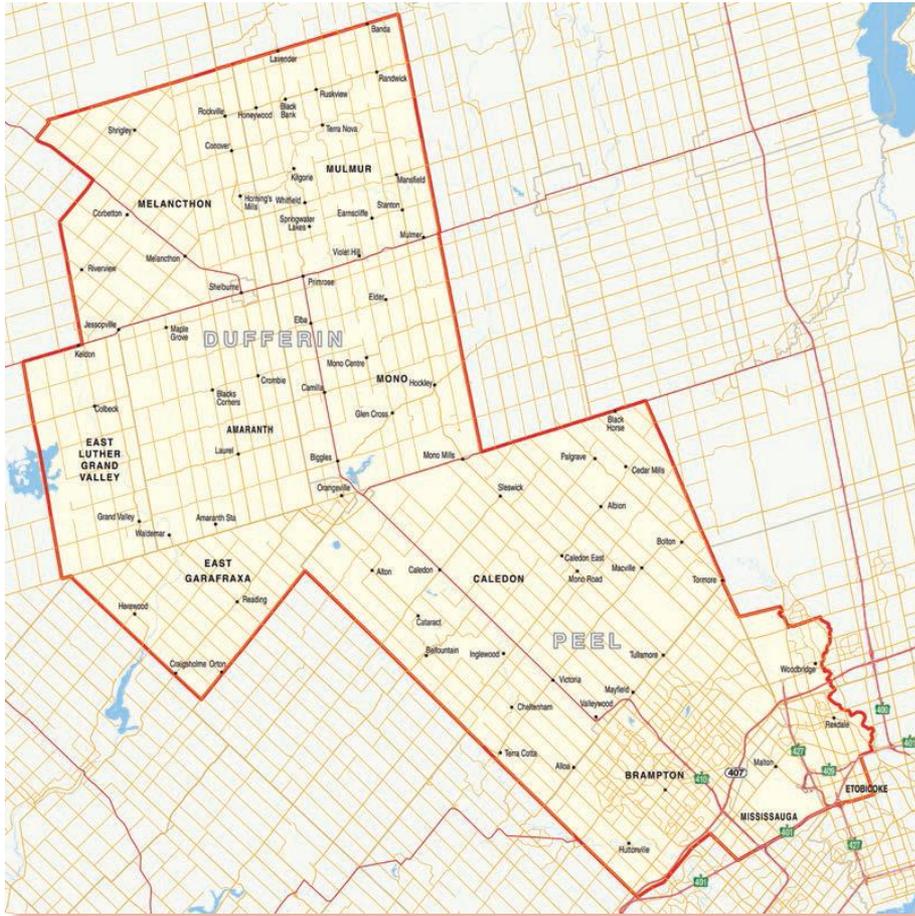
Walk you through what is being proposed – the rationale for the changes, and what it means for you

3

Get your feedback – reaction, comments, questions or concerns

# The Local Health Care System

The Central West LHIN is legislatively mandated to plan, integrate, fund and monitor the local health care system.



The communities we serve...

- Brampton
- Caledon
- Dufferin County
- Malton
- north Etobicoke
- west Woodbridge

# Glossary

**Ministry of Health and Long-Term Care (MOHLTC)** | The provincial ministry responsible for setting the overall direction and priorities for the health system.

**Community Care Access Centres (CCACs)** | Coordinate home care... assess individual needs, determine eligibility for service, develop a care plan, and arrange for the appropriate home care services.

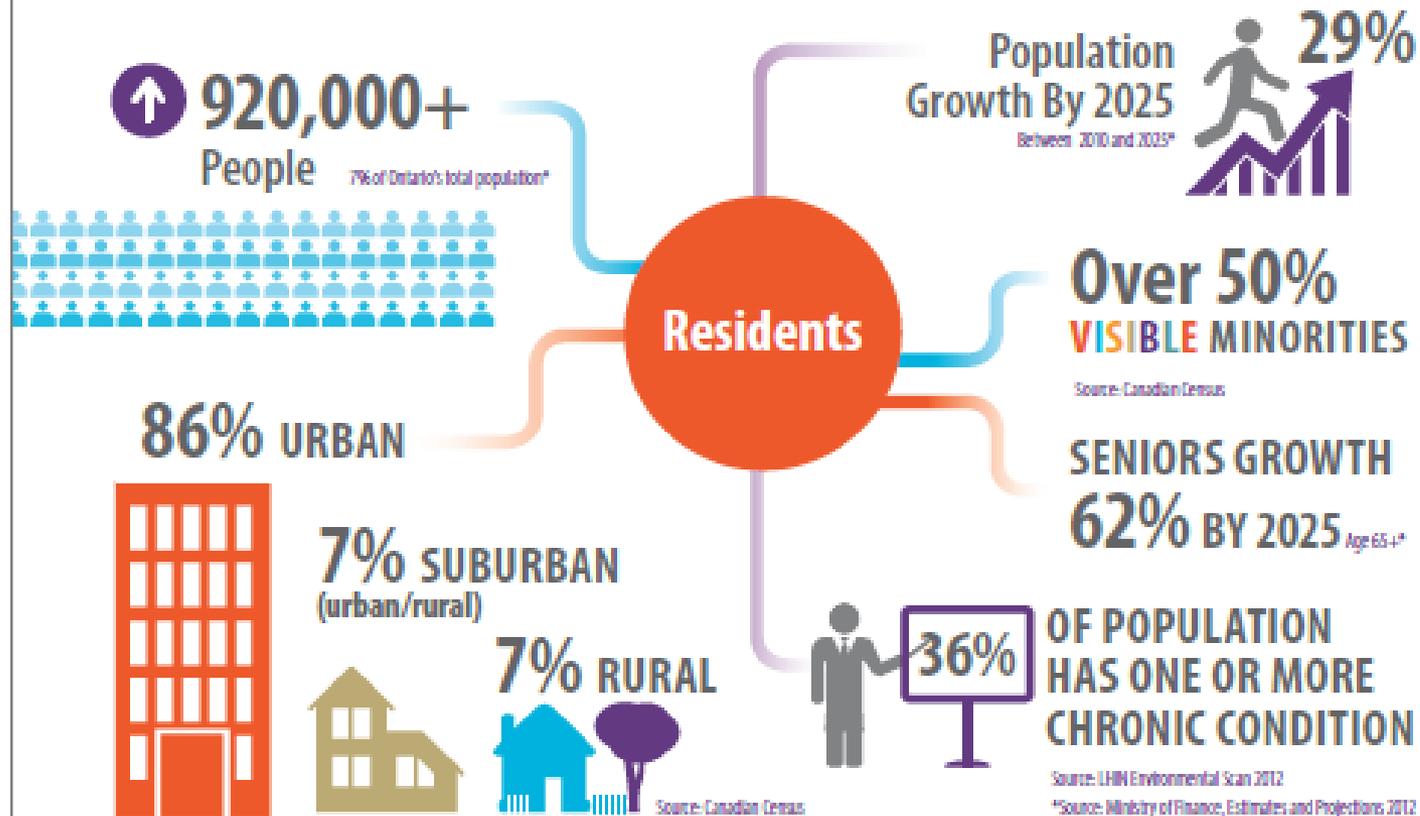
**Primary Care** | A primary care provider is your family doctor or nurse practitioner who you go to when you're sick and who refers patients to other health care providers such as specialists based on need.

**Public Health** | Promote healthy lifestyles, prevent disease or injury and health protection strategies. There are 36 Public Health Units (PHUs) across the province, each led by a medical officer of health.

**Community Support Services (CSS)** | Community-based services for people who need help to function independently because of a disability, illness or a limitation due to aging.

## Central West LHIN

# BY THE NUMBERS



# Health Service Providers (HSPs) and Community Partners



**23** Long-Term Care Homes (LTC) | **Over 750,000** resident days/year



**15** Community Support Services (CSS) | **Over 40,000** clients/year



**8** Mental Health & Addictions agencies | **Over 20,000** mental health and addictions interactions to local LHIN residents each year



**2** Hospital Corporations across 4 sites | **240,000** Emergency Department visits and **over 70,000** admissions per/yr.



**2** Community Health Centers (CHC) across 5 locations | **Over 25,000** primary care visits/year



**1** Community Care Access Centre (CCAC) | Coordinates, Integrates... Serving **32,500** clients/year

# Improving Ontario's Health Care System....

# Ontario Health System Achievements

- Over the past decade, Ontario's health care system has improved in a number of important ways:



Inter-professional models of family health care serve nearly 4 million patients.



94% of Ontarians now have a regular family health care provider.



Emergency room wait times have improved despite substantial increases in volumes.



92% of home and community care clients say their care experience has been good, very good or excellent.

- These meaningful accomplishments are the result of planning, hard work and a continued focus on quality by staff in hospitals, offices, clinics, home and community care, Local Health Integration Networks (LHINs), Community Care Access Centres (CCACs), long-term care and other service providers.
- CCACs have played a significant role in the achievements this province has seen in home and community care. In the ministry's proposal, the essential work of CCAC employees would continue.

# A Need for Continued Improvement

**1**

**Some Ontarians – members of diverse and cultural groups (especially newcomers), people with mental health and addiction challenges, Indigenous peoples, Franco-Ontarians – are not always well-served by the health care system.**

**2**

**Many Ontarians have difficulty seeing their primary care provider when they need to, especially during evenings or weekends.**

**3**

**Some families find home and community care services inconsistent and hard to find, and many family caregivers are experiencing high levels of stress.**

**4**

**Public health services are disconnected from the rest of the health care system**

**5**

**Health services are fragmented in the way they are planned and delivered. This fragmentation can affect the patient experience and can result in poor health outcomes.**

# Proposed changes intend to improve the patient experience and system performance

## EASIER ACCESS

- Making it easier to get care in your community
- Making the health care system easier to navigate
- Reducing the strain on emergency departments

## MORE EQUITABLE

- Better access to care no matter where you live in the province, and improved health outcomes for under-served groups

