



*South East Toronto*

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**Family Health Team**

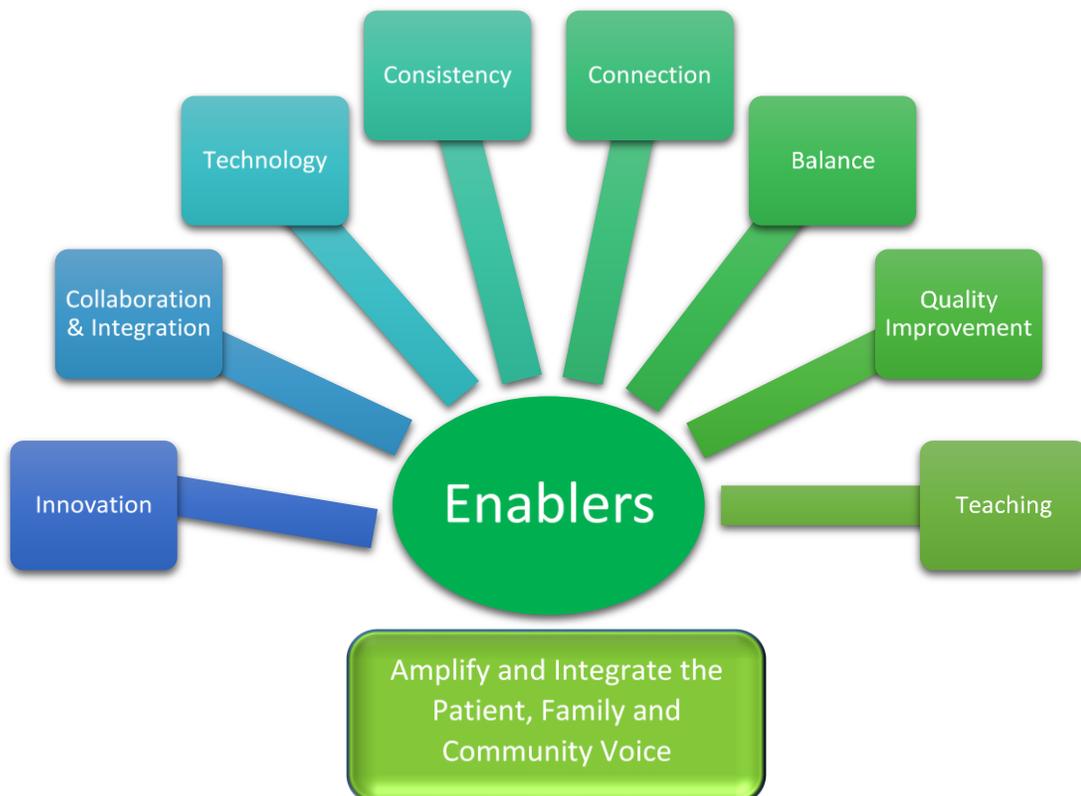
## **Strategic Plan 2015 to 2019**

*A leading academic family health team that improves  
the health of our community*



## Our VISION

We promote a vibrant, healthy community through an exceptional patient experience, mobilized outreach, inspired teaching, community-based research and diverse partnerships. We are the leader in innovative primary care and we are the teaching unit of choice for a rich holistic, connected family medicine experience.



## Introduction

In the spring of 2014, the South East Toronto Family Health Team (SETFHT) embarked on a robust strategic planning effort. Physicians, Interprofessional Health Care Providers (IHPs), staff as well as key external stakeholders from the community and the health system were engaged in a series of staff and patient focus groups and interviews to inform the planning effort. The process culminated in a one day planning event on September 24<sup>th</sup> 2014 where the entire Family Health Team came together to set vision, strategic directions and goals for the next five years.

The planning effort of the FHT was done in parallel with planning for the Family Medicine Teaching Unit at Toronto East General Hospital and key outputs have been merged to enable ease of execution of the plan.

The SETFHT Board of Directors would like to thank everyone that participated in the development of this plan for their support and input. As a *'leading academic Family Health Team that improves the health of the community'* we continually focus on how we can be at our best at being not just patient-centred but patient-inclusive and providing a better health care experience to our patients, community and learners.



