Population-health management collaborative
Summary from 1 March, 2021

Core concept and principles

The 4 steps of population-health management (PHM)

1. Segmenting for needs, risks and barriers
2. Co-designing care models and service mix
3. Implementing and increasing reach
4. Monitoring and evaluating

Segmenting helps you see your population by level of need, risk, and barriers. As you move up the pyramid, there are greater needs, risks and barriers.

Data sources for Ontario Health Teams

Data are needed to segment and to actively manage the population. Looking at multiple sources is necessary for a holistic view.

<table>
<thead>
<tr>
<th>Purpose of data</th>
<th>Support</th>
<th>Contact info</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rapid learning and improvement in OHTs (with near real-time data contributed by partners and linked longitudinally)</td>
<td>IDS</td>
<td>Wendy Gerrie, <a href="mailto:gerriew@hhsc.ca">gerriew@hhsc.ca</a></td>
</tr>
<tr>
<td>Learning and improvement in OHTs (delayed but comprehensive data linked longitudinally)</td>
<td>IntelliHealth</td>
<td><a href="mailto:intellihealthontario@ontario.ca">intellihealthontario@ontario.ca</a></td>
</tr>
<tr>
<td>Monitoring and quality improvement among primary-care practices (with EMR data contributed by primary-care practices)</td>
<td>POPLAR</td>
<td><a href="mailto:info@poplarnetwork.ca">info@poplarnetwork.ca</a></td>
</tr>
<tr>
<td>Evaluation in primary care (with ICES and other data)</td>
<td>INSPIRE</td>
<td>Eliot Frymire, <a href="mailto:frymire@queensu.ca">frymire@queensu.ca</a></td>
</tr>
<tr>
<td>Evaluation focused on OHTs (with ICES and other data)</td>
<td>HSPN</td>
<td><a href="mailto:oht.evaluation@utoronto.ca">oht.evaluation@utoronto.ca</a></td>
</tr>
<tr>
<td>Equity- and primary-care sensitive local maps of health-related data (with ICES and other data)</td>
<td>OCHPP</td>
<td><a href="mailto:healthprofiles@smh.ca">healthprofiles@smh.ca</a></td>
</tr>
<tr>
<td>Population planning, evaluation and other data analytics support for OHTs</td>
<td>ICES</td>
<td><a href="mailto:ahrq@ices.on.ca">ahrq@ices.on.ca</a></td>
</tr>
</tbody>
</table>

See this RISE RB8 on data analytics for more sources of data.

Examples of segmentation approaches to Ontario Health Teams

Where we started: started by using the pyramid to decide where to focus and what activities to prioritize

Where we want to go: expand activities to the other segments of the pyramid – progressing to the bottom

How we are getting there: focusing on trust and partnerships, building a data infrastructure to make informed and coordinated decisions, and so much more

Where we started: started by prioritizing activities that were already happening and were aligned to our priority population

Where we want to go: continue using segmentation to identify what we should do in a proactive manner and expand to other segments of our priority population

How we are getting there: working with the data we have but also working on the long game (e.g. starting to work with primary care to create a central data repository)

Muskoka and Area OHT

Seniors with high-risk needs
Seniors with rising-risk needs
Seniors with low-risk needs

Seniors with high-risk needs
Seniors with rising-risk needs
Seniors with low-risk needs

Seniors with high-risk needs
Seniors with rising-risk needs
Seniors with low-risk needs