

Ministry of Health

# OHT TPA Deliverable Guidance: Information Session

April 14, 2021

# Land Acknowledgement

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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.

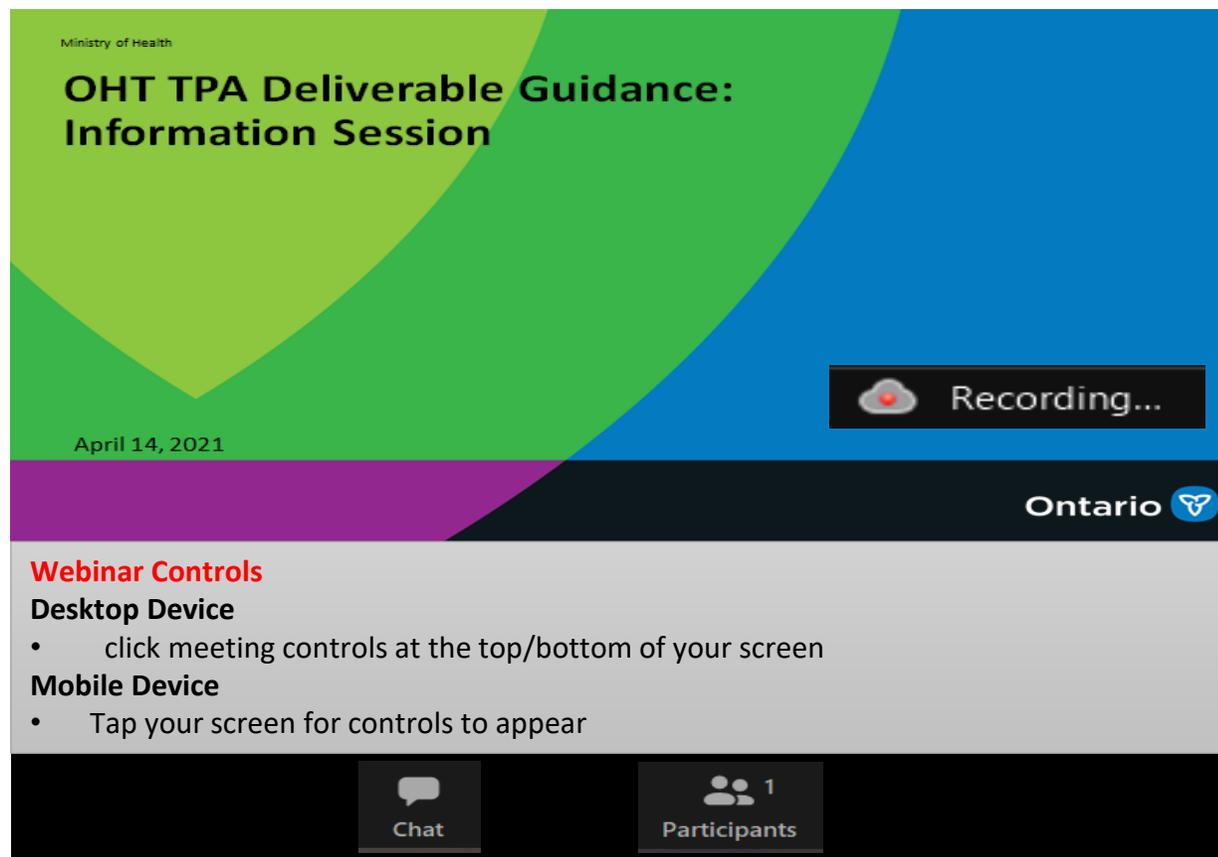
Traditionally, Toronto was a gathering place for many nations including the Anishnaabeg, the Haudenosaunee and the Wendat peoples.

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



# Introductions and Housekeeping

1. Speaker introductions
2. Webinar Participant Instructions:



Ministry of Health

## OHT TPA Deliverable Guidance: Information Session

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Recording...

Ontario

### Webinar Controls

**Desktop Device**

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

**Mobile Device**

- Tap your screen for controls to appear

Chat

Participants 1

## Chat Box

From Me to **All panelists and attendees:**  
I was wondering if there were some specific validated tools for patient and family engagement that could be shared with us?

From Me to **All panelists:**

I am having trouble hearing the current presenter.

Is there a number I can use to dial in?

