

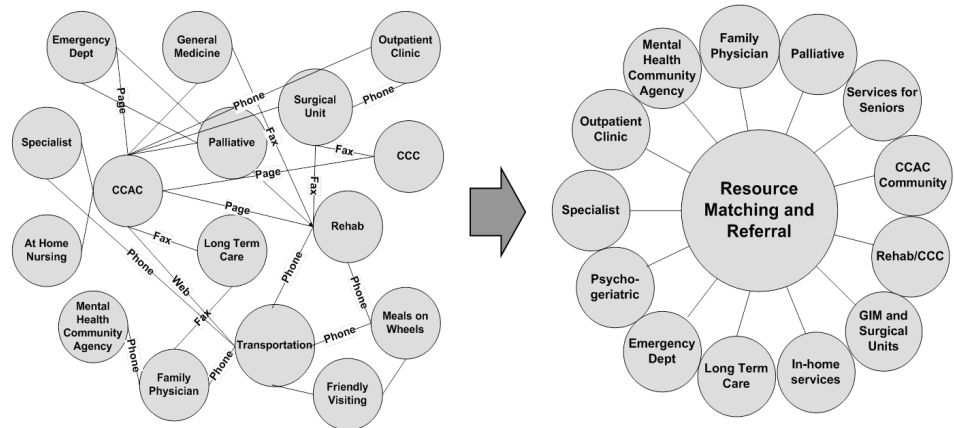
ALC Resource Matching & Referral Business Transformation Initiative

PROJECT BULLETIN

January 2012

About this Project

Ontario's ALC patient referral landscape is complex and is characterized by inconsistent processes for referring clients to programs and services. The Alternative Level of Care Resource Matching & Referral Business Transformation Initiative [ALC RM&R BTI] is supported by the Ministry of Health and Long-Term Care and will streamline the provincial patient referral environment. It will deliver meaningful benefits to patients, health service providers (HSP) and health system planners through increased collaboration, standardized referral processes, and joint accountabilities, all of which will ensure more efficient, equitable and client-centric care. The in-scope referral processes have been defined as Acute to Rehab, Acute to Complex Continuing Care, Acute to Long-Term Care and Acute to CCAC in-home services.



The ALC RM&R BTI project will streamline the provincial referral environment for the 4 in-scope pathways.

AT A GLANCE

Pg 1: Enhancing Quality of Care
Pg 2: Clusters Working on Standardization in 2012
Pg 2: Key Dates

ALC RM&R supports the Ministry of Health and Long Term Care ER/ALC Strategy, the Excellent Care for All Strategy, and Ontario's eHealth Strategy. The implementation of RM&R across the province has been endorsed by all 14 LHIN CEOs as a provincial priority project for the LHINs.

Enhancing Quality of Care for ALC Patient Population

In October 2010, the Ontario government passed the *Excellent Care for All Act*, which provided a clear framework to enhance the quality of care for patients in Ontario. Creating a culture of continuous quality improvement and ensuring the delivery of best value for health dollars were key tenets of this legislation.

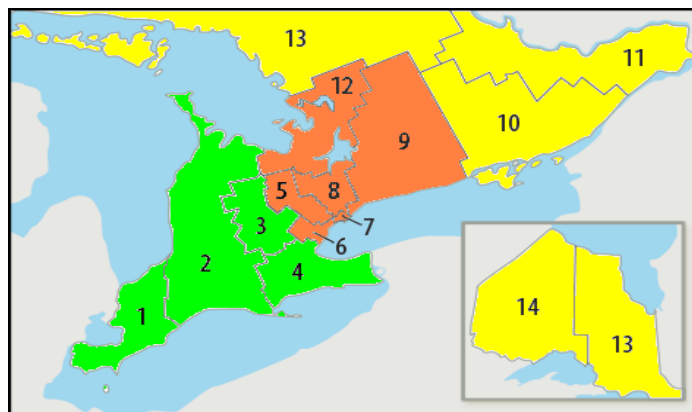
Given that significant quality issues occur in the transition points as patients move from one provider to the next, ALC RM&R BTI will enhance quality of care by bringing together health care providers from across the province to standardize patient referral processes. "This province-wide initiative has the potential to help reduce ALC days and contribute to a reduction in ER wait times," says Malcolm Moffat, ALC RM&R Steering Committee Member and President & CEO, St. John's Rehab Hospital, "The Cluster Delivery Teams and Health Service Providers supporting this project will play a key role in improving the quality of care for the ALC patient population in Ontario."

Clusters Working on Standardization in 2012

The objective of the 2011/12 ALC RM&R BTI project is to achieve standardized and validated future state workflow processes, referral terminology and referral forms for in-scope pathways in each of the 3 Clusters. LHINs are working in Clusters to execute project activities through the use of Cluster Delivery Teams.

Within each Cluster, the execution model for achieving standardized referral processes, forms and terminology is slightly different. However, St. Joseph's Health System is the Provincial Delivery Lead and will be working with each Cluster to ensure that project outcomes are consistent and scalable across the province.

In January most Clusters will initiate standardization work with their health service providers.



The LHINs have formed the following 3 Clusters for ALC RM&R BTI:

- **Cluster 1:** Erie St. Clair (1), South West (2), Waterloo Wellington (3), and Hamilton Niagara Haldimand Brant (4)
- **Cluster 2:** Central West (5), Mississauga Halton (6), Toronto Central (7), Central (8), Central East (9), North Simcoe Muskoka (12)
- **Cluster 3:** South East (10), Champlain (11), North West (14), North East (13)

CLUSTER 1 UPDATE: In November, the Steering Committee endorsed Healthtech as the vendor delivery lead on the RM&R project. The Project Team consists of project coordinators from Consolidated Health Information Services,

KEY DATES

2 day future state working sessions

- **ESC Jan 31 & Feb 1**
- **WW Feb 7 & 8**
- **HNHB Feb 14 & 15**
- **SW Feb 21 & 22**



Warren Hillier and Mary-Ellen Scully along with Leads from each LHIN; Tricia Khan ESC, Donna Ladoceur SW, Barbara McKay WW and Barbara Bus-ing HNHB.

To date the team has completed: an update to the RM&R Provincial Baseline Inventory, identified Risks and Mitigation strategies and completed an Integrated Project Plan. A review of the current state assessment, workflows and forms in use in the referral process for the four in-scope pathways is currently underway (*See page 1). Upcoming activities: 2-day future state business process re-design sessions will be taking place in each LHIN in the coming weeks and a cluster-wide consensus building session is scheduled for early March.

What is the ALC RM&R BTI Project Bulletin?

This bulletin summarizes key messages from Provincial Project Team meetings and highlights upcoming project activities. These messages are provided to keep you informed of the project's progress and activity. Bulletins will be published on a monthly basis. Please forward comments or questions to Warren Hillier at Consolidated Health Information Services warren.hillier@consolidatedhealth.ca