## GREATER CONSISTENCY

- Across home and community services
- Easier for patients and health care providers to connect
- Lower stress on caregivers

## BETTER CONNECTIONS

- Between primary health care providers, hospitals and community care
- Public health and population health planning and other parts of the system

# Four Components

## Effective Integration of Services and Greater Equity

- **Make LHINs responsible for all health service planning and performance.**
- **Identify sub-LHIN regions as the focal point for integrated service planning and delivery.**

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

- **LHINs would take on responsibility for primary care planning and performance improvement, in partnership with local clinical leaders.**

## More Consistent and Accessible Home & Community Care

- **Direct responsibility for service management and delivery would be transferred from CCACs to the LHINs.**

## Stronger Links to Population & Public Health

- **Linkages between LHINs and Public Health units would be formalized.**

# Effective Integration of Services and Greater Equity

- The mandate of LHINs would be extended to play a greater role in primary care, home and community care, and public health.
- LHINs would identify smaller sub-geographic regions that would be the focal point for local planning and service management and delivery.
- LHINs would assess local priorities, current performance, and areas for improvement to achieve integrated, comprehensive care for patients.
- The LHIN role would be inclusive of the voices of Indigenous peoples, Franco-Ontarians, newcomers, and people with mental health and addictions issues to better address their health outcomes.

## Anticipated Performance Improvements

- Care delivered based on community needs
- Appropriate care options enhanced within communities
- Easier access to a range of care services
- Better connections between care providers in offices, clinics, home and hospital

# Timely Access to Primary Care, and Seamless Links Between Primary Care and Other Services

- High quality primary health care is the foundation of a high-performing health care system.
- Each LHIN would be responsible for organizing local primary care to ensure access to high quality, integrated care for the patients in the region.
  - LHINs would work closely with patients and primary care providers to plan and monitor performance, and to identify ways to improve care that are tailored to the needs of the community.
  - LHINs would be responsible for ensuring that local patients have access to primary care (this does not mean that patients would be required to receive care in their region or that patients would no longer be able to choose their provider).

## Anticipated Performance Improvements

- All patients who want a primary care provider have one
- More same-day, next-day, after-hours and weekend care
- Lower rates of hospital readmissions; lower emergency department use
- Higher patient satisfaction

# Consistent and Accessible Home & Community Care

- **Essential home care functions would be moved into the LHINs to better integrate with other parts of the health care system and to improve service quality, coordination and accountability.**
- **LHIN boards would have responsibility for the delivery of home and community care.**
- **Home care coordinators would be focused on LHIN sub-regions and placed in primary care settings.**
- **Most home care services would continue to be provided by current service providers. Over time, contracts with these service providers would be better aligned with LHIN sub-regions.**

## Anticipated Performance Improvements

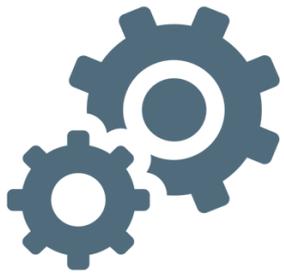
- **Easier transitions from acute, primary and home and community care and long-term care**
- **Clear standards for home and community care**
- **Greater consistency and transparency around the province**
- **Better patient and caregiver experience**

# Stronger Links Between Population & Public Health and other Health Services

- Population health – defined as the health outcomes of a particular community – is a core responsibility of local public health units in Ontario.
- The proposed reforms would integrate population health and health system planning and delivery.
- LHINs and public health units would formalize the alignment of their work and planning to ensure that population and public health priorities inform planning, funding and delivery.

## Anticipated Performance Improvements

- Health service delivery better reflects population needs
- Public health and health service delivery better integrated
- Social determinants of health and health equity incorporated into care planning
- Stronger linkages between disease prevention, health promotion and care



## Effective Integration of Services and Greater Equity

Question for Discussion



**Q1. What other local health organizations can be engaged to ensure patients are receiving the care they need when they need it?**

**Q2. How will we know we are successful?**



## Timely Access to Primary Care, and Seamless Links Between Primary Care and Other Services

Question for Discussion



**Q1. What do you see as the most important area for improvement in primary care?**

**Q2. How will we know we are successful in better linking primary care with the health care system?**



## More Consistent and Accessible Home & Community Care

Question for  
Discussion



**Q1. What is the most important for you and people you know when it comes to your home care?**

**Q2. How will we know we are successful in improving home and community care services?**



# Stronger Links Between Population & Public Health and Other Health Services

Question for Discussion



**Q1. What public health services do you value in your community?**

**Q2. How will we know we are successful in better integrating public health with the rest of the health system?**

## Other Comments and Next Steps

# THANK YOU!

- **This consultation is part of a broader engagement process being conducted by the Ministry**
- **Feedback from this and other consultations will be consolidated by the ministry.**
- **For more information, including a copy of the full report, and to provide additional feedback please visit the Central West LHIN Website at:**

**[WWW.CENTRALWESTLHIN.ON.CA](http://WWW.CENTRALWESTLHIN.ON.CA)**