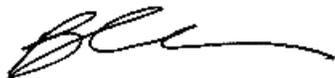
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Dr. Kevin Workentin, Chair



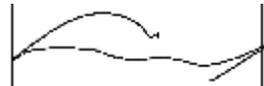
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Dr. Thuy-Nga Pham, Lead Physician



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Dr. Blaise Clarkson, Treasurer



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Dr. Emmanuelle Britton, Director



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Dr. Michelle Lockyer, Director



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Kavita Mehta, Executive Director

## ***Our Vision***

We promote a vibrant, healthy community through an exceptional patient experience, mobilized outreach, inspired teaching, community-based research and diverse partnerships. We are a leader in innovative primary care and we are the teaching unit of choice for a rich holistic, connected family medicine experience.

## ***Our Strategic Priorities 2015 - 2019***

1. Create an exceptional patient experience
2. Advance innovative outreach to improve community health
3. Incorporate best practices and innovation in care and teaching
4. Enable community based research
5. Become the best FHT to work for in Toronto

## ***Key Enablers of Our Work***

- Innovation
- Collaboration & Integration
- Technology
- Consistency
- Connection
- Balance
- Quality improvement
- Teaching

And, amplify and integrate the patient, family and community voice into everything we do.

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A major enabler of our work was the amazing facilitation of our consultants on this strategic plan – a special thank you to Danny Nashman and Cate Creede with The Potential Group on assisting our group with a fantastic experience that has enabled us to put together this strategic plan.

*SETFHT and the FMTU Strategic Plans facilitated by:*

Danny Nashman and Cate Creede

The Potential Group

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**THE ? POTENTIAL GROUP**

## Our Approach

To ensure we had a comprehensive approach to the strategic plan refresh and to make sure we had synergy with the planning that was also done by the Family Medicine Teaching Unit (FMTU), SETFHT undertook a very comprehensive approach to strategic planning.



## What We Heard From Our Patients

With the help of our very engaged Patient Advisory Council (PAC) and a separate patient focus group, we were able to get some very good feedback from our patients on our FHT. We heard about what they valued most about our FHT and what their wishes and hopes were for the future. Below are the core themes that emerged from these consultations and some feedback that was provided.

### What Patients Value Most

- **Access to Care**
  - If you cannot see your own physician you can see another member of the team
  - Being open on the weekends (Saturday/Sunday) and evening clinics means you do not need to go to walk in clinics or the hospital for care
  - You can always get in the same day or the very next morning
  - Having all services centralized (dietitian, social work, care navigator) is very important to care
  - Wait times in the waiting room are minimal
  
- **The Team**
  - Access to other members of the team like the NP allows them to get to know the team members by name and build relationships

- Having a common electronic medical record that is accessible by everyone means you don't have to tell your whole history again and again
- **Links to the Hospital (Toronto East General Hospital)**
  - There is great communication between hospital and the family doctor – with reports sent from the hospital directly to the FHT so that the team is aware of the hospital visit (*SETFHT has implemented Hospital Report Manager which allows for seamless transmission of information from TEGH to our FHT's EMR directly*)
  - The close relationship with the hospital means that the staff in the FHT can call the hospital directly and the staff at the hospital will be waiting for you
- **Teaching FHT**
  - Enjoy this being a teaching FHT as sometimes the residents are more thorough and take time with you
- **Groups**
  - Groups provide another way to receive care and patients appreciate this; programs are often free of charge to the patients

### **Patient Wishes for the Future**

Fortunately our patients also expressed their wishes of what we could do better and each of these needs will be integrated in our planning going forward:

- Enhanced Access and Telephone Service
- More Promotion of the Whole Team
- Better Group Hours
- More Consistent Use of Internet/Email for care, service and follow-up
- More integration of holistic health solutions

### **What We Heard from Our Community and Partners**

As part of our planning effort, we wanted to look through a '*systems lens*' and speak to our partners and community to provide insight and thoughts about our FHT. All members of the strategic plan working group (which were made up of members of the Board, the FMTU executive and staff) were asked to interview a number of key stakeholders to get their thoughts about our FHT and what we may want to focus on in the future. Below are a few key themes of what they value most about our FHT and their wishes for the future.

