

A-3 Theme: A Mature State Guelph and Area Ontario Health Team (G&A OHT) in 5 yrs -Elements of the best healthcare system	Date: June 2019 Feb 2020	Revision #: 15
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Team Members: G&A OHT Steering Committee

Reason for Improvement: (Are these reasons captured through the document)?

- Together we will align with the Provincial direction of a health system that is seamless, integrated and more efficient for our population
- Together, we want to shape Guelph’s future system of healthcare, leveraging the best of every healthcare organization and clients voice to lead and influence provincially as a system of excellence
- To enable a system of care that enhances the health and well-being of our community and achieves the mandate of the G&A OHT

Current Performance, Reflections on Current Performance:

1. We do not have a shared vision or strategic plan
2. The governance, leadership and operational structures across the G&A OHT organizations are not integrated; program and service decisions are made organizationally without looking at community health system priorities
3. Patients, families and caregivers do not consistently partner in co-designing services
4. The healthcare system is confusing to navigate for both clients and providers; clients do not always get the services they need, when and where they need it
5. Healthcare and staffing crises, complexities and demands are increasing without the resources or capacity to handle it
6. Information doesn’t flow easily, technology isn’t connected making communication a challenge
7. We don’t have robust processes for understanding the health of the population and to determine system priorities
8. We have separate/distinct staffing groups that have their own identity and culture, with varying degrees of staff/provider engagement across our silos.

Target Performance: Where do we want to be in 5 years?

1. We have a shared vision and strategic plan with common system goals that are realistic, measureable and actionable
2. We have an integrated program service delivery with governance, leadership and operational structures that support ongoing systemic change, decisions are made with community health needs at the forefront
3. Patients, families and caregivers are part of our team who are actively involved in co-designing services and informing the system at all levels to ensure health equity
4. The healthcare system functions as one service team within a connected community where services are easy to access and navigate when and where needed
5. The staff, system and services provided are agile enough to manage competing needs (both inside and outside health system) and priorities
6. Technology is connected and enables easy, timely communication for staff to do their job well and for patients to access their information
7. We have strong processes to understand the current and future health trends of the population, and use the information at all levels to determine priorities and resource allocation
8. We have a highly engaged G&A OHT staff team with a shared sense of culture and identify, who are committed to our shared OHT vision.

Dimension	Measure	Current	Target
Quality and Patient Safety			
Our Team			
System of Care			
Financial Health			
Access	Wait times		

PLAN

Reflections

- We are a community of leaders embracing change
- We have a strong foundation to build on
- Integrated teams already on the ground
- History of working together with positive results and improved outcomes
- Strong relationships
- Size and structure in Guelph supports change
- Maintaining care while transforming won't be easy
- Ensure volunteerism is organized into our OHT system
- Consider how to create seamless transitions for clients who live outside the G&A OHT community
- We jump to solutions w/o understanding the problem

Countermeasures and Action Plans:

Gap-Problems evident?	Root Cause-why do they occur?	Action to solve the problem?	Expected Result
1.) We have 15+ orgs with individual strategic plans/vision statements	We are structured and funded to have individual strategic plans	Develop a joint strategic plan across all G&A OHT organizations	G&A OHT organizations will each develop operational plans that align with the joint strategic plan
2a.) Competition for resources and duplication of services across the system	Prescribed funding envelopes and individual accountability agreements drive competition for resources and limits our ability to be creative and responsive	Develop and map out a shared G&A OHT accountability framework (MOUS), including funding and resources Generate opportunities to influence and advocate for policy and legislation changes around funding and accountability agreements (eg. build relationships with OH representatives)	
	We don't understand how private funding impacts a newly designed OHT system	Develop an inventory of known services available through private funding	
2b.) Duplicate governance, leadership and operational structures (eg.IT/Finance/HR) across the system reinforces individual org identities resulting in inefficiencies	Policy, legislation and culture reinforce organizational identity and prevents trust and sharing of resources across orgs	Develop infrastructure to streamline and optimize structures, functions and standard processes across the org's (e.g. governance, leadership, HR/ IT/ Finance, G&A OHT huddles)	
3.) Our solutions do not provide a balanced representation of the broader community population health needs	There are limited approaches available to capture the patients, families and caregivers voice across the spectrum of healthcare	Develop creative and multi pronged approaches that will capture diverse experiences across the spectrum of healthcare	Solutions represent a more balanced approach to care delivery across the spectrum of healthcare
	Patients, families and caregivers don't understand why and how their contributions will be used for improvements	Develop a G&A OHT patient and community partnership program that recruits, trains and supports pt., caregivers, volunteers and advisors	

