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# SOUTH GEORGIAN BAY COMMUNITY HEALTH LINK

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PROJECT MANAGER: SHELLEY KAPITAN

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HEALTH QUALITY QI COACHING SUPPORT: SUE JONES

# PRESENTER DISCLOSURE

## Presenters:

- Marie LaRose
- Shelley Kapitan
- Sue Jones
- Bryan Beacock

## Relationships with commercial interests:

- No relationship with any commercial interests

# DISCLOSURE OF COMMERCIAL SUPPORT

This program has received financial support from the Ministry of Health and Long Term care in the form of support for Health Links.

## Potential for conflict(s) of interest:

- The speakers have not received any payment/funding from any other organization other than the Ministry of Health and Long Term Care
- No products will be discussed or for sale during this presentation.

# MITIGATING POTENTIAL BIAS

No mitigation necessary as there are no conflicts

# PRESENTATION OBJECTIVES

- Identify how to choose sector partners to construct integration
- How to involve patients in the re-design in creating an integrated model of care
- How technology can impact on the integration of care and how this health link has used partnerships to move technology forward
- How to create the culture of thinking differently

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# GUIDING PRINCIPLES

## Health Link Guiding Principles

- High Level shared vision of all partners
- Patient Equity
- Embrace a patient centered philosophy
- True spirit of collaboration

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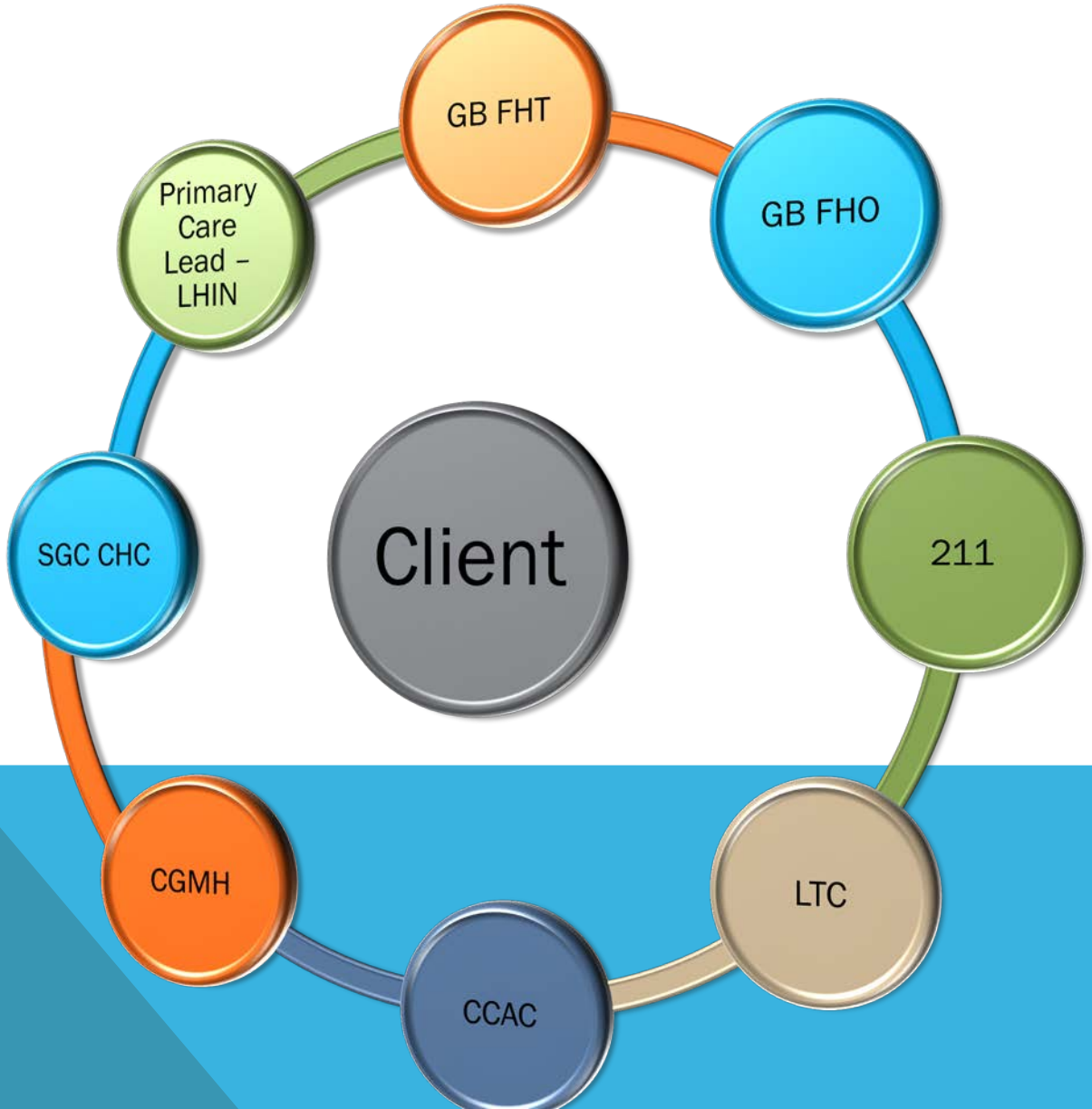
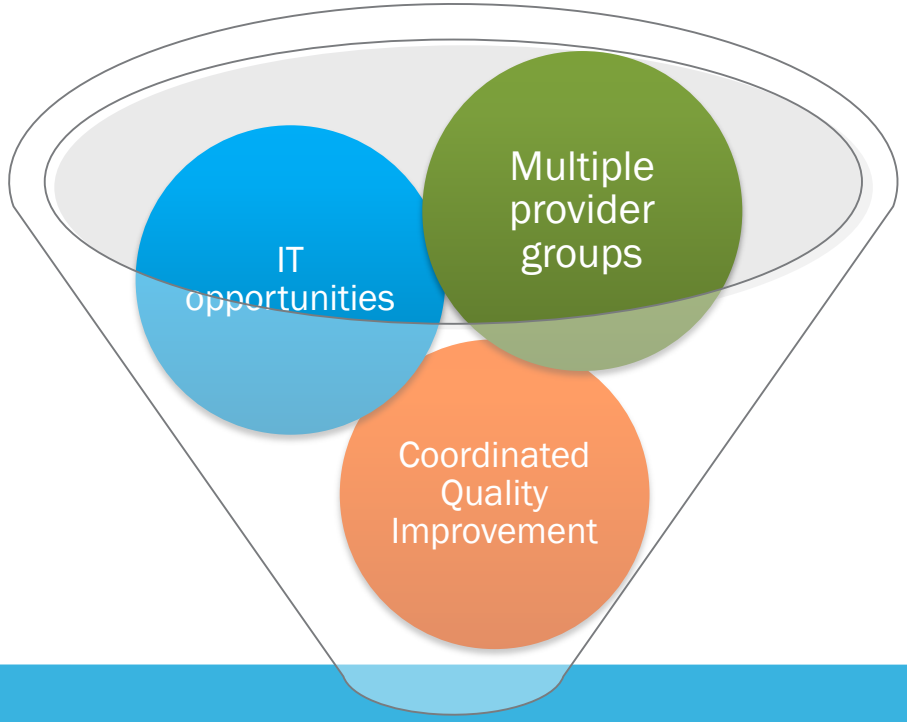
# SGB HEALTH LINK GOVERNANCE MODEL