### **What Our Community and Partners Value Most:**

- **Leadership and Innovation**
  - SETFHT is a model FHT and a model for how primary care can be delivered
  - "Go to" conduit for primary care reform in the province – the group at SETFHT is the local and national example of how to renew primary care
  - A group of people who regularly foresee problems and deal with them no questions asked

- Innovative thinkers who take risks
- Staff go above and beyond, even when the clinic is closed
- **Outreach**
  - SETFHT is making a profound difference for their patients and for key target groups in our community
  - Happy to see SETFHT go beyond the clinic and help with change in the community (*noted examples of outreach including Warden Woods, Crescentown, Thorncliffe Park*)
- **Collaboration**
  - Feel that the multidisciplinary aspect is very important as it allows for a robust team with no need for handoffs as people here understand the patient's eco-system
  - SETFHT is a lead FHT in Toronto and in the province; really strong collaborators that have built very solid partnerships and are system partners across the sector and with our primary care colleagues
- **Excellence in Teaching**
  - Site of choice from students whether it is medical residents, nurse practitioners, dietitians, pharmacy
  - There is a wait list of people who would like to train at SETFHT

#### **Community and Partner Wishes and Expectations for the Future**

- There are high expectations for us to expand and have more impact
  - More satellite locations
  - More students
  - More research projects
- Further relationships and collaboration with our partners
  - Integration of CCAC
  - Integration of more specialists
  - Integration of other health and social service providers
- Work collaboratively with our Ministry funders to help support innovative models of primary care in under serviced areas where we provide outreach

#### **What We Heard from Our Team**

Team engagement is very important to our FHT. As part of the planning effort, we ensured that the voices of our staff were integrated into the strategy effort. Staff gave their input and participated in one of 3 focus groups, our planning steering committee and a full day Strategic Planning Summit in September 2014. Below is a summary of core themes about what they valued most about the FHT, our work and their wishes for the future.

### **What Our Team Value Most About Our Impact**

- ***Access***
  - We try to defer patients from going to the hospital; we are open 7 days a week, including evening hours so there are a lot of options
  - Group offerings (like anxiety group, RISE up for depression/activation, craving change program for emotional eating) offers access to other ways of care for the patients
  
- ***Comprehensiveness***
  - Improve people's quality of life, greater depth of expertise as a practitioner because I have team around me
  - Here we treat a patient as a whole person (bio-psycho-social), not just physical diseases; with the different resources we can all work together to treat a patient holistically
  - 'One stop shop' makes the patient feel better that the physician really knows those people - a trusted, connected source with no added cost
  - Interprofessional team can respond quickly, holistically, comprehensively to patient needs, and support them in an ongoing way
  
- ***Relationships***
  - We know the patient's extended families (ask how's so and so) and this makes a big difference for patients as it is more personal
  - Accessible: we are here when patients/families need us
  
- ***Connectedness***
  - With the amount of follow up that is necessary the EMR makes it a lot easier for the team members to send messages instantaneously
  - TEGH reports come in almost instantaneously which allows for seamless transition of care for the patient – we were quick to be a test site for that
  - IT strength gives us shared information; relationship with hospital gives us access to resources, advice
  
- ***Teaching***
  - We are role models for medical students for how to do family medicine in patient-centred, community accountable, life-balanced way
  - Teaching to demonstrate the value, inspiration and impact of family medicine

### **Our Team's Wishes and Hopes for the Future:**

- Enhanced staff/physician communication
- Create staff experience that is on par with the patient experience
- Expand and enhance programs and offerings
- Positive Momentum

## **The FMTU Vision & Priorities**

Our Family Medicine Teaching Unit went through a strategic planning at the same time as SETFHT to ensure that our plans and priorities were aligned. To ensure efficiency of the process, we integrated the planning effort where at all possible. One key event for the FMTU was the physician teachers meeting in June 2014 where they adopted the following as the FMTU vision:

***We are the Teaching Unit of Choice for a Rich, Holistic, Connected Family Medicine Experience  
- We Foster a Love of Family and Community Medicine***

The five strategic priorities that came out of the June 2014 FMTU Planning Workshop were:

1. Amplify and Integrate the Patient/Family Voice
2. Enhance Our Community Outreach
3. Be at the Leading Edge of Family Medicine - Incorporate Best Practices and Innovation in Care and Teaching
4. Support and Enable Our Research
5. Generate Cohesion and Connection Across Sites and Work to Ensure that Everyone We Work With Feels Valued and Energized

## **SETFHT Strategic Priorities**

During the SETFHT September planning summit, the broader team identified the following core priorities for the FHT:

1. Improve patient/client experience through technology
2. Enhance innovative outreach to improve community health
3. Grow evidence-based practice and resources
4. Advance primary care across the system through advocacy, teaching and generating/sharing knowledge (research)
5. Create activated physical space to generate openness, connectedness, patient learning
6. Become the best FHT to work for in Toronto

Since the SETFHT and the FMTU are so similar, the two sets of priorities were combined and the five working groups have now been formed to work closer to our collective vision.

## Our Combined Vision

*We promote a vibrant, healthy community through an exceptional patient experience, mobilized outreach, inspired teaching, community-based research and diverse partnerships. We are the leader in innovative primary care and we are the teaching unit of choice for a rich holistic, connected family medicine experience.*

### **Expanded, this vision is made up of four key parts:**

- The patient experience at SETFHT is seamless, open and inclusive. Our patients have easy access to appointments, programs and tools that enhance their health and wellbeing.
- We are a hub for health and innovation in our community, offering multiple points of access for patients and families. Our local community is healthier and more vibrant as a result of our enhanced outreach and innovative community connections and partnerships.
- We are one of the best FHTs to work for in Toronto, with a culture committed to high performance, Interprofessional collaboration and balance. Our conversations among ourselves and with patients/clients are peppered with kindness, understanding, sympathy and a touch of humour.
- SETFHT is a lead advocate for patient health and ongoing quality improvement, locally and across the system. We are recognized as the most shining example of primary care renewal in Toronto, Ontario and across Canada.

## Our Combined Priorities

Once our vision was defined, our five priorities were expanded to include our goals for 2019:

	<b>Strategic Priority</b>	<b>Goal</b>
1	Create an Exceptional Patient Experience	By 2019, we will have a consistently exceptional patient and client experience, from the initial point of contact through all aspects of care.
2	Advance Innovative Outreach to Improve Community Health	By 2019, we will be reaching all of the most underserved populations of East Toronto through innovative models of care, satellite work and partnerships with other organizations that offer key services.
3	Incorporate Best Practices and Innovation in Care and Teaching	By 2019, we will integrate leading edge evidence into practice and will be continually creating new, accessible resources to enhance our teaching and improve the health of our patients and families.
4	Enable Community Based Research	By 2019, we will be working toward the creation of a Centre of Excellence/International Institute of Primary Care Integration and Dissemination.
5	Become the Best FHT to Work for in Toronto	We will create a culture of appreciation, kindness, equity, collaboration and recognition.

## **Our Thank You**

This plan would not have come to fruition if it was not for many people who provided a voice and their thoughts in its development:

### **1. Our Team**

### **2. Our Patients**

- A special thank you to members of our Patient Advisory Council (Sonia, Samantha, John, Ed and Sarah) and our focus group patients who provided invaluable information in the formation of this plan.

### **3. Our Partners**

- Dr. Onil Bhattacharyya, Department of Family and Community Medicine Assistant Professor & Clinician Scientist;
- Maggie Bruneau, Vice President Partnerships & Chief Nursing Executive, Providence Healthcare;
- Monica Da Silva, former placement coordinator for COUPN;
- Dr. Phil Ellison, Primary Care Lead, Toronto Central Local Health Integration Network;
- Phil Graham, Acting Director, Primary Care, Ministry of Health and Long-Term Care;
- Aislinn Hemmingway, Registered Nurse, Taddle Creek Family Health Team;
- Angie Heydon, Executive Director, Association of Family Health Teams of Ontario;
- Sherry Kennedy, Executive Director, Taddle Creek Family Health Team;
- Dr. Krista Lemke, Child Psychiatrist, Toronto East General Hospital;
- Trish O'Brien, Quality Improvement Program Manager, Department of Family and Community Medicine, University of Toronto;
- Colleen Phillips, Crisis Intervention Assistance, Warden Woods Community Centre;
- Ashnoor Rahim, Project Manager, Primary Care, Toronto Central Local Health Integration Network;
- Vania Sakelaris, Senior Director, Health System Integration Design & Development, Toronto Central Local Health Integration Network;
- Carmine Stumpo, Vice-President Programs, Toronto East General Hospital; and
- Dr. Lynn Wilson, Chair, Department of Family and Community Medicine, University of Toronto.

### **4. Our Former Learners**

- Dr. Diana Wu, former TEGH medical resident;
- Dr. Aaron Harris, former TEGH medical resident;
- Laura Wilson, former dietetic intern;
- Frances Chung, former pharmacy intern;
- Caitlin McCullough, NP, former NP student from Ryerson University; and
- Erin Forsayeth, NP, former NP student from Ryerson University.



*South East Toronto*

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## **Family Health Team**

***A leading academic family health team that improves  
the health of our community***

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