DO

	We don't feel comfortable or have the skills to involve patients, families and caregivers in a meaningful way	Develop skills for leaders and others to feel confident actively involving pts., families, and caregivers across the system at all levels	
4.) We do not have an integrated care delivery system	System structures, e.g., funding, accountability agreements, legislation etc., reinforce lack of ownership and accountability for all parts of the system	Develop and implement Integrated Primary Care Team model	A system that is easily navigated by pts, families and caregivers
5.) Each organization is only responsible for their 'part' in the system e.g. resources, money,	Lack of resources, time and money limits our ability to coordinate and respond across sectors	Identify opportunities to leverage staff expertise and services across sectors	Strategic allocation of people resources and optimization of skill sets
	There's a separation between health and community services alongside individual mandates	Develop a shared understanding of the problems including the social determinants of health in the design of integrated and preventative care within the Integrated Patient Care Team	
6.) No interoperability between multiple clinical information systems	Lack of clear commitment to finding an integrated digital health system	Explore and determine agreed upon priorities for integrated digital health solutions for G&A OHT	G&A OHT consensus about what, when and how info needs to be share and with whom
7a.) We do not have enough comprehensive population health data for priority populations, or the resources to coordinate responses once identified	Privacy legislation creates barriers with a system that does not support population health	Develop recommendations to address privacy legislation barriers that will enable G&A OHT outcomes	KPI's will be tied to population health data
	We have data but lack of Decision Support resources to synthesize data	Invest in G&A OHT Decision Support resources to create a population health management approach and collect meaningful population health data to inform priorities and decisions	
7b.) Lack of focus upstream as well as the capacity to meet today's needs			
8.) We lack a robust change management framework to achieve success	With the exception of a handful of examples, we have limited systems experience of designing and implementing integrated teams that achieve desired outcomes.	Develop a shared "people-based" vision among OHT partners, that values staff/provider engagement and culture (embedded in a shared understanding of the evidence-based drivers)	We have a highly engaged G&A OHT staff team, with a shared sense of culture and identity
	We are missing a common understanding of iterative system design, implementation, failure and reiteration that will be necessary to support this evolutionary transformative system change.	Develop and implement a best practices-informed strategy to achieve an aligned team culture and staff engagement across the OHT Develop and implement a robust change management framework that will enable an adaptive/iterative approach to system, structural and process changes	

			committed to its achievement
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Follow Up Plans:

What	Who:	By When:	Status:
Develop a joint OHT strategic plan across all G&A OHT			
Develop and map out a shared strategic governance G&A OHT accountability framework			
Generate opportunities to influence and advocate for policy and legislation changes around funding and accountability agreements			
Develop an inventory of known services available through private funding			
Develop infrastructure to streamline and optimize structures, functions and standard processes across the org's			
Develop creative and multi pronged approaches that will capture diverse experiences across the spectrum of healthcare			
Develop a G&A OHT patient and community partnership program that recruits, trains and supports pt., caregivers, volunteers and advisors			
Develop skills for leaders and others to feel confident actively involving pts., families, and caregivers across the system at all levels			
Develop and implement Integrated Primary Care Team model			
Develop a shared understanding of the problems including the social determinants of health in the design of integrated and preventative care within the Integrated Patient Care Team (IPCT			
Identify opportunities to leverage staff expertise and services across sectors			
Explore and determine agreed upon priorities for integrated digital health solutions for G&A OHT			
Develop recommendations to address privacy legislation barriers that will enable G&A OHT outcomes			
Invest in G&A OHT Decision Support resources			
Develop a shared "people-based" vision among OHT partners, that values staff/provider engagement and culture			
Develop and implement a best practices-informed strategy to achieve an aligned team culture and staff engagement across the OHT			
Develop and implement a robust change management framework that will enable an adaptive/iterative approach to system, structural and process changes			

Measurement Tracking:

Dimension	Measure	Current	Target	Month	Month	Month					
Quality and Patient Safety			From targets	actual							
Our Team											
System of Care											
Financial Health											
Access											

STUDY

Verified Hard Savings: <insert actual budget changes>

Verified Soft Savings: <insert actual results>

Reflections:

ACT

DRAFT