# OHT Update: Additional Cohort 1 TPA Deliverable Deferral

- **Recall:**
  - On February 3, the ministry announced deferrals for three deliverables associated with implementation funding for Cohort 1 OHTs.
  - Since then, teams expressed concerns about meeting the May 31 date due to capacity issues posed by their involvement in vaccination rollout.
- **Update:** In alignment with the ministry's commitment toward flexible OHT implementation during the COVID-19 pandemic, the ministry is affording additional time to Cohort 1 teams for the following deliverables.

Cohort 1 TPA Deliverable	Original Due Date	Current Deferral	NEW Deferral
Harmonized Information Management Plan	March 15, 2021	May 31, 2021	September 30, 2021
Patient, Family, and Caregiver Partnership and Engagement Strategy	April 30, 2021		
Primary Care Communications Protocol	April 30, 2021		

- **Next steps:**
  - The new deferred due dates will apply to all Cohort 1 teams and will be formally communicated, however teams may still complete these deliverables in advance of these dates.
  - Cohort 1 teams may reach out to their ministry point of contact for any questions.

# Overview: PFC Guidance Document

- The 2019 *OHT Guidance for Health Care Providers and Organizations* which set out that: Ontario Health Teams will be driven based on the needs of patients and communities. They will meaningfully engage and partner with patients, families, caregivers, and communities, based on a robust patient partnership model and community engagement strategy.
- To advance this aim, OHTs are to each create a Patient, Family and Caregiver Partnership and Engagement Strategy. Guidance for this strategy has been informed by broad consultations and *Ontario's Patient Engagement Framework* (developed by the then HQO in consultation with patient, family and caregiver partners), among other resources.

## Guidance document includes the following sections (intro and conclusion excluded)

1. **Content Requirements:** The standardized use of these elements will support a consistent focus and approach, while each OHT creates its unique strategy.
  - Strategic Goal
  - Guiding Principles, including Partnership and Co-Design, Transparency, Respect and Empowerment
  - Engagement Domains and Approaches
  - Enablers, such as minimizing barriers, fostering a culture of continuous improvement, and a commitment to diversity and health equity
2. **Development, Validation and Confirmation:** Documentation and approval process.
3. **Snapshot of Learnings to Date:** Through OHT implementation to date a number of leading practices have emerged key elements for success in fostering a culture of system co-design.
4. **Key Resources**

### **\*Sample of Leading Practices\***

- Establishing a dedicated resource or staff to lead patient, family and caregiver activities within the OHT.
- Integrating, including as co-chairs, patients, families and caregivers in working and decision-making structures.
- Including more than one patient, family or caregiver partners in working structures (preferably three, at least two).
- Supporting long-term, sustainable patient, family and caregiver partnership.
- Continuously investing in bringing a diversity of patient, family and caregiver voices to the table.

# Next Steps: PFC Supports

- Across Ontario, there is a broad range of experts and partners who are supporting OHTs to advance their patient, family and caregiver partnership. To ensure equitable accessed by all teams and alignment with key milestones for OHTs as they mature, the ministry is working with partners to strengthen coordination of these supports.
- Learning and sharing opportunities will be pursued to support enhanced patient, family and caregiver partnership and engagement.

# Patient, Family and Caregiver Partnership and Engagement Strategy

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## **Q&A Discussion (10 minutes)**



# Overview: PC Communications Guidance Document

- As set out in the *2019 Ontario Health Teams: Guidance for Health Care Providers and Organizations*, a significant role is envisioned for primary care and physician partners in Ontario Health Teams (OHT). To unlock this potential and harness the benefits of more integrated care, coordinated and purposeful efforts must be made to support local primary care and physician partners in becoming better connected and invested in their OHT.
- Guidance for the Primary Care Communications Protocol was developed through broad consultations on best practice for engaging physicians in health system transformation.
- The document uses the term “primary care and physician partner” to denote the audience and main stakeholders for the communications protocol. This includes all providers responsible for patients and working in primary care settings, including nurse practitioners, team-based physicians, fee-for-service physicians, interprofessional health care providers, traditional health practitioners, as well as both hospital and community-based specialist physicians.

