Grey Bruce
Ontario Health Team (OHT) Development

Presentation to the Municipality of Brockton
November 24th, 2020

Stephanie Dudgeon, Executive Director, Brockton and Area Family Health Team (FHT)
Michael Barrett, President & CEO, South Bruce Grey Health Centre (SBGHC)
What is an Ontario Health Team?

• Under OHTs, health care providers (including long-term care homes, primary care, hospitals, doctors, home & community care providers, and others) will work as one coordinated team in one geography.

• OHTs will support patient/resident/client care where and when they need it, and help them transition seamlessly from one health care provider to another.

• Focus is on improving care for the people we serve

• The geography of Bruce and Grey Counties has been identified as the area of the “Grey Bruce OHT”
In July 2020, the Ministry of Health informed Grey Bruce that our “Readiness Assessment” had been reviewed, and asked that we submit a “Full Application” by September 18th, 2020.

The decision was made to defer the submission of the Grey Bruce OHT Full Application to allow more engagement of key stakeholders.

Submission date is now December 11th, 2020.

Any participating organizations will require Board approval prior to this date.
OHT Engagement

Key Stakeholders being engaged before submission of Full Application

• Grey Bruce Integrated Health Coalition (GBIHC)
• Municipalities
• Physicians
• Patients/Clients/Residents and Caregivers
• Indigenous Communities
• Service Provider Organizations (SPOs)
• Leverage previous engagement (eg. Rural Health and Wellness Report)

• Engagement will evolve as the OHT matures

• Future stakeholders could include:
  • Police, Fire, EMS
  • School Boards
  • Child & Family Services
  • Mennonite Communities
  • Others
OHT Engagement Undertaken

- Patient/Client/Resident/Caregiver Survey – 870 responses received to date
- County Councils
  - Bruce County – Nov 5th
  - Grey County – Nov 12th
- Lower-Tier Municipalities – Nov & Dec 2020
- Physician Engagement sessions – Nov 2nd & Dec 7th
- Service Provider Organizations (home care providers) on October 30th
- Health Service Provider Boards engaged by their respective Executive Directors/CEOs – Nov 2020
The inaugural year will focus on providing care to two population groups:

• Improving care transitions of Frail Seniors
• Supporting patients living with Mental Health and Addictions issues
• The Grey Bruce OHT Planning Committee was created as a working group of the Grey Bruce Integrated Health Coalition (GBIHC) – a group which has existed in Grey Bruce for over 25 years.

• Purpose of Planning Committee:
  • Oversight
  • Provide Direction on the creation of the Grey Bruce OHT

• Membership will evolve to include Patient/Resident/Client/Caregiver and Community Leader representatives as the OHT matures
Guidance for Ontario Health Teams:

Collaborative Decision-Making Arrangements for a Connected Health Care System

Review document here:
Collaborative Decision-Making Arrangements for a Connected Health Care System

July 2020
Decision-Making Framework (cont’d)

Introduction  Maturity

Administrators  Community Leaders
Grey Bruce OHT – what do we want to improve?

- Reduce time required to receive a homecare visit
- Reduce the number of patients with mental health and addictions showing up at our emergency departments
- Reduce readmissions to hospitals
- Improve access to primary care (can you see your primary care provider same day or next day?)
- Increase the percentage of hospital patients who see their primary care provider within 7 days of hospital discharge
- Reduce Alternate Level of Care (ALC) rates – to ensure people are cared for in the appropriate setting
Questions for Engagement

1. What does a successful OHT look like to you?
2. How can we improve the caregiver and provider journey?
3. How can we learn and improve from one another?
4. What would you identify as potential barriers to the successful implementation of an OHT?
5. What do you think are the biggest challenges patients/residents/clients and caregivers will face in engaging with OHTs? How do we overcome these challenges?
6. What support is needed for the OHT to learn and improve rapidly to provide care according to the best available evidence and clinical standards?
7. How can we ensure health equity is addressed in Grey Bruce?
8. What digital solutions would you recommend for improving the health system in Grey Bruce?
Full application is just the start

- Organizations will be expected to continue to engage and participate moving into the future
- Focus needs to be on patients, clients, residents, and caregivers

Each organization should ask itself “How is our organization working with partners to enhance care for the people we serve?”

Engagement feedback will be incorporated into the full application

- Partner organizations will be asked to sign-off as partners on the full application
Questions

Stephanie Dudgeon, Executive Director, Brockton and Area Family Health Team (FHT)
Michael Barrett, President & CEO, South Bruce Grey Health Centre (SBGHC)
Appendix A - Grey Bruce OHT Planning Committee

The Committee membership currently consists of:

- Executive Directors/CEOs of the Family Health Teams in Grey Bruce;
- Executive Director of the Community Health Centre in Grey Bruce;
- CEOs of the three hospitals in Grey-Bruce;
- CEO of CMHA Grey Bruce;
- Executive Director of Keystone Child, Youth and Family Services
- Executive Director of Home and Community Support Services Grey-Bruce
- Vice President, Home and Community Care, South West LHIN
- Three (3) Physician representatives (Kincardine, Owen Sound & Hanover)
- County of Grey Director of Long-Term Care
- CEO of the South West Ontario Aboriginal Access Centre (SOAHAC)
- EMS Directors from Bruce and Grey Counties
Appendix B - What is an Ontario Health Team?

At mature state, each Ontario Health Team will:

1. Provide a full and coordinated continuum of care for a defined population within a geographic region;
2. Offer patients 24/7 access to coordination of care and system navigation services and work to ensure patients experience seamless transitions throughout their care journey;
3. Improve performance across a range of outcomes linked to the ‘Quadruple Aim’:
   a. better health outcomes;
   b. better patient, family and caregiver experience;
   c. better value for money; and
   d. better provider experience;
4. Be measured and reported against a standardized performance framework aligned to the Quadruple Aim;
5. Operate within a single, clear accountability framework;
6. Be funded through an integrated funding envelope;
7. Reinvest into front line care; and
8. Take a digital first approach, in alignment with provincial digital health policies and standards, including the provision of digital choices for patients to access care and health information and the use of digital tools to communicate and share information among providers.