

Ministry of Health

Ontario Health Team Virtual Engagement Series

February 11th, 2021

Land Acknowledgement

We gather today virtually from many parts of what is now called Ontario.

I acknowledge I am joining this meeting from the area covered by Treaty 13, also known as the Toronto Purchase.

Traditionally, Toronto was a gathering place for many nations including the Anishnaabeg, the Haudenosaunee and the Wendat peoples.

We are grateful for the opportunity to live, meet and work on this territory and pay respects to the Mississaugas of the Credit.



Webinar Participant Instructions

Ministry of Health

Ontario Health Team Virtual Engagement Series

February 11th, 2021

Recording...

Participants Q&A Chat

Webinar Controls

Desktop Device

- click meeting controls at the top/bottom of your screen

Mobile Device

- Tap your screen for controls to appear

1 Chat Box

From Me to **All panelists and attendees:**

Great representation from all regions here today!

I would be very interested to hear how other OHTs have managed during Covid-19; any lessons learned from others would be valuable

From Me to **All panelists:**

I am having trouble hearing the current presenter.

Is there a number I can use to dial in?

3 Q & A

Please input your question

Send Anonymously

Send

2 Polling

Polling 1: ▼ Edit

1. In Which Region are you located?

Central

East

North

Toronto

West

Sharing Poll Results

1. In Which Region are you located?

Central 20%

East 20%

North 20%

Toronto 20%

West 20%

Context and Objectives

The province-wide implementation of Ontario Health Teams (OHTs) remains a priority for the Ministry of Health (“the ministry”). Teams at all stages of implementation have indicated continued commitment to the OHT model. As the COVID-19 pandemic continues to pose unprecedented challenges to health system capacity, the ministry is continuing to pursue flexibility on OHT implementation activities and timelines.

- We have heard from teams that more **regular engagement opportunities with the ministry, experts and other teams** would better support achievement of **key milestones and advancement of the OHT model**.
- The *OHT Virtual Engagement Series* provides a **renewed approach to communication** for teams. In collaboration with Ontario Health (OH) and partners in the Central Program of Supports, this new approach expands opportunities for teams to learn, ask questions, and share successes or challenges about areas of common interest.
- The *OHT Virtual Engagement Series* will consist of:

1 A newsletter style communication:

- ✓ sent from the OHT Mailbox (ontariohealthteams@ontario.ca)
- ✓ provides a high-level overview of OHT implementation updates and upcoming supports activities
- ✓ shares a link for the upcoming interactive session

2 An interactive session:

- ✓ hosted in collaboration between the ministry and OH
- ✓ provides details on information shared within the ‘newsletter’ communication
- ✓ provides an opportunity for questions
- ✓ future events will spotlight work of individual OHTs and provide a venue for sharing experiences, successes and challenges

Today's Discussion

AGENDA

00

Key Highlights:

- Message for teams from the Honourable Christine Elliott
- Today's key take-aways

01

OHTs & COVID-19 Response & Recovery:

- Flexibility in OHT implementation during COVID-19

02

OHT Implementation & Policy Updates:

- Achieving provincial coverage
- OHT supports for underserved communities
- Home and community care modernization
- OH supports for OHTs