- **NSM LHIN**
- **HQO**



# COLLABORATION

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# HOW TO SUSTAIN THE CASE CONFERENCE MODEL?

**Just Started - PDSA**

- Play Navigator Role
- Change Team
- Created forms
- Interviewed Patient
- Not sustainable - let model evolve

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# PATIENT ENGAGEMENT – CARE MODEL

Primary Care Identification, communication with patient and consent

In home Interview – obtain patient story and goals

Present Patient story at Change Team Meeting

brainstorm and research for improvements and additional services as required

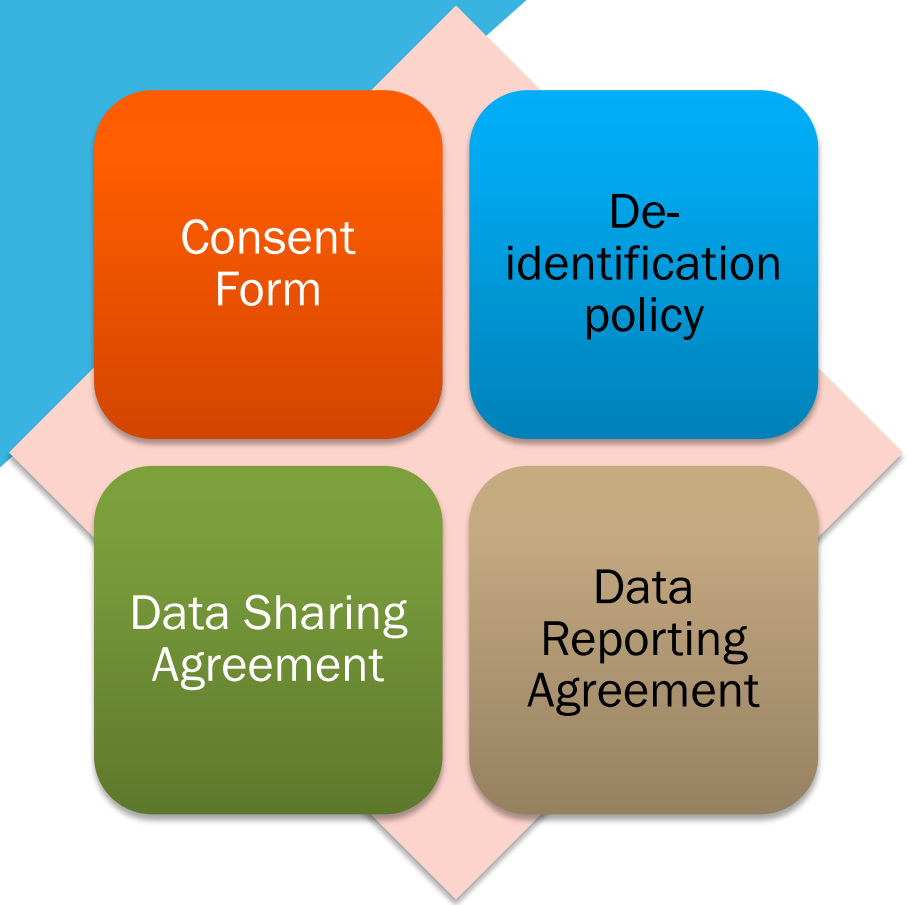
In home Care Conference with all providers forming the care team to create initial care plan

Scheduled weekly updates between Care Coordinator and patient/family

Regular patient satisfaction surveys

Review and enhance the model based on specific patient feedback plus Patient Advisory Group for consultation on designs

# SUPPORTING THE COLLABORATION WITH PRIVACY




Health Link Privacy Program

# OUR TECHNOLOGY SOLUTION

**Single, Shared instance of EMR (Practice Solutions Suite):**

- GBFHO physicians
- GBFHT
- Added SGBC CHC
- Local pharmacies (ePrescribing)
- ED physicians

**Adding a portal to allow access to Health Link partners**

- With role-based security to ensure appropriate level of access
- Secure messaging between physicians and Health Link care team members

RangeHealth

Search

## Mickey Mouse

ON 5555555555

Male, Born on February 24th 1991

| 0 | 2 | 14 | 1 |
|---|---|---|---|
| PRESCRIPTIONS | ALLERGIES | CONDITIONS | RISKS |

Connected

**Muzill Wahid** 11d
Suspected reaction to: Tylenol Arthritis Pain oral
Major Allergy: Dinosaurs

**Muzill Wahid** 21d
Suspected reaction to: Shellfish, Fish
Minor Allergy: Peanuts

## Feed

**Donald Doak** 4d
have a look at these reports
...

**Donald Doak** 4d
Mickey needs another volunteer

**Clark Kent** 4d
AND SO THE RISK IS INCORRECT

**Clark Kent** 4d
VISITED MICKEY TODAY - HES SMOKING AGAIN

**Muzill Wahid** 11d
Suspected reaction to: Tylenol Arthritis Pain oral
Major Allergy: Dinosaurs

**Muzill Wahid** 11d
Reminder: Added: Needs '' every 2 months

**Muzill Wahid** 11d
Current condition: kfeajkbfekjabfkejabfkjea

**Muzill Wahid** 11d
No further Chest Pain or Shortness of Breath. "Feeling better today." Patient reports headache.
O: Afebrile, P 84, R 16, BP 130/82. No acute distress.
...

RangeHealth

Search

**Mickey Mouse**
ON 5555555555
Male, Born on February 24th 1991

| 0 | 0 | 0 | 1 |
|---|---|---|---|
| PRESCRIPTIONS | ALLERGIES | CONDITIONS | RISKS |

Connected



Type @+name to mention others. Type #+text:text to add tags.

