

Patients First:

A PROPOSAL TO STRENGTHEN PATIENT- CENTRED HEALTH CARE IN ONTARIO

Presentation to Board of Health
January 11, 2016

Outline

- What is the Patients First Discussion Paper?
- What does this mean for:
 - Hamilton as a community?
 - Council as the Board of Health?
 - Public Health?
- Opportunities & Challenges of Patients First Proposals
- Process to develop feedback
- Next steps

PATIENTS FIRST Context

- Regionalization and integration of health care unfolded across Canada over past 30 yrs
- Response to:
 - Fiscal pressures
 - Rediscovery of SDOH, prevention, promotion
 - Desire to improve local decision-making and increase accountability
 - Improve efficiency and consistency by decreasing number of organizations and breaking down silos

What is Regionalization about?

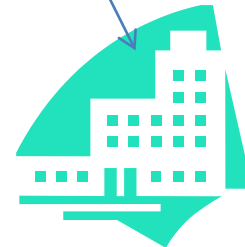
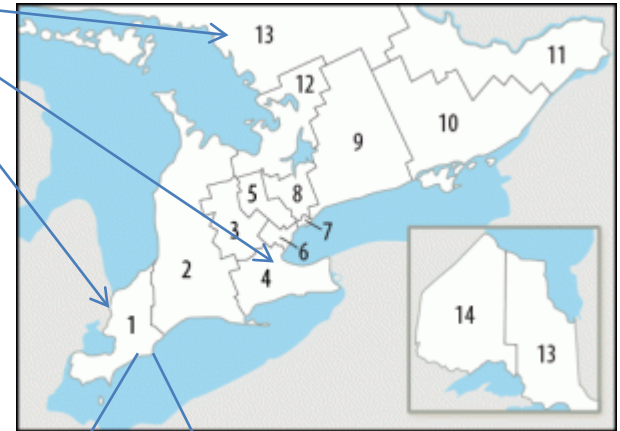


Authority

- Devolved vs consolidated

Service delivery

- Centralized vs decentralized



PATIENTS FIRST Context

- Ontario's approach slower, evolutionary compared to other provinces
- Minister proposing next step in major health system restructuring
- Opportunity for BOH and PHS to provide thoughtful feedback to influence proposal
 - how gain most benefit for the community, and avoid unintended negative consequences

PATIENTS FIRST Overview

- Patients First is about health/ health care system transformation
 - Improve access
 - Care coordinated, integrated closer to home
 - Better information, support patient decision making
 - Protect universal public health care – value, quality, sustainability
- The proposal outlines an **expanded role for LHINS**- including in primary care, home and community care, **and Public Health**

PATIENTS FIRST Overview

Issue

Proposal

More effective integration and greater equity, responsiveness	Have LHINs plan, manage, improve performance of all health services in a region
Improve access to Primary Care and coordination between Primary Care and other services	Have LHINs and Primary Care plan and performance manage Primary Care
More consistent and accessible Home and Community care	Have LHINs directly manage and deliver CCAC services
Improve linkages between Public Health and other services	Integrate local population and public health planning with other health services, formalize links between LHINs and PHUs

What does this mean?

- Regional planning and performance management across health system
- Driving integration across the system
- Creation of LHIN sub-regions
- LHIN and PH linked to plan population and public health
- Moving all CCAC functions to the LHIN, disband CCAC boards
- Potential for specific elements to move across providers
 - eg home care coordinators may be deployed to FHTs, CHCs, hospitals
- Needs of specific populations who experience inequitable access to health care services to be identified and met
- Improved public reporting

Implications for Public Health Units

- Creation of formal relationship between MOHs and LHIN leadership
 - Potential for dual reporting relationship?
- Transfer dedicated provincial funding for PHUs to the LHINS
 - LHINs ensure used for PH purposes
- LHINs establish accountability agreements with PHUs
- Local Boards of Health continue to set budgets
- BOH, land ambulance continue to be managed at municipal level
- Province also reviewing OPHS & OPHOS
- Expert Panel to be appointed to advise on opportunities to deepen LHIN/PHU partnerships and improve PH capacity and delivery

Opportunities

- **System integration** and coordination
- Regionalization to be **more responsive to local needs**
- **Improving access and health outcomes**
- Enhanced **focus on population health**
- Potential **address SDOH more broadly** through action and advocacy

Health System Integration - PHS Action

- Departmental priority
- Co-location with McMaster Family Medicine
 - Development of relationships at all levels and joint agenda with McMaster Family Medicine
- Participation in Health Links
 - Participation in MH&A and Frail Elderly
- 2014/15 - Surveyed partners and identified priority areas for joint action

Challenges - General

- Big transition across many elements of the system
- Lack overarching framework of what is expected to be provided and who is responsible eg BC
- What is the best structure, tools for LHIN Governance?
- Difficult to prioritize across a diverse range of issues
- Will this make a difference?
 - Costs?
 - Access?
 - Quality?
 - Health?

Challenges – Public Health

- Urgent/acute needs tends to push out population health needs
- How maintain focus on health (SDOH) not just health care
- How to maintain PH independence & advocacy
- How to maintain local innovation
- Where does the relationship lie with the LHIN
- Future role of BOH
- Changes in public health programming
- Changes to how funding allocated and to whom
- PH Partners >> health care system

Provincial next steps

- Invited feedback
- Legislative change (spring)
- OPHS & OPHOS Review (Dec 2016)
- LHIN-PHU Expert Panel
 - Deepen partnership
 - Improve public health capacity and delivery

Next Steps

- Engage with other interested City depts
- MOH/staff to engage with LHINs, province, and other partners
- Encourage all staff to submit feedback
- Develop and submit MOH and BOH responses
- Actively participate in as many ways and as often as possible

Proposed Process to develop feedback

- All staff encouraged to submit individual feedback
- MOH and BOH submit 2 responses
- Process to develop BOH feedback
 - Survey BOH – based around 28 MOHLTC questions
 - Identify top two or three system and top two or three public health issues for deeper discussion
 - Hold three BOH workshops to educate on issues and identify feedback
 - Staff collate feedback for Feb 18 BOH
 - BOH debate and decide on final response for submission

Recommendations

- That the presentation be received
- That the Medical Officer of Health seek clarification on the proposed formalization of relations between the MOH and LHIN
- That the Mayor and Council AMO Representative work with AMO to present any municipal concerns around the proposed change in governance and funding
- That the Mayor meet with the Chair of the LHIN board to discuss the proposed changes
- That members of the Board of Health (BOH) participate in a survey and workshops to educate themselves further on the Province's Proposals and related issues, and identify areas for feedback
- That based on the survey and workshops, the Medical Officer of Health develop a draft submission from the BOH to the Province for consideration at the Feb 18th BOH meeting

Questions?

**Health
Care
System**

The diagram consists of a large light orange oval labeled 'Determinants of Health' at the bottom. Inside this oval are two overlapping ovals. The left oval is light purple and labeled 'Health Care System'. The right oval is light blue and labeled 'Public Health'. The intersection of these two ovals is shaded a darker blue. The 'Health Care System' oval contains a list of four items. The 'Public Health' oval contains a list of four items. The intersection area contains a list of four items.

Public Health

Health System Planning
Surveillance
Immunization
Smoking cessation

Population Health
Health Equity
Health Promotion
Smoking By-laws

Restaurant
inspections
Safe water
Planning review

Determinants of Health