03

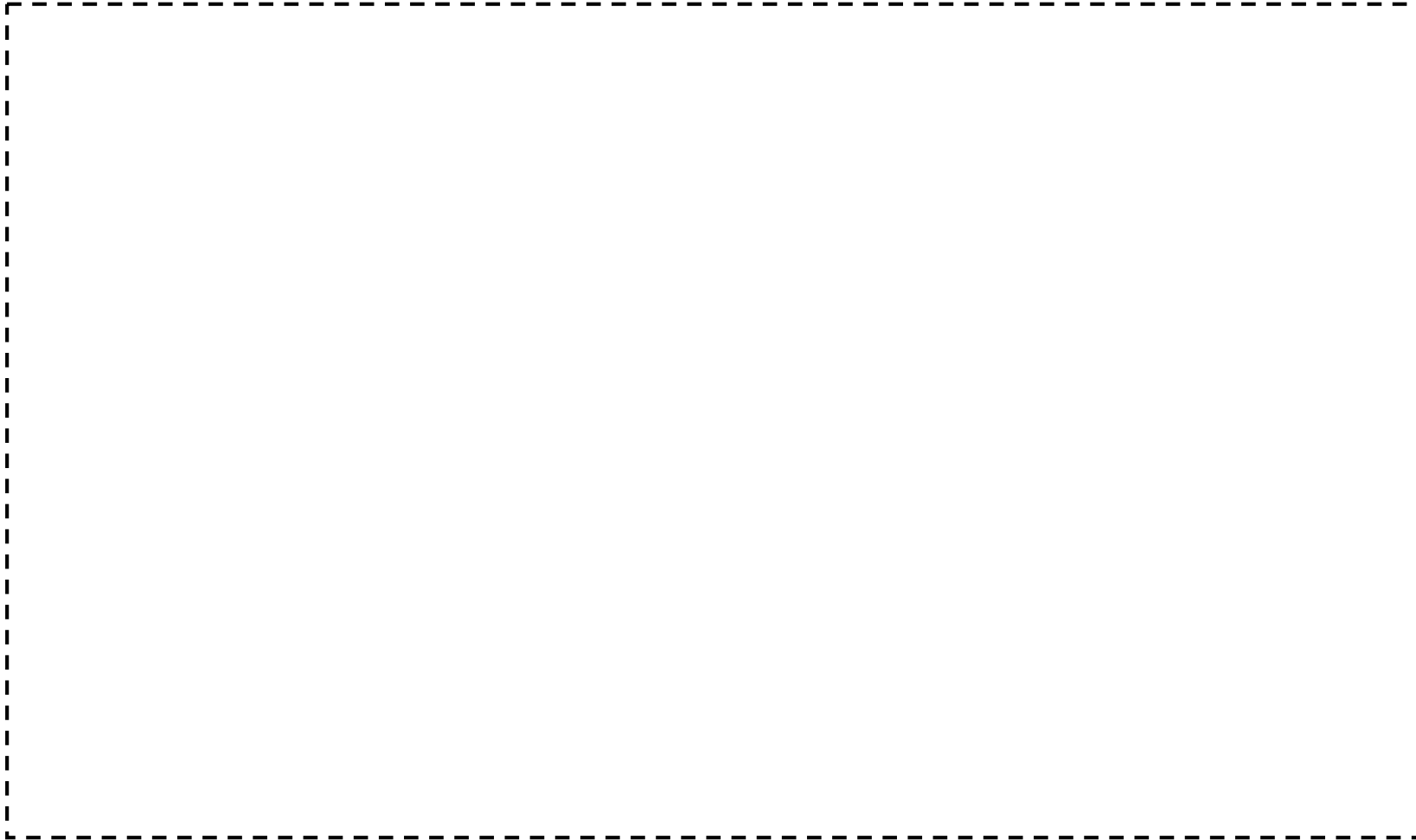
Focus on Patient Engagement Building Block:

- Supporting patient engagement within OHTs

04

Q&As, Wrap Up:

- Q&A session
- Wrap up



Honourable Christine Elliott
*Deputy Premier and
Minister of Health*

Key Take-Aways



OHT implementation, including advancing provincial coverage will continue to **move forward with flexibility** as the health system responds to COVID-19.



To uphold its commitment to flexibility, **approved teams will be supported to progress** their models through:

- ❖ Deferring deadlines for some of the deliverables set out in the Transfer Payment Agreement (TPA) for Cohort 1 Approved OHTs.
 - ❖ Receiving provincial guidance to support completion of TPA deliverables.
-



The ministry recognizes the work of many teams who are **addressing the impacts of COVID-19 on underserved communities** and is exploring opportunities to help further this work.



Home and community care modernization remains a focus of government's transformation.



Ministry and partners are working together to **offer supports for teams at all stages of implementation**, such as:

- ❖ Working in collaboration with OH to support OHT development.
- ❖ Advancing supports across building blocks of the OHT model through the Central Program of Supports.

1. OHTs & COVID-19 Response and Recovery

Discussion items:

- A Flexible Approach to OHT Implementation: TPA Timelines & Guidance
- *Allison Costello, Director, Ontario Health Teams*

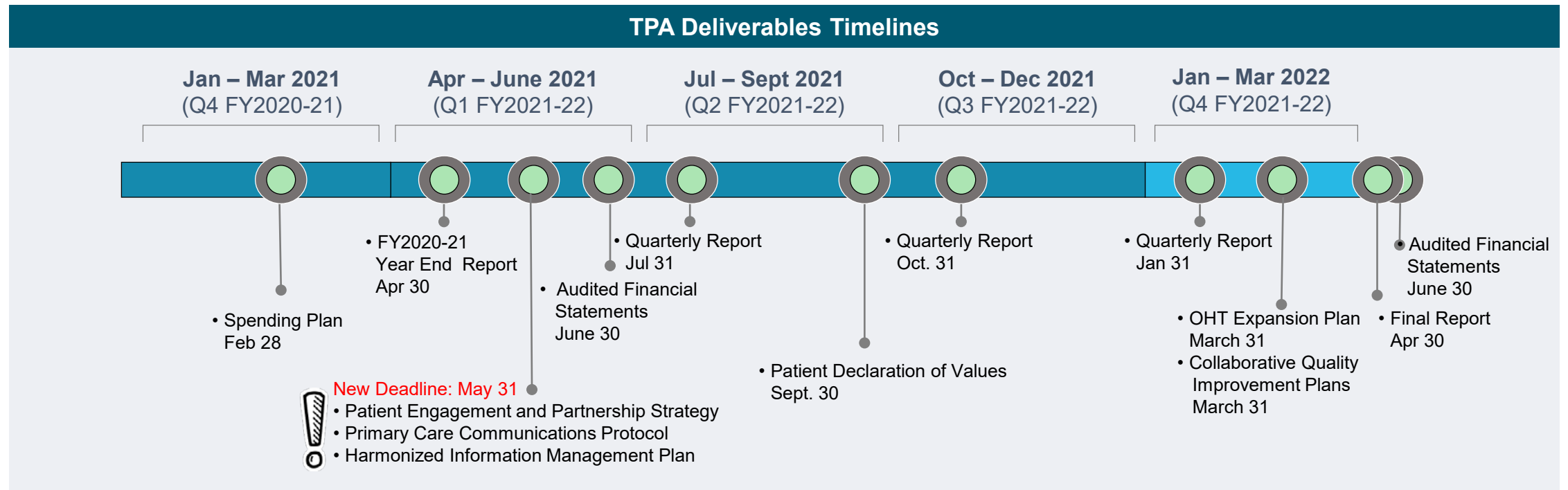
A Flexible Approach to OHT Implementation: Revising TPA Deadlines

In light of the system capacity pressures posed by COVID-19, the ministry is taking steps to ensure that OHT reporting is informed, purposeful and minimizes reporting burden and deferring the due dates for three deliverables for Cohort 1 Approved OHTs. The following activities are now due **May 31, 2021**:

- Patient Engagement and Partnership Strategy; Primary Care Communications Protocol; Harmonized Information Management Plan

This deferral is intended to provide additional time for meaningful engagement and collaboration across OHT partners.

The deadline for submission of the Spending Plan will remain **February 28, 2021** for Cohort 1 Approved OHTs, however, as teams may not have had the planning time to confirm an out-year approach to spending, a streamlined processes will allow teams to update their plans as needed.

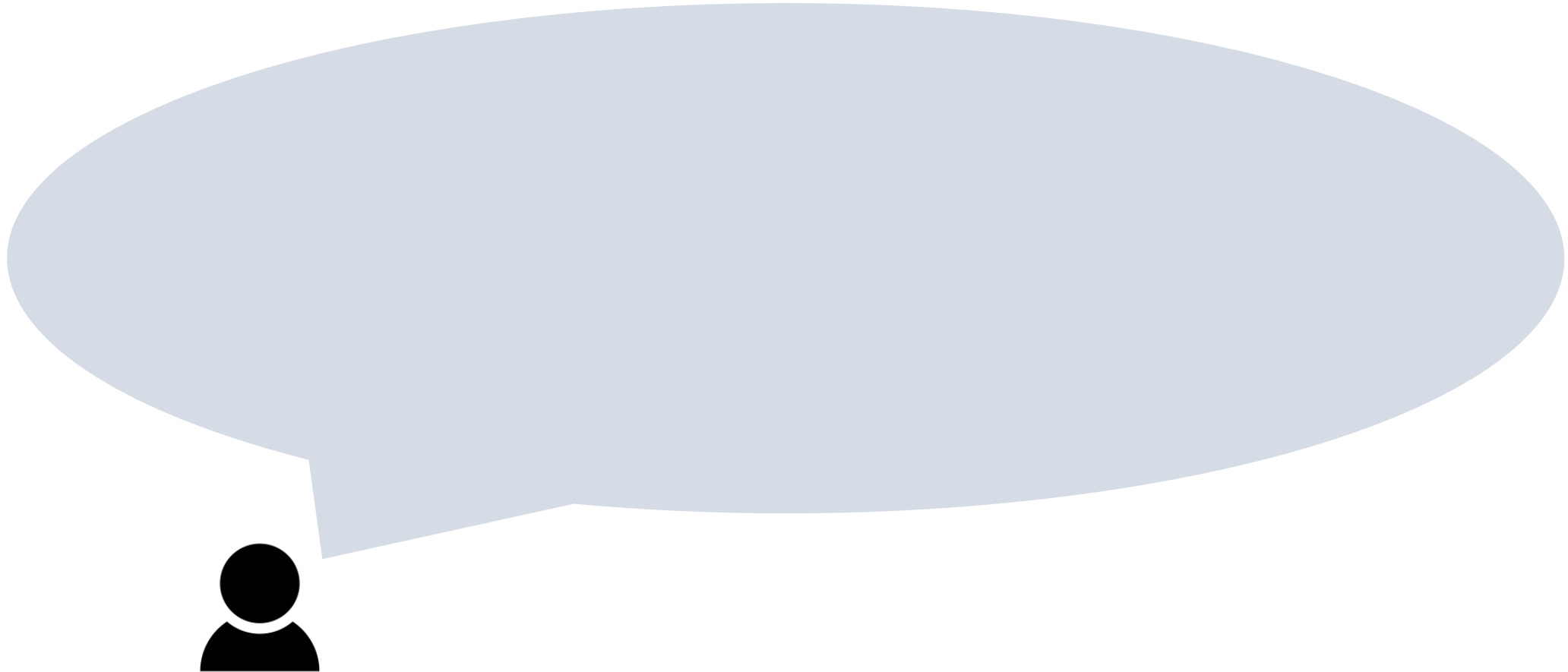


Supporting TPA Deliverables through Guidance Development

- The **Patient Engagement and Partnership Strategy** and the **Primary Care Communications Protocol** are foundational to the partnerships and principles that underpin the OHT model. The **Harmonized Information Management Plan** is a key enabler for the OHT model. They also expand on a number of key initiatives, such as the Collaborative Decision-Making Agreements (CDMAs).
- Once complete by OHTs, these deliverables will serve as a roadmap as they advance their efforts towards a health system built on partnership, trust and collaboration.
- In support of these efforts, the MOH will be providing high-level guidance to teams support a common approach in their development. **This guidance will be posted before March 31, 2021.**
- In addition to outlining the purpose for each deliverable, **this guidance will:**
 - ① Outline the **requirements** teams will be expected to include to meet their TPA deliverable;
 - ② Set out **guiding principles, leading examples** and **helpful resources**; and
 - ③ Provide **instructions** for teams to follow once their deliverable is complete (sign off, posting, submission, etc.)

Guidance will primarily take the form of a high-level document and will be accompanied when released by webinars that will include support partners, OHTs and recognized experts.

Poll: COVID-19 Response & Recovery



2. OHT Implementation & Policy Updates

Discussion items:

- Continuance of Intake and Assessment to Achieve Provincial Coverage
 - *Allison Costello, Director, Ontario Health Teams*
- Leveraging the OHT Model to Address Inequitable Access and Promote Population Health
 - *Jillian Paul, Director, Ontario Health Teams*
- Path to Home & Community Care Modernization
 - *Ann Schrager, Director, Home & Community Care*
- Ontario Health's Role in Supporting OHTs
 - *Jodeme Goldhar, Ontario Health*

Continued Intake and Assessment to Achieve Provincial Coverage

- Achieving provincial coverage of OHTs remains a provincial priority so that every person in Ontario can benefit from better coordinated, more integrated care.
- To date, there are 42 approved OHTs in Ontario. Additional “In Development” teams and other providers are continuing to advance their work to become approved OHTs. The ministry is committed to supporting the advancement of these teams while remaining flexible in light of COVID-19 capacity challenges.
- In working directly with these teams, the ministry has shifted to a targeted intake and assessment process that will see more teams assessed in the Spring 2021 and further invitations to application beyond.



Leveraging the OHT Model to Address Health Equity

Through more integrated, collaborative approaches to care delivery, OHTs will promote health equity, including equitable health outcomes, by reducing or eliminating health disparities, recognizing the impact of social determinants of health, and respecting the diversity of communities.

Meaningful Indigenous Inclusion & Engagement

Many Indigenous groups, including some First Nations, and organizations are either choosing not to participate in OHTs or have expressed uncertainty on their level of involvement and/or engagement through partnerships.

French Language Health Services

Francophone providers and stakeholders have expressed the need for greater clarity regarding French Language Health Services in OHTs and further resources and tools to support Francophone inclusion in the OHT model.

Health Equity Promotion & Supports

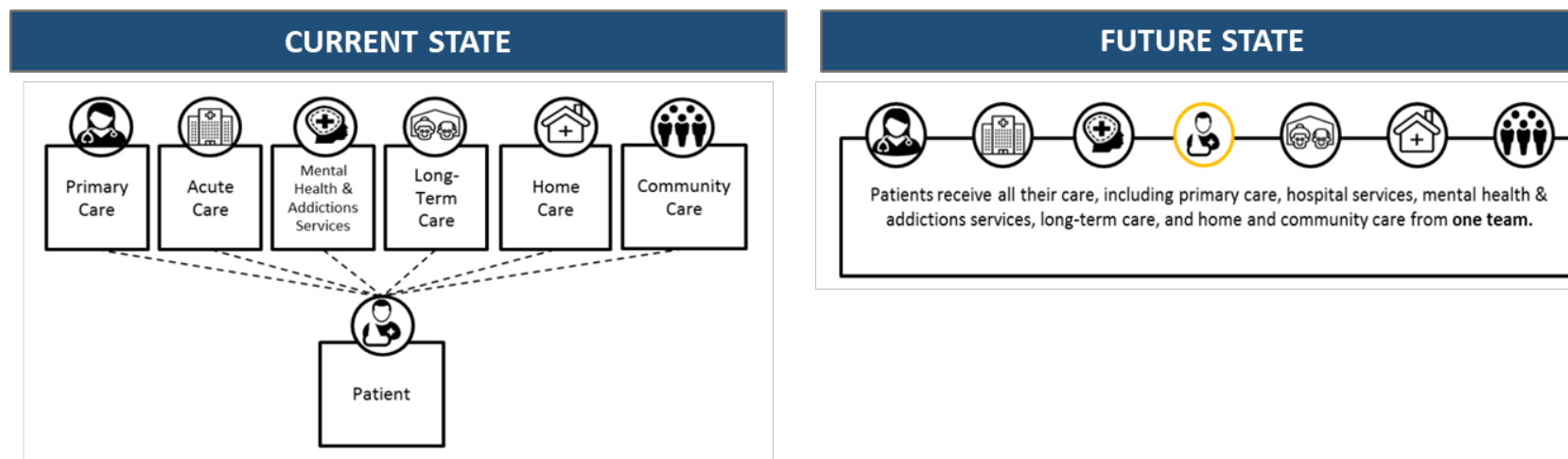
Recognizing the social determinants of health is necessary to achieve health equity - evidence demonstrates that socio-economic disparities have been exacerbated by COVID-19, disproportionately affecting marginalized and racialized communities.

Next steps:

- The ministry is committed to ongoing engagement with stakeholder partners across the system to explore opportunities for identifying supports/resources that could help promote health equity within and across OHTs.
- A future virtual engagement webinar will focus on key initiatives related to identifying and addressing the needs of underserved populations within OHTs.

Integrating Home and Community Care into Ontario Health Teams

- Integrating home and community care into Ontario Health Teams (OHTs) remains a priority.
- We have seen over the past year, more than ever, how important home and community care services are to clients, families and the health system and how important it is for health care providers to work together as one team.
- This supports the OHT vision that home and community care should be part of an integrated health care system – not a standalone service.



- OHTs have supported Ontario's pandemic response in remarkable ways: simplifying the distribution of PPE; supporting LTC homes including responding to staffing shortages and implementing infection, protection, and control measures; establishing assessment centres; launching virtual treatment programs; and expanding remote patient monitoring to support COVID-19 patients. OHTs are essential to building a connected health care system centred around the needs of patients.
- Since the pandemic began, home and community care has supported patients at home safely, with lowest infection rates; supported patients being transferred from hospitals to home; and patients previously destined to long-term care homes have remained in the community. In some cases, response activities have successfully leveraged relationships developed within OHTs. The High Intensity Supports at Home program implemented as part of the COVID response is a key example.
- Over the coming months, stability for the sector is a priority as we continue to respond to COVID.

Service Delivery and Transformation Priorities for Home and Community Care

The ministry is prioritizing service delivery in response to the pandemic and advancing five key home and community care building blocks that will lay the groundwork for Ontario Health Teams (OHTs) to deliver home and community care.



Bolster Capacity to Support COVID Response

Fund and implement targeted initiatives in HCC as part of the government's broader COVID-19 response plan.



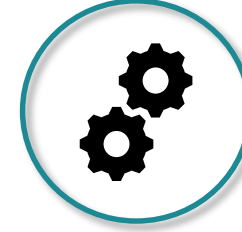
Modernize Legislation and Regulations

Create a new and modernized legislative framework for home and community care to enable OHTs and Health Service Providers to assume responsibility for the delivery of home and community care within an integrated and patient-centred service model.



Improve Accountability in Delivery

Review and update home care service provider organization procurement and contracting model.



Develop a Framework for HCC Transition

Set parameters for the phased transition of HCC to OHTs and establish clear roles and responsibilities for ministry, Ontario Health (OH), OHTs, during transition. Evaluate tests of change to prepare for full provincial scale



Establish Transitional and Permanent Governance for Home Care Delivery

Refocus LHINs as interim organizations responsible for maintaining-home care delivery and long-term care placement functions. In the end state OH takes accountability for HCC, and services are delivered through OHTs.

Vision for Home and Community Care Modernization

CURRENT STATE

- Access and delivery is siloed in 14 LHINs.
- “One size fits all” approach to care planning and delivery.
- Legislative regime a barrier to integrated care.
- Duplication in assessment and care planning between the LHIN care coordination staff and contracted provider staff.
- Lack of provincial standards that balance innovation and consistency.
- Limited scope to shift funding from higher cost models (e.g. hospitals, LTC) to the community.

TRANSITIONAL STATE

- Continue to support delivery of home and community care to support the pandemic response.
- Quality home care delivery and workforce stability is prioritized.
- Interim governance model through Home and Community Care Support Services (HCCSS) to ensure stability and accountability of home care services.
- Employment of LHIN-employed care coordination staff continues through HCCSS.
- Ministry advances the framework for change through modernized legislation & procurement policies, as well as setting parameters for transition to OHTs.
- Ontario Health assumes responsibility for funding and accountability of community service providers.
- Ministry, OH and partners collaborate to test and evaluate new models of integrated care.

MATURE STATE

- The OHT model delivers integrated care to the population, including home and community care. Services are integrated with hospitals and primary care to provide seamless patient transitions.
- Care models enable HCC providers to deliver digitally enabled, high-quality care supported by effective sharing of information between providers
- Incentives exist for OHTs to shift care to the community where people prefer to be.
- Effective cross-sector coordination, navigation and case management for complex patients - that makes best use of existing resources.
- Ontario Health is responsible for setting standards, accountability and funding.

Considerations

Bolster Capacity to Support COVID Response

- Preventing hospitalization and long-term care placement of clients with high and/or complex care needs through HCC services and facilitating hospital discharge.
- Implementing temporary wage increase for personal support workers.
- Supporting safe delivery of care.
- Supporting identification and prioritization of HCC workers and clients for vaccination and vaccine delivery options.

Modernize Legislation and Regulations

- Importance of transitioning current delivery into new legislative and regulatory framework, while providing platform for modernized delivery by OHTs.
- Ministry and OH, as the future funder, will develop processes and protocols for funding decisions and conditions of funding.
- As part of the transition, the ministry will continue to fund home and community care delivered by LHINs/HCCSS

Improve Accountability in Delivery

- The ministry is beginning a review to modernize the provider selection and partnership model to align and support home care delivery by OHTs.
- Transition planning to any new model would include evaluating tests of change and considerations for pace of change and ensuring care continuity and workforce stability.

Develop a Framework for HCC Transition

- Goal is for gradual transitions based on readiness of OHTs.
- Ministry and OH to develop parameters for shifting home care accountability from LHINs to OHTs considering:
 - Continuity of patient care
 - Workforce stability
 - Opportunities for new models of care

Establish Transitional and Permanent Governance for Home Care Delivery

- As part of the transfer of LHIN non-home care functions transferring to OH, LHINs will begin operating under the name Home and Community Care Support Services (HCCSS).
- LHINs will remain corporations under the *Local Health System Integration Act* (LHSIA) focused on home care delivery and long-term care home placement.
- A key consideration is supporting the continued coordination between home care and community services among OH, HCCSS and OHT partners.

Key Milestones and Opportunities for Engagement

Jan – Mar 2021

Apr – Jun 2021

Jul – Sep 2021

Oct – Dec 2021

- LHINs, home care providers and OHTs are focused on care delivery and COVID response.
- COVID-related HCC initiatives are prioritized, such as health service providers being approved as agencies to provide HCC for COVID response initiatives.

- Re-engagement about proposed home and community care regulations.
- Engagement about HCC modernization and transition.
- Continued learning from new models of HCC delivery during pandemic response.

- Expected proclamation of new legislative framework supports transition and modernization.
- Engagement with OH and ministry regarding transition parameters and modernization continues.

- Consultations about new home and community care policies.

Respond to COVID

Put the building blocks in place for transition and innovation

Maintain stability

Ontario Health is working collaboratively with the Ministry to support OHTs

- Ontario Health: Population Health & Value-Based Health Systems portfolio
- Our goal is to create an enabling and supportive experience for OHTs.
- We are focused on supporting you by leveraging the incredible resources that are already available and understanding the gaps and creating new resources.
- We are also focused on the great work you are already doing, showcasing it and leveraging your knowledge, experience and expertise so that together we grow our capabilities, our capacity and our understanding of what is possible to achieve in Ontario.

Your point of contact within Ontario Health are our six local support coordinators.

Region	Name	Contact
North	Terry Tilleczeck (Northeast) David Newman (Northwest)	Terry.tilleczeck@lhins.on.ca David.newman@lhins.on.ca
West	Nicole Robinson	Nicolel.robinson@lhins.on.ca
East	Darryl Tooley	Darryl.tooley@lhins.on.ca
Central	Barbara Bell	Barbara.bell@lhins.on.ca
Toronto	Wilfred Cheung	Wilfred.cheung@tc.lhins.on.ca

3. Building Block Focus: Patient Engagement

Discussion items:

- Partner Spotlight: Patient Engagement through Minister's Patient and Family Advisory Council (MPFAC)
- *Betty-Lou Kristy, Chair, MPFAC*

Supporting Patient Engagement and Partnership through the Minister's Patient Family and Advisory Council (MPFAC)



Patient, family, and caregiver partnership continues to be a key pillar of the OHT model that speaks to the commitment to create a truly patient-centred health care system.



As part of the full application review process, virtual visits provided a unique opportunity to hear firsthand where teams are at with respect to their engagement efforts and how this work is progressing.



While some teams have demonstrated long histories of meaningful and robust patient partnership, others are just learning how to engage at a broader system level.



A key priority area Minister's PFAC will be helping to advance this work in order to ensure appropriateness and alignment of patient engagement activities across OHTs in order to maximize their quality and impact.



There is a great opportunity to learn from the successes of teams that have found a way to truly build effective patient, family, and caregiver engagement into the core of their OHT work and spread those learnings across all teams.

4. Q&As Period, Wrap Up

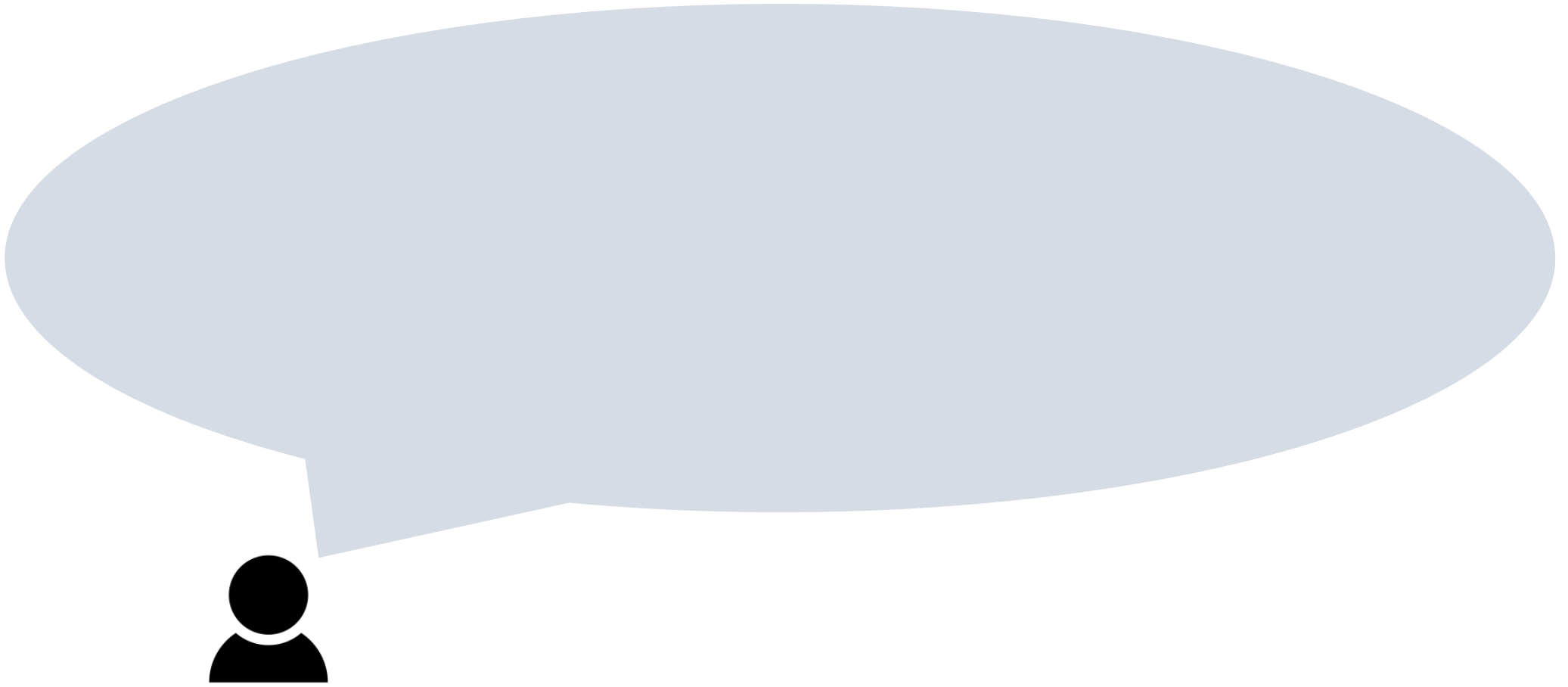
Discussion items:

- Next Steps, FAQs, Q&A Session
 - *Allison Costello, Director, OHT Implementation and Supports Branch*
 - *Moderator: Stephanie Soo, Manager, Ontario Health Teams*
- Wrap Up & Upcoming Activities
 - *Amy Olmstead, Executive Lead, Ontario Health Teams*

Next Steps

- In an effort to deliver more frequent, topical and streamlined communications to teams, the ministry is aiming to provide a 3-4 month view forward of **all upcoming supports activities and events**.
- These activities are intended to:
 - Comprehensively **outline and document upcoming activities in a central location**, enabling teams' ease of access to available supports, and
 - Ensure that activities are **aligned with the key elements and Building Blocks** of the OHT model.
 - Identify areas of need to help teams to achieve key milestones and advancement of the OHT model.
- Future OHT Virtual Engagement Series webinars will highlight leading OHTs and initiatives across the key elements and building blocks of the OHT model and with respect to identifying and addressing the needs of underserved populations within OHTs.
- **Please contact your ministry point of contact if you would like your OHT's activities to be highlighted through an "OHT spotlight" in a future webinar.**

Poll: OHT Supports Needs and Future Engagement





Frequently Asked Questions

Year 1 Start Date

QUESTION: When does Year 1 start?

ANSWER: Minimum accountabilities, including required milestones, outputs, and reports are set out in OHTs' implementation funding TPAs. Where applicable, deliverable timelines are indicated. In support of specific TPA deliverables and the advancement of the OHT model, teams are working to carry out their Year 1 implementation plans for their initial target populations. As a project management reference point, teams can consider the commencement date of their TPA as the start of "Year 1". However, it is an expectation of the ministry that teams 'hit the ground running' when they are approved as OHTs.

Implementation Funding

QUESTION: If the Spending Plan is submitted prior to the [specified date], will it be approved faster?

ANSWER: OHTs may begin to spend funds according to the eligible spending categories, and subject to the terms and conditions as set out in the transfer payment agreement, before the Spending Plan is submitted. The ministry will not provide a formal approval.

QUESTION: Can you provide more information on the exclusion of '... consultation services...' as an eligible activity under the transfer payment agreement?

ANSWER: The exclusion of consultant services is intended to help ensure OHTs build and develop capacity *in-house*, and in a sustainable way, as they continue to advance implementation towards maturity.



Frequently Asked Questions

Implementation Funding (cont'd)

QUESTION: Is clinical service delivery (or direct service provision) an eligible activity under the transfer payment agreement?

ANSWER: No. Clinical service delivery is not an eligible expense.

QUESTION: Can OHT implementation funding be used towards the purchase of digital solutions or other equipment?

ANSWER: Yes. Subject to the terms and conditions of an executed TPA, eligible expenses allow for investment in digital solutions and other equipment. OHTs will determine how they allocate implementation funding in the best way to support the further establishment of their capacity for planning and implementing more coordinated and better integrated service delivery over the longer term.

Please note that the Regional Digital Health Leads and existing local resources are available to support local digital health program planning and implementation activities necessary to achieve local integration through the adoption of provincially funded solutions.

Patient, Family, and Caregiver Engagement

QUESTION: Can the ministry provide guidance on eligible expenses within the category of patient, family and caregiver activities?

ANSWER: This category of funding is intended to support patient, family and caregiver activities. OHTs will determine how much they allocate implementation funding, provided they are spent for the purposes for which the funding was provided, and according to eligibility criteria. Some teams have asked whether remuneration or compensation is allowed within this category: as teams can determine their approach for allocation, this is allowable, but not required. At this time, there is no provincial guidance or framework for patient, family and caregiver remuneration levels should teams decide to provide it.



Question & Answer Session



Wrap Up: Upcoming Central Program of Supports Activities



Coaching and Supports

RISE Population-Health Management Coaching & Collaboratives

Teams: Cohort 1 Approved OHTs (Jan – Mar 2021); Cohort 2 Approved OHTs (Apr – Jun 2021)

Description of activity: On-the-ground supports to help teams **re-design care for their OHT priority populations**. Through this support:

- Teams will have the opportunity to receive **coaching sessions, share experiences and learn from each other**.
- Teams will participate in online Collaboratives for each priority population through monthly meetings and online discussions.
- More information was shared with approved OHTs through the population health management supports communication, circulated by the ministry on January 14, 2021.

ADVANCE Leadership Training Sessions

Teams: Cohort 1 Approved OHTs (from Summer 2020) and Cohort 2 Approved OHTs (Mar – Jun 2021)

Description of activity: A series of workshops designed to support **collaborative governance** within OHTs. Through these sessions,

- OHT leaders discuss and reflect on **strategies for joint decision-making**, and **share challenges and successes** with other OHTs.
- A **Coaching Academy** is embedded within this program to support OHT leadership teams to develop sustainable approaches to collaboration.
- More information will be shared with relevant teams through a communication from ADVANCE.

Communities of Practice

Teams: open to teams at all stages of implementation

Description of activity: current communities are focused on patient partnership, performance measurement and improvement, as well as one for teams in development. Communities of Practice include a combination of an online discussion space and monthly meeting to share lessons across OHTs. (<https://quorum.hqontario.ca/oht-collaboratives/en-us>)

Thank You