HealthLink Rideau Tay

Communique

Fall 2014

What is a Health Link?

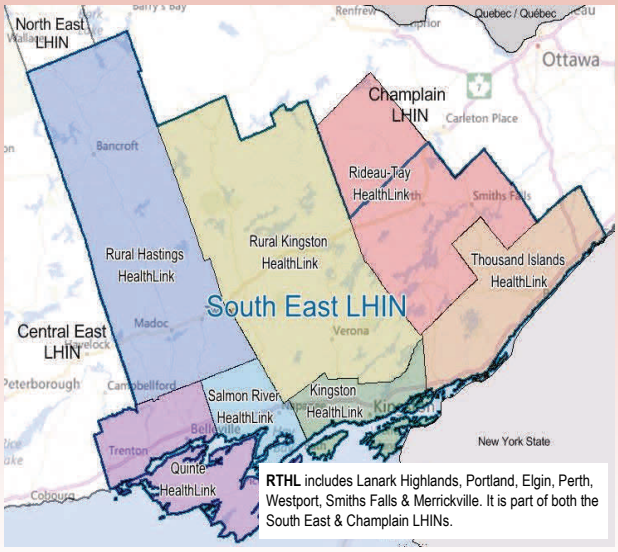
Health Links is an initiative from the Ministry of Health and Long Term Care that is meant to increase collaboration between local health and community service providers. Initially, this will be accomplished by providing care co-ordination for the most complex and vulnerable health care patients in the Health Link area. Health Links have been formed all across Ontario with funding provided by the Ministry of Health.

The purpose of Rideau Tay Health Link (RTHL) is to:

- Improve communication between family doctors, nurse practitioners, hospitals, CCAC and community agencies
- Improve the patient and family experience including transitions (for example from hospital to home)
- Reduce the number of people without a primary care provider

Through better care coordination the intent is to:

- Improve the client and family experience through focusing on the "**patient voice**"
- Reduce avoidable emergency department visits and unnecessary hospital admissions and re-admissions
- Reduce the number of times a person must "tell their story"



Catchment of each Health Link within the South East LHIN

Coordinated Care Plans (CCPs):

One of the primary deliverables of the Health Link is to ensure the development of coordinated care plans for all complex patients. The Health Link Coordinator (HLC) is responsible for developing CCPs once patients have been identified by their primary care provider (PCP). The CCP is truly designed to hear the patient voice and goes beyond the traditional medical system to include the broader determinants of health that patients have expressed as priorities to their care plan.

Steps in the CCP process

1) PCP identifies patient to Health Link Coordinator (HLC)
2) HLC contacts patient, sets up a meeting to complete CCP and identifies plan
3) CCP is reviewed with patient and patient receives a copy of the CCP
4) HLC discusses plan with PCP and any other relevant team members
5) A care conference is initiated as needed
6) HLC continues ongoing follow up

Along the way we would like to recognize and track system or process issues within our Health Link and identify ways to overcome challenges.

How does this impact me as a provider?

- A patient you see may identify him or herself as a Health Link patient and have a coordinated care plan
- You may be asked to participate in a care conference for a Health Link patient with a CCP
- You may be able to help identify complex and vulnerable patients who are appropriate Health Link patients and who would benefit from a CCP

Learn More:

Health Links are an important part of health care transformation happening across Ontario. The Rideau Tay Health Link team would like to ensure that all care providers in our Health Link are aware of the Health Link and the importance of Coordinated Care Plans for our most vulnerable patients. The Rideau Tay Health Link team is available to provide your organization with an information session at the Board, Management and/or Staff level. Please contact us by clicking on an email below.

Rideau Tay Health Link Contacts: (613) 283-0001 Project Manager: Maureen McIntyre
Health Link Coordinator: Jennifer Spencer Patient & Provider Engagement Lead: Kelly Barry

Ontario
South East Local Health Integration Network