Choose Files no file…lected

POST

## Feed



**Clark Kent** 4d
AND SO THE RISK IS INCORRECT

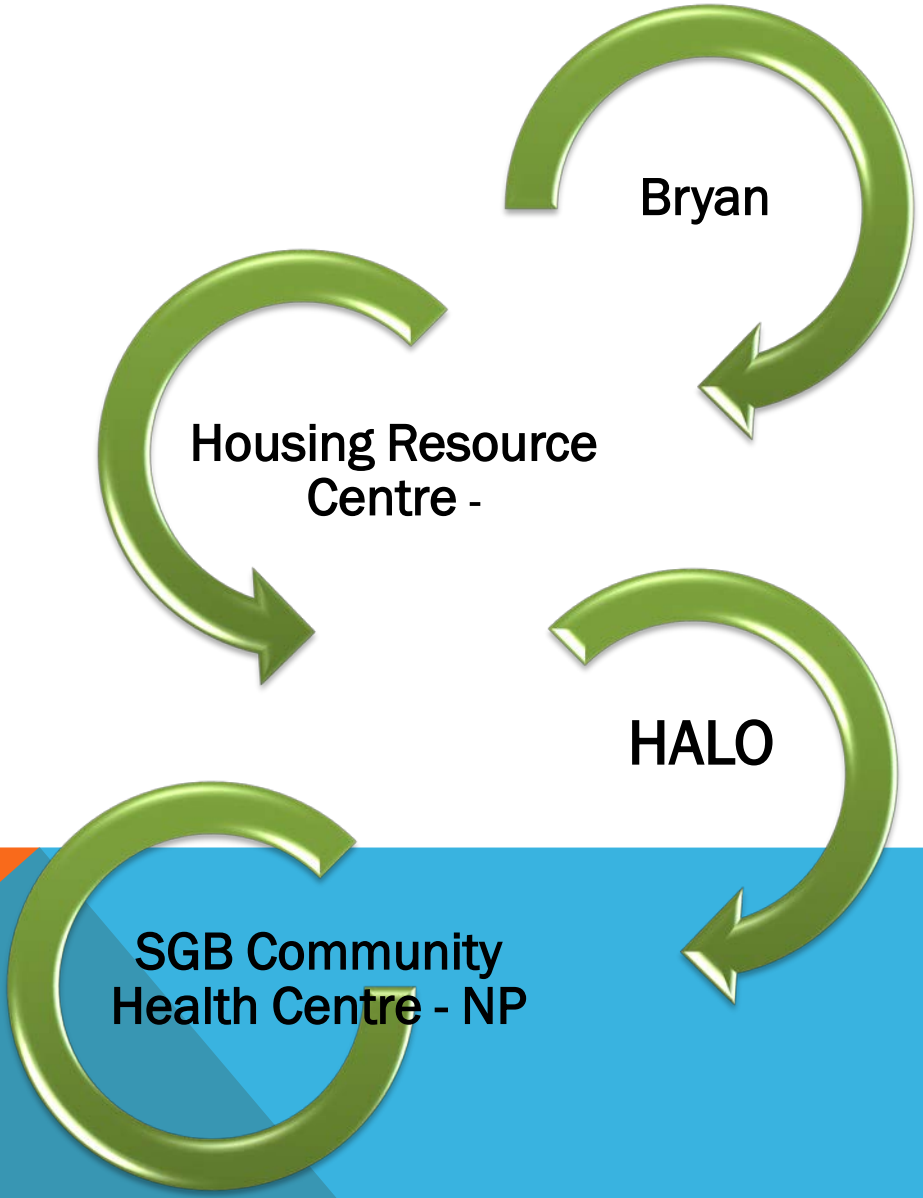


**Clark Kent** 4d
VISITED MICKEY TODAY - HES SMOKING AGAIN



**Clark Kent** Apr 15
Tobacco risk: never smoked

# BRYAN'S INITIAL CARE TEAM



# NAVIGATOR ROLE

- ONE OF THE FIRST TASKS - TO EXPLORE NAVIGATOR ROLE
- IS THE PATIENT LOOKING FOR THIS ROLE?
- WHO SHOULD BE THE NAVIGATOR?
- DEVELOPING THE NAVIGATOR
- TRAINING THE NAVIGATORS

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# CHANGE TEAM – INITIATION & CHALLENGES

| Initiation | Challenges |
| --- | --- |
| • Designed to Lead Change<br>• Weekly Meetings<br>• Included reps from each Organization<br>• Good initial start – identified system challenges/gaps<br>• Initiated Projects and working groups | • Some Participants did not fully engage<br>• Lack of Leadership skills<br>• Competing Workload |

Change Team Outcome
Leads now meet quarterly for updates
and to confirm Quarterly Objectives

# SAME DAY HEALTH CARE CLINIC

- Reducing Health Care costs
- Recognizing need to improve patient access to care
- Avoiding costly inappropriate Emergency Department visits
- Using existing Health Care locations
- Using Nurse Practitioner
- ED visit incentives

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# IV ANTIBIOTIC PILOT IN BAY HAVEN

