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IDEAS: Improving & Driving Excellence Across Sectors

IDEAS Program Wrap Up

Photo includes: Ross Baker, Co-Principal Investigator, IHPME, University of Toronto (IDEAS is funded by the MOHLTC and is a partnership among seven Ontario universities, Health Quality Ontario (HQO), ICES and the Institute of Health Policy, Management and Evaluation at the University of Toronto.)

The IDEAS (Improving & Driving Excellence Across Sectors) Advanced Learning Program Team of Dr Robert Annis, Cheryl Pfaff, Jennifer Croft and Barbara Major-McEwan have completed their work on the Coordinated Care Plan for the Huron Perth Health Link.

The aim of our project was "85% of identified complex patients with a care plan will be 'confident' or 'very confident' that they can reach their identified goals". This aim reflects our premise that collaboration between health care providers in the form of a Care Conference will ensure patients have a comprehensive care plan and receive coordinated care to address their personal health goals and needs.

What did we do?

Our team applied key concepts and tools in quality improvement, leadership and change management along with our project knowledge with the help of our HQO advisor Joe Mauti within the Huron Perth Health Link Working Group Framework. This included several Plan Do Study Act (PDSA) cycles in order to test a change idea around coordinating a Care Conference.

Was the intervention(s) an improvement?

A Positive experience was measured by asking our patients if they felt that they would reach their identified goals. Although our project numbers are small, the initial two reported confidence levels of 3-4 in a five point scale.

Patient interviews were conducted as well as stakeholder interviews to determine what worked and what did not. This feedback was incorporated back into the coordinated Care Conference process. The team also looked at use of ED and Inpatient days 6 month prior to a Care Conference and 6 months after. Again with a very small number of Care Conferences completed our data showed a decrease in both ED usage and Inpatient days.

What are the key results from the IDEAS Team?

The Communication Tool and Care Conference Checklist are available to assist with communications and activities pre, during and post coordinated care conference.

What did the IDEAS Team LEARN?

- * Different health care system cultures create integration challenges.
- * A person or organization must assume the role of administrative and logistical support.
- * Tools and checklists are necessary to guide both communications and activities pre, during and post Care Conference.
- * The "Care Navigator" needs to be identified early to establish a trusting relationship with the patient.
- * Each member of the care team must know their role.
- * A care team consists of multiple providers with core players being the family physician, Community Care Access Centre (CCAC) and Community Support Services (CSS).





Huron Perth Health Link — Guiding Principles

The overall purpose of the Huron Perth Health Link (HPHL) is to support the development and the delivery of coordinated, person-centered care in a way that improves the experience of care and improves the efficiency and effectiveness of care delivery. The steering committee which includes representation from all Health Link sectors in Huron Perth provides oversight for the activities and is the decision-making body for the Health Link. The Steering Committee members also provide communication about the HPHL to all of the organizations within their sector. The Huron Perth Health Link Terms of Reference includes a set of Guiding Principles which refer to the criteria that will be used as new programs, processes and structures are introduced into Huron Perth.

Person Centered: All Huron Perth Health Link (HPHL) activities should be planned and implemented with the person/patient experience and outcomes as the focus.

Collaborative: All HPHL partners will commit to robust stakeholder engagement with shared accountability for actions and outcomes.

Sustainable: HPHL activities and work must include strategies for future and ongoing sustainability past the funding time frame.

Realistic: Our approach must be realistic about partners' capacity so that engagement expectations are set with stakeholders.

Integrated: Establish clearly defined stakeholder engagement to ensure that integrated activities enhance value to all stakeholders.

Evidence-Based: HPHL activities are based on using

the best quantitative and qualitative evidence available within the Quality Improvement framework.

Blame Free: Engagement of stakeholders is to advance understanding of current situation and to co-create solutions, not to blame.

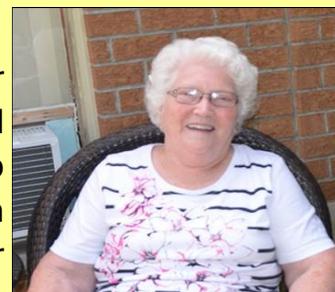
Evaluated: Ongoing and formal evaluation of approach and activities with support refinement of ongoing strategies for optimal effectiveness.

The Voice—

Testimonials of patients, physicians and care partners

Meet Florence

Florence moved from her home when she found that she was unable to support herself, even with help from her family. Having fallen



several times in her house, Florence moved to a 1-floor apartment at Huronview Home in Clinton. After a 3-week bout of pneumonia followed by laryngitis, Florence's physician connected her with the Huron Perth Health Link. Florence and her daughter in-law met with local health care providers and community support services to coordinate supports that would enable Florence to maintain a high quality of life and health. As a result of her coordinated care planning, Florence has been connected to an Occupational Therapist and has gained supports to remain independent in her new home. Florence has made friends at Huronview Home and once again feels that she is a healthy and empowered member of her community.

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