IMPROVE POPULATION HEALTH, ENHANCE PATIENT & PROVIDER EXPERIENCE OF CARE & REDUCE COSTS OF PROVIDING HEALTH CARE

POPULATION HEALTH
- Disease, injury & disability prevention.
- Environmental health.
- Emergency health management.
- Health improvement.

QUALITY CLINICAL SERVICES
- Effective.
- Accessible.
- Patient-centred.
- Appropriate.
- Safe.

SUSTAINABLE PUBLICLY FUNDED HEALTH CARE SYSTEM
- Meet budget targets.
- Efficient.
- Value for money.

EFFECTIVE HEALTH PROMOTION & PREVENTION
1. Improve population health through core public health programs.
2. Implement targeted health promotion and prevention initiatives to reduce the incidence of chronic disease.

INTEGRATED & TARGETED PRIMARY & COMMUNITY HEALTH CARE
1. Implement an integrated model of primary and community care to more effectively meet the needs of British Columbians, especially frail seniors and patients with chronic and mental health and substance use conditions.

HIGH QUALITY HOSPITAL SERVICES
1. Implement a guideline-driven clinical care management system to improve the quality, safety and consistency of key clinical services and improve patient experience of care.

IMPROVED INNOVATION, PRODUCTIVITY & EFFICIENCY IN THE DELIVERY OF HEALTH SERVICES

DRIVING INNOVATION & EFFICIENCIES
1. Use patient-focused funding to increase access and cost-effectiveness.
2. Drive LEAN across health service sector to redesign and improve services and functions.
3. Optimize the efficiency and effectiveness of emergency health services.
4. Achieve greater efficiency in the delivery of quality diagnostic services.
5. Reduce the cost of drugs, equipment and supplies.
6. Achieve savings through consolidating lower mainland administrative services.

PHYSICIANS & HEALTH HUMAN RESOURCES
1. Optimize use of health human resources to improve clinical care and productivity.

SYSTEM ACCOUNTABILITY
12. Optimize governance, leadership and operational and change management capacity.

IM/IT
13. Improve patient safety and access to records through enhancements to the health care card.
14. Complete the implementation of ehealth.

http://www.ThinkHealthBC.ca
Strategic Innovation and Change Agenda

- Collaboration in and between 3 clinical key result areas
  - Effective Health Promotion and Prevention -- Healthy Families BC
  - Integrated Primary and Community Care
  - High Quality Hospital Services
Public Health and Primary Care Collaboration

- Multiple opportunities for collaboration
  - Provincially
  - Regionally
  - Locally
Prescription for Health

- Components:
  - Lifetime Prevention Schedule
  - GPSC Personal health risk assessment fee
  - Referral to lifestyle support services such as:
    - PAL
    - QuitNow
    - Self management support
<table>
<thead>
<tr>
<th><strong>Perinatal and Child Health Services</strong></th>
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<td><strong>Healthy Start</strong> - standardized continuum of universal to enhanced perinatal, child and family public health services.</td>
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<td><strong>Collaborative Practice Protocol</strong> for Pregnant Women At Risk and Infants At Risk in Vulnerable Families</td>
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<td><strong>Nurse-Family Partnership (NFP) Program</strong> for young, first-time expectant, low income women in BC.</td>
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<td>• Health authority prenatal registries</td>
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<td>• Pregnancy and parenting support</td>
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<td>• Breastfeeding support</td>
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<tr>
<td>• Perinatal depression screening and support</td>
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<td>• Growth monitoring and referral pathways</td>
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Maternal and child health

- Primary Maternity Care Action Plan (*in draft*)
  - Proposed collaboration on perinatal depression, and breastfeeding,
  - White paper on collaboration between PH and PHC
- Maternity clinics (e.g., VIHA)
- High-risk wrap-around initiatives (e.g., VIHA)
- DIGMAs for prenatal patients in partnership with NHA PH nurses and primary care practices (e.g., NHA)
Chronic disease

• Common components of prevention and management are:
  • Healthy eating
  • Physical activity
  • Smoking cessation

• E.g. from NHA working with providers to develop tools for physician teams to use in addressing upstream risk factors
System supports

- Engagement
  - Both HFBC and IPCC looking to work with local government and NGOs like Heart and Stroke

- Community profiles
  - Opportunities for alignment, using data for change

- Information systems linkages
  - Immunization repository

- Policy
  - Privacy
Health system redesign (NHA example)

- PH analysis of services it would be helpful to have physician support
- Functional mapping of program areas like PH, MH&A, H&CC
- Use maps at community level to explore opportunities for seamless care
- Working groups to work through detail of ties to primary care homes
- 3 prototype communities
Approaches to health system redesign: Horizontal vs. Vertical

- Reliance on vertical approaches can create disconnected pockets of excellence amidst the larger system.
- Emphasis on horizontal approaches can lead to health systems that neglect the vulnerable and hard-to-reach.

A mix of horizontal and vertical approaches mitigates these risks, and can drive innovation and strategic change to ensure an efficient and sustainable health system.
The Diagonal Approach & Treatment as Prevention

Monitoring and Evaluation

Mental Health & Substance Use
Primary Care
Public Health
Community
Tertiary Care

Specialized provincial structures to address disease

STOP HIV Goals

Information Management/Information Technology, Human Resources, Quality Assurance

Essential Health System Elements
Tripartite Strategy Table for Public Health and Primary Care

- Developed a quality improvement charter
- Work plan in development
- Planning committees:
  - Healthy lifestyles and wellness
  - Communicable disease
  - Injury prevention and response
  - Physicians and allied health
Public Health and Primary Care Collaboration

- Multiple opportunities for collaboration
  - System
  - Organisation
  - Interpersonal
Questions?

- Where should we invest in the future?
- What are the gaps in the current initiatives/work?
- Who is missing from the conversation?