## Guidance document includes the following sections (intro and conclusion excluded)

- 1. Development of Protocol:** Recommendation to leverage existing primary care and physician partner tables, networks, associations, etc. If providers in an OHT have yet to form these groups, it is recommended that an OHT build its communications protocol to reach as broad a range of partners as possible.
- 2. Content Requirements:** Recommends guidelines and standard content inclusions, such as:
  - Strategic Goal
  - Enablers, such as a commitment to health equity and cultural safety, contact information for associated providers, and administrative capacity
  - Tactics, such as the mutually agreed upon When, Why and How of OHT outreach to, and communication across, its primary care and physician partners.
- 3. Snapshot of Learnings to Date:** Through OHT implementation to date a number of leading practices have emerged key elements for success in fostering a culture of system co-design.
- 4. Key Resources**

### **\*Sample of Leading Examples\***

- Keep messages concise and action-oriented.
- Identify primary care and physician leaders who can act as champions; create frequent platforms for them to communicate to the sector.
- Proactively and reactively assess and evaluate the impact of tactics.
- Hold meetings outside of what are commonly used as “clinic hours”. Follow-up on discussions to show action taken so that primary care and physician partners can see that their time and contribution was valued.
- Co-design protocols by engaging full range of different provider types within the umbrella of primary care as well as Indigenous, Black, and other racialized and/or Francophone providers.

# Next Steps: PC Communications Supports

- In partnership with primary care and physician organizations and other partners, ongoing development, identification and deployment of in-depth supports for OHTs based on identified needs and in support of the leading practices set out in the guidance.
- Learning and sharing opportunities will be pursued to provide a spotlight on common opportunities and support enhanced participation of primary care and physician partners within OHTs.

# Primary Care Communications Protocol

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## **Q&A Discussion (10 minutes)**



# Overview: Harmonized Information Management Plan

- The HIMP provides a mechanism to help advance the OHT's overall maturity to support integrated care. It is a tool for OHTs to assess their information management needs for care, planning, monitoring and evaluation; and considerations for data integration, governance, privacy and security. The HIMP documents the OHT's approaches to meet the needs and address challenges, while preserving privacy.
- A ministry template allows OHTs to highlight their plans, and builds on the OHT submissions in their ministry applications. The HIMP is viewed as a living document, evolving as the OHT matures.
- Guidance was developed based on feedback received on information management and privacy enablers that would support OHT implementation towards the mature end-state.

## Guidance document includes the following sections (intro excluded)

1. **Key considerations to include in a HIMP:** Critical elements to include in their planning process and the documented plan, including the need for assessments and leveraging existing processes and resources.
2. **Content:** Provides guidance and content inclusions, such as:
  - Vision and strategic goals
  - Key information management and privacy definitions, to ensure consistent understanding of the scope of the HIMP requirements across the OHT
  - Information governance and accountability structures and processes
  - Data management and data flow diagrams and analyses
  - Privacy considerations to assess and develop plans around safeguarding personal information and personal health information
3. **Key References:** Description of key concepts related to information management and privacy.
4. **Key Resources:** Links to useful documents which OHTs can leverage.

### **\*Example for integrated information sharing\***

- Establish OHT governance and accountability structures and processes.
- Identify needs for information and information sharing.
- Develop options that are aligned with legislation.
  - E.g., assessment of options for health information custodians and non health information custodians.
- In the plans, identify risks as well approaches to achieve the outcomes within the current environment (e.g., given the current operational, financial, legislative and regulatory landscape).

# Next Steps: HIMP Supports

- A deeper dive on the HIMP in a Virtual Engagement webinar in May 2021, to provide further guidance and an opportunity for OHTs to exchange information to help the development of their plans.
- The ministry will continue to consult with OHTs and health system partners to identify and deploy more supports for teams based on identified needs.
- In addition to the HIMP template and Guidance Document, OHTs may use other IM and privacy resources to complete their plans as needed.
- Teams can submit questions to their ministry point of contact.

# Harmonized Information Management Plan

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## **Q&A Discussion (10 minutes)**



# Wrap-Up and Next Steps



## Questions

- Ministry to address any remaining questions (time permitting).



## Next Steps

- Cohort 1 teams will receive formal communications about the new deferred dates. Please reach out to your ministry point of contact for any questions.
- To further support these deliverables, teams will have opportunities to participate in **learning and engagement sessions** in the coming months, which will include:
  - Exploration of common areas of interest;
  - Knowledge sharing from subject matter experts;
  - Input from OHT representatives (with a focus on lessons learned and leading practices); and
  - In-depth discussion and further opportunity to ask questions.

**Thank you for joining us today!**