

# Windsor-Essex Ontario Health Team

## Communique #1

August 21, 2020

The Steering Committee for the developing Windsor-Essex Ontario Health Team is pleased to announce that our community will be moving forward with a full application to establish our Year 1 implementation plan by invitation from the Ministry of Health. This is exciting news as we look to join the 46 other communities in Ontario who have begun this transformation initiative.

As the application will be due for submission by **September 18, 2020**, there are next steps that our coalition of health and social service providers will need to play close attention to in order to meet this very aggressive timeline.

### MOH Direction for Year 1 Implementation

The Ministry is encouraging aspiring OHTs to focus their year 1 planning on COVID-19 related populations and/or initiatives. With an anticipated 2<sup>nd</sup> wave of the disease, the MOH will be seeking both a preventative and reactive approach to coordinate care and a system response for a focused population based on risk – and that includes an equity approach for priority populations.

### IMS Partnership

While 2020 has been a difficult year, a positive element has been the way our community of health and social service providers have galvanized as a system in response to COVID-19. This has been demonstrated by the leadership and participation in the *Incident Management Structure (IMS)*.

By working collaboratively to build off of the existing IMS work we can achieve our goals without duplicating efforts in year one. This is a direction supported by the IMS leadership and endorsed by our Steering Committee. Using this strategy, we will be building a proposed implementation plan that is integrated with the IMS for our Year 1 plan, with the explicit direction that strategy and implementation transition entirely to the OHT and its collaborative structures for year 2 and beyond.

### Year 1 Target Population

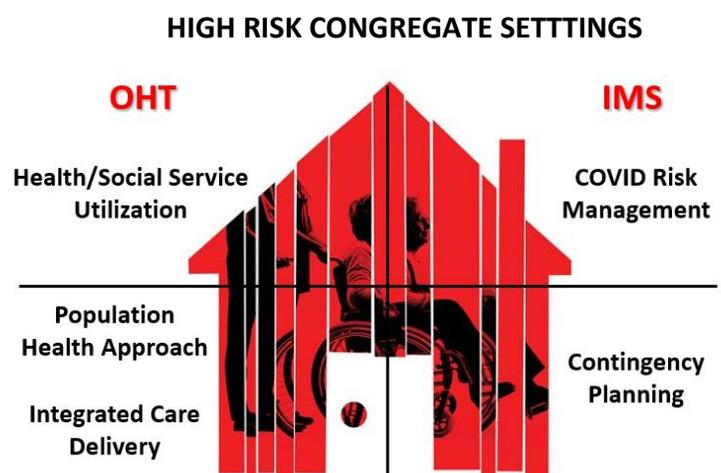
A year 1 focus has been established in partnership with the IMS that represents a significant risk and opportunity for our system through the lenses of COVID-19 risk management, and taking a population health approach in integrating care for complex patients. High risk congregate settings will be the focus of activities in year 1 to build and demonstrate our capabilities as an OHT. Identifying the exact settings and populations of focus will be achieved through a risk analysis that fuses a COVID-19 mitigation, population health, utilization, and priority population focus with an assessment of optimal OHT learning environment (e.g. circle of care, patient and family engagement capacity, etc).

To inform this work, we are asking OHT partners to fill out the online survey at the following [link](#), **by end of day on August 26th**. The survey focuses on what is currently or will be in place to support congregate living, and/or other related considerations for our plan.

The plan that will be assembled will express our commitments and processes to achieve aims at a high level. The details of what change initiatives will be developed to support our plan will be completed in the initial stages of implementation.

### Milestones

- **Engagement/Analysis/ Writing:**  
August 20 – 31, 2020
- **Draft Application Review: Steering Committee:**  
September 2, 2020
- **Draft Application Review: Partnership Council:**  
September 3, 2020
- **Issuing of Final Draft Application - For Member/Board Endorsement:**  
September 8, 2020
- **Submission of Partnership Council Endorsement Letters**  
September 16, 2020
- **Approval and Sign-off by Steering Committee**  
September 16, 2020
- **Submission of Application to MOH**  
September 18, 2020



## **Collaborative Decision-Making Arrangements (Year 1 Plan)**

In July, 2020, the MOH released '[Guidance for Ontario Health Team: Collaborative Decision-Making Arrangements for a Connected Health Care System](#)'. The document represents an evolution in the learning and expectation of what OHTs are to aim for in developing agreements and processes for decision-making in OHTs in the initial stages of development. This direction de-emphasizes the prior focus on governance and instead provides a framework to support collaboration and implementation as a system as we build this infrastructure for the future.

As we work on developing and implementing a year 1 population focus, a parallel plan will need be developed to support implementing an OHT structure that aligns with the MOH's framework. During our first year, an emphasis will be on leveraging our current structures with the following role scoping:

### WE-OHT Partnership Council:

- Advisory body to WE-OHT on strategy and implementation
- Coalition for mobilizing action going forward.
- Liaising with Steering Committee sector representatives to provide ongoing feedback
- Enable and drive implementation via working groups for year 2 & 3 priorities (post submission).
- Opportunity to endorse Year 1 plan and submission as a demonstration to the MOH of long-term commitment to transformation in Windsor-Essex.

### WE-OