FHT to Print

Family Health Teams Unit

A newsletter for Ontario's Family Health Teams
Summer 2012

Introductions…

By the time this newsletter goes to print, I will have been the Director of the Primary Health Care Branch for about two months. To say there has been a learning curve is an understatement! I am dually amazed at both the breadth and scope of Ontario's primary health care sector and the level of commitment to improve the health of Ontarians across this province. As was communicated in our last newsletter, Mary Fleming, former Director, retired after 30 years of public service. It is clear to me that I have very big shoes to fill.

The Primary Health Care Branch supports a variety of primary health care delivery models across the province. This includes the Ontario Midwifery Program, Telehealth Ontario, Northern Health Programs, physician patient enrolment models, specialized models such as maternity centres and shelter networks in addition to, of course, Ontario's Family Health Teams. The diversity of these models poses both a challenge and strength. The challenge is to bring them together under a cohesive vision for primary health care in Ontario, focused on the needs of the person. The strength is both the commitment of those working in the models and that the models themselves recognize the great diversity of this province. The Minister of Health and Long-Term Care through Ontario's Action Plan for Health Care has articulated a vision for primary health care that would better position the sector as the centre of the health care system. We are well-positioned to lead the way on some of these important reforms. This edition showcases significant achievements of Family Health Teams in delivering unique programs, in quality improvement and others. It also includes important updates and reminders for you. At the persistence of staff, this edition includes a short Q & A on my background and priorities. Lastly, we say good-bye to a fond colleague in the Primary Health Care Branch – Linda Mann.

I hope you enjoy this Summer edition of FHT to Print. Please feel free to let us know what you think or offer ideas for future editions at FHT.Inquiries.moh@ontario.ca

Melissa Farrell, Director, Primary Health Care

Ontario

In this issue:

Q & A with Melissa Farrell, Director, Primary Health Care Branch:

Q: What's your background?

- I've worked in the ministry for nearly 10 years, on a range of diverse programs and initiatives. Much of my time has been spent on improving wait times in the hospital sector for surgical and diagnostic procedures and emergency departments. As Director of the Implementation Branch, I was responsible for priority initiatives such as Health Care Connect, the Ontario Diabetes Strategy and Wait Times. I spent an important year working with Dr. David Walker on the Alternative Level of Care (ALC) Strategy, building an ALC Implementation Plan to look at how to reduce ALC in hospitals. The importance of a strong primary care system has been a significant theme throughout all of this work.

Q: What are your Visions and Priorities for Primary Health Care?

- Through the Action Plan, our Minister has been clear about provincial priorities in this area. Over the next year to 18 months, we will look to the Action Plan to build a stronger, more sustainable primary health care system. Our priorities include:
    - Enhancing access to quality primary health care services through same day/next day appointments and house calls.
    - Expanding quality improvement to the primary health care sector, similar to what has been done in the hospital sector through the Excellent Care for All Strategy.
    - Supporting local integration and care coordination between primary health care and other parts of the health care system.
    - Ensuring appropriate oversight and improved outcomes for public investments in primary care.

Q: How do Family Health Teams fit into these priorities?

- Ontario's FHTs are well positioned to lead the way in strengthening primary care in Ontario. FHTs and other interdisciplinary models of care such as Community Health Centres (CHCs) and Nurse Practitioner Led Clinics (NPLCs) have the governance structures and resources in place to show leadership in many of these areas. In fact, we already know that several FHTs are improving access for their patients, are undertaking quality improvement initiatives and collaborating with other local health and social services agencies. Our challenge is to make these things the new way of doing business across the primary health care sector. FHTs can play a key role in this regard.

Q: Integrating primary care to LHINs has raised a lot of questions. What can you tell us about this?

- The Minister announced a greater role for LHINs in this area as part of the Action Plan. There is a considerable amount of planning and policy work required to determine optimal models of primary care integration that best meet the needs of diverse communities across Ontario. While this work is underway, primary health care providers are encouraged to continue to work closely with other providers and agencies in their communities to ensure patients are receiving the right care, in the right place and at the right time.

Congratulations – Family Health Teams

Windsor Family Health Team – Equity Award

The Windsor Family Health Team (FHT) was recently named as one of two recipients of the 2012 Health Equity Award by the Association of Ontario Health Centres (AOHC).

The AOHC represents over 120 community-governed primary health care organizations and includes membership from Ontario's Community Health Centres, Aboriginal Health Access Centres, Community Family Health Teams, and Nurse Practitioner-Led Clinics.

The Health Equity Award is awarded annually to AOHC members "who create programs and services and take extraordinary measures to raise awareness about or work in non-traditional partnerships" responding to issues of health equity.

Windsor FHT received the Award for their work serving transgendered people in Windsor and surrounding areas. The FHT trained staff, helped organize Windsor's first Transgender Health Day, and created therapeutic support groups. The FHT has created an open and safe environment to meet the health care needs of the whole community.

Prince Edward Family Health Team (PEFHT) – Launch of Cardiac Rehabilitation Program

This program is a great example of how local collaboration can meet an important community need.

Patients of Prince Edward Family Health Team (PEFHT) are now benefiting from a local cardiac rehabilitation program. Family Health Team Clinical Leaders Dr. Phil Wattam, Head of the Team's Congestive Heart Failure Clinic, Clinical Nurse Coordinator, Mary Stever and Family Physician Dr. Steve Blanchard designed the program.

Prior to its launch, the cardiac rehab program at Hotel Dieu in Kingston was the closest option. However, few residents were able to travel to Kingston multiple times each week to participate. The program, based in Picton, is modeled after those in larger centres. "We have been very fortunate to have both Ottawa Heart Institute Cardiac Rehab and Hotel Dieu (Kingston) Cardiac Rehab as mentors for our program," says Stever. "Our Team has visited both programs and they have been generous with time and materials. We will work in close collaboration with Hotel Dieu cardiac rehab through monthly videoconferences for ongoing training and problem solving."

The PEFHT established a relationship with Prince Edward Fitness and Aquatic Centre (PEFAC) for use of their facility at a reduced fee and the program received its first patients in mid-April 2012. Blanchard noted that "PEFAC stepped forward at the outset to provide facilities for our program. They have been enthusiastic partners and we are very grateful for their ongoing help and support. The South East Community Care and Access Centre provides the much needed physiotherapy services and the Prince Edward Cattlemen have offered to raise funds for the expensive exercise equipment, which will be required at a planned new site.

2nd Annual FHTsy Awards celebrated in Barrie

On June 6th, over 100 staff and physicians gathered for the Barrie and Community Family Health Team's (BCFHT) "2nd Annual FHTsy Awards and Celebration" to celebrate the BCFHT's past year's accomplishments.

Michael Feraday, BCFHT Executive Director and Dr. Brent Elsey, BCFHT Medical Director were emcees for the afternoon. They saw the day as "a success in celebrating BCFHT accomplishments, recognizing staff and physician office contributions and reinforcing the BCFHT's team identity while allowing all to interact in a fun and relaxed environment."

The event showcased a mix of BCFHT program services presentations interspersed with FHTsy awards celebrating BCFHT and office practices' employees and accomplishments.

South East Toronto Family Health Team – Expanding Access to Family Health Care

South East Toronto Family Health Team (SETFHT) continues to achieve great accomplishments in providing accessible comprehensive primary health care services to the community. SETFHT was recently named the "Family Practice of the Year 2012" by the Ontario College of Family Physicians (OCFP). An Awards Event will take place in November 2012 to officially recognize SETFHT for their strong leadership contributions to 'family medicine in Ontario'.

In June 2012, SETFHT celebrated the Grand Opening of their new site located at 1871 Danforth Avenue in Toronto. The new site will house 10 FHT staff, nine physicians and six medical residents.

Quality Improvement in Action:

Quality improvement (QI) is an essential part of delivering patient care, as quality and value are things that patients' expect from their public health care system. Ontario's FHTs are showing leadership in this area on several fronts. Below are a few examples…

Strengthening the Family Health Team – Quality Improvement Committees: Creating the Framework for Clinical Integration

North Perth and North Huron Family Health Teams (FHTs) have been Champions of both the Quality Improvement and Innovation Partnership and the former Partnerships for Health quality projects. They have built sustainable quality cultures through the implementation of Quality Improvement Committees (QICs) which formally report to their respective boards. By embracing the Quality Health Indicators (QHI) quality framework and the development of a formal structure to measure, monitor, and improve on clinical programs and service delivery, the family health teams have created an active mechanism for strengthening clinical integration within the multidisciplinary team. The formalized QICs reinforce a culture of quality across the organizations and create a unified vision of excellence within their service delivery to patients.

For more information about QI in Primary Health Care, visit the government website: www.hqontario.ca

Health for All Family Health Team (HFAFHT) – Markham Family Medicine Teaching Unit (MFMTU)

Quality Improvement is an integral part of program planning and daily practice for the Health for All Family Health Team. While developing the FHT's Diabetes Program, the team used a Quality Improvement Model for planning and implementation using Plan-Do-Study-Act (PDSA) Cycles. In April 2012, the HFAFHT and the MFMTU were invited to present a poster at the Institute for Healthcare Improvement's International Forum on

Quality and Safety in Healthcare 2012 in Paris (France) regarding the use of PDSA Cycles for program planning. The poster was well received and generated discussion amongst conference attendees.

Using PDSA Cycles to build the Diabetes Program, the HFAFHT created, maintains and promotes, a valid database of diabetic patients with process and outcome targets (e.g. related to BP, HbA1C, LDL cholesterol and eye exams), a customized EMR-based

Diabetes Management Flow Sheet, patient self-management information resources and group education.

As a QI tool, PDSA Cycles allow the team to make small changes towards larger goals, see the results, and re-evaluate the approach.

Visible incremental changes towards larger goals help to keep the team engaged in the process. The Health for All FHT's strategy enabled improvements every 2-4 weeks by using PDSA Cycles at team meetings. Each PDSA Cycle is built and revised based on learning from the previous cycle. Overall, the team has learned that they must change their systems of care if they want to change how care is practiced.

The link below provides more information about PDSA Cycles: www.ihi.org/knowledge

Family Health Teams and Hypertension

2012 Canadian Hypertension Education Program (CHEP)

Hypertension Canada is proud to announce the release of their 2012 CHEP Recommendations booklet and free mobile application for the management of hypertension. The booklet is published by the Canadian Hypertension Education Program (CHEP), an initiative of Hypertension Canada.

CHEP is a knowledge translation program targeting various health care providers in clinical and community settings. The program provides annual updated evidence-based recommendations to diagnose, treat and control hypertension.

The public recommendations were adapted into educational materials for patients and health care providers, as well as Continuing Medical Education and Continuing Professional Development programs.

The booklet is available for distribution and via a free mobile application to family health teams, medical offices, hospitals, clinics, pharmacies, and education centres.

Family Health Teams may find the CHEP recommendations an important resource for their Hypertension Management programs.

For more information, visit: www.hypertension.ca

Announcements

In Memory of Linda Mann

We are saddened to announce the passing of our good friend and colleague, Linda Mann, following a long and courageous battle with cancer. Linda passed away peacefully on June 1st with her husband and two children by her side. Friends and family shared their memories of Linda at a memorial service, celebrating her life on June 10th.

Linda was an avid traveler, photographer and dedicated public servant. She had a long and diverse career in the Ontario Public Service, ranging from social housing to community development to public health and lastly, family health teams (FHTs).

Linda was integral to the development of the family health team program and supported several family health teams through the difficult early days to become key parts of their communities. Linda firmly believed that FHTs can play a significant role in improving health care and the quality of life for their patients. As a dedicated public servant, she did her job with integrity and professionalism. Linda leaves a lasting legacy with her colleagues, the FHTs she worked with and the patients they serve. We will deeply miss her.

Upcoming Notices and Reminders

Electronic Medical Records (EMR) and OntarioMD (OMD)

The **EMR Adoption Program** has been extended to March 2014. The funding model, terms and conditions for the funding program remain the same.

The **EMR Program Upgrade** also offers funding with additional requirements for using the provincial laboratory system, hospital reporting systems and Diabetes Registry once they're available. Further, OntarioMD has released the Clinical Management Specification 4.1 which more tightly manages vendor performance including EMR implementation, upgrades and maintenance.

For more details, please visit: www.ontariomd.ca

Access to Vendor of Record Program by Family Health Teams (FHTs)

The Supply Chain Management Division at the Ministry of Government Services is the window for the Vendor of Record (VOR) Program for information and information technology (hardware, software and services) and non-IT goods & services available to public sector buyers including major transfer payment recipients (TPR) such as FHTs.

The VOR arrangement could save a significant amount of time and money for FHTs. To access the VOR, FHTs need to register online as a buyer. FHTs also require a letter from the Ministry of Health and Long-Term Care confirming their status as a Transfer Payment Recipient (TPR).

FHTs can take advantage of this opportunity by registering as a buyer and contacting their Senior Program Consultant for a letter confirming their TPR status.

For more information, go to: www.doingbusiness.mgs.gov.on.ca

AFHTO Conference

The 2012 Association of Family Health Teams of Ontario (AFHTO) Conference theme is: "Demonstrating and Celebrating the Value of Family Health Teams."

The two-day conference takes place on: Tuesday, October 16, 2012 to Wednesday, October 17, 2012 at Hilton Toronto, 145 Richmond St.

For more information, go to: www.afhto.ca

Reminders…

Family Health Teams (FHTs) are reminded of the timelines associated with reporting requirements for the 2011/12 and 2012/13 fiscal years:

By June 30, 2012 – Annual audited statements of revenue and expenditures were due to the ministry for fiscal year 2011/12.

By July 31, 2012 – First quarter reports are due to the ministry. 2012/13 templates have been distributed.

FHTs are requested to submit their reports by email to their assigned ministry contact.

Questions, Feedback about our Newsletter

If you have feedback or questions on the newsletter, or suggestions for future articles, please contact: FHT.Inquiries.moh@ontario.ca