## Changes in Nursing Home Care

- Ground breaking Health Link change idea stemmed from CCAC, Lead physician and LTC
- Utilizing staff to their potential – RN and RPNs
- Using technology to the patient's advantage – quicker response time and access to physician orders
- 7 patients treated / Saving 34 Hospital Days
- Rolling program out to 2 other Nursing Homes in our area

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# THINK TANK

- Weekly call with Health and Community Providers
- Share a patient story – to brainstorm
- Physician on the line to participate
- Breaking down silos – allows learning among callers
- Gives patient access to broader info and programs
- Having the right person on the call – to make decisions

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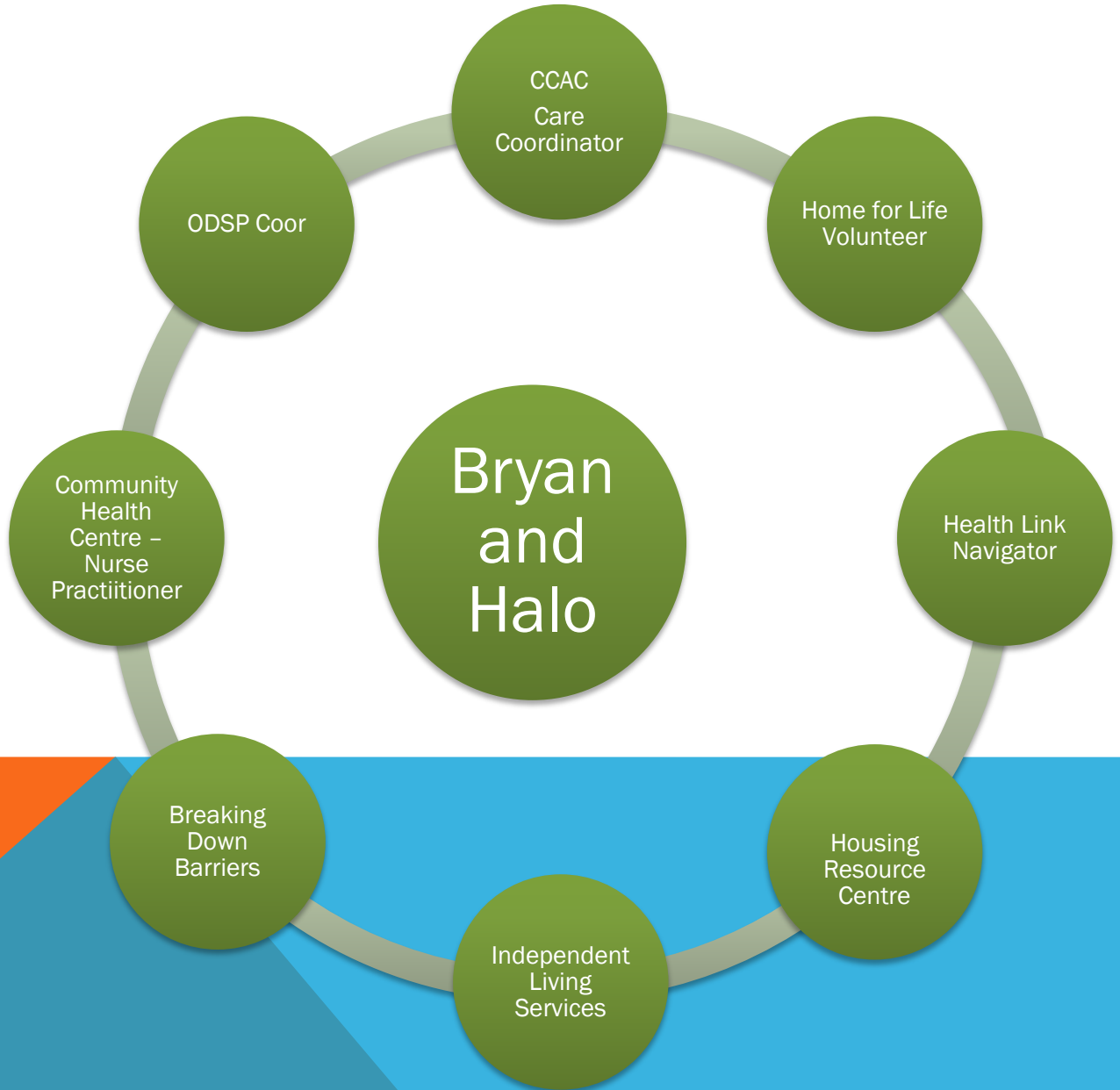
# HOW MY LIFE HAS CHANGED – CURRENT CARE TEAM




SSD
ARCTERYX