

BRIGHT LIGHTS AWARDS

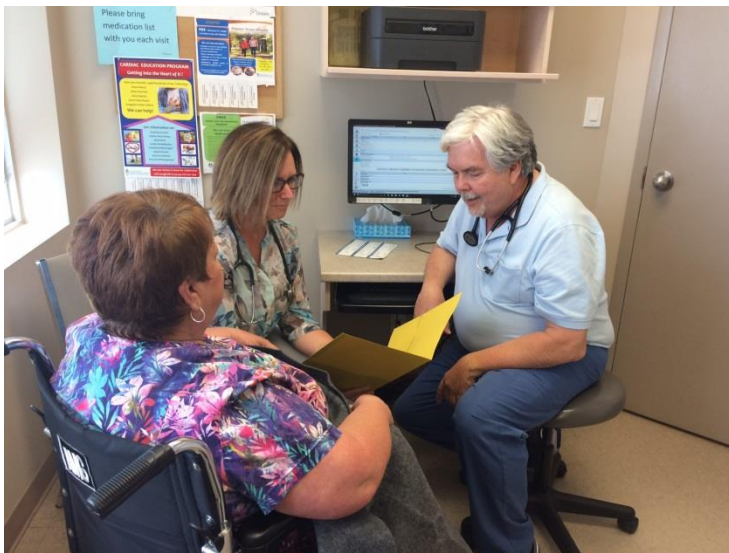


2017

Using Data to Demonstrate Value and Improve Quality of Care

Thamesview, Tilbury District
and Chatham-Kent Family Health Teams

Primary Care Impact on an Integrated Case Management Model for the Frequent User



Thamesview, Tilbury District and Chatham-Kent Family Health Teams, working together with the local Health Link, adopted an integrated case management model that improved the healthcare experience for frequent users of the healthcare system, simultaneously reducing ER visits and hospital admissions. Intervention by a case manager early on helped mobilize services and anticipate outcomes.

The FHTs employed an intensive case management approach that focused on the needs of individual patients with complex needs. They were required to know the needs of this patient population and to connect individuals rapidly with community care. The case managers followed a cohort of these complex patients and collaborated with patients/families and

healthcare teams, using integrated case management to develop a care plan that supported each patient within the community. As soon as the frequent user of the system arrived in the emergency department or was admitted to hospital, the case manager initiated services to support his or her needs post-hospitalization.

In interviews, frequent users indicated they've been pleased with the way their needs have been met, and providers indicated satisfaction. Data also shows the new approach had a positive impact on health system capacity, productivity and integration. World Health Innovation Network research shows that there's generally a 28.8 per cent reduction in visits to the emergency room six months after implementation and a 25.9 per cent decrease in hospital admissions in the same timeframe, compared with the six months prior.

Patients saw providers in their own surroundings, where they felt comfortable. Providers could see the whole patient, resulting in better care with a focus on each patient's quality of life. Patients also relied less on the emergency room and learned better self-management. Based on the resulting clinical utilization data, clinicians are working together to create interdisciplinary care plans or action for this population.

Currently, the teams are working with Erie St. Clair LHIN to explore ways to sustain the program and access the additional resources that would be needed to implement a program of this type within their primary care teams.

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Key Facts:

- Stimulated significant changes in practice
- WHIN research data indicate 25.9% decrease in hospital admissions six months after implementation is usual (compared to six months before implementation)
- They also indicate 28.8% decrease in ER visits six months after implementation is usual (compared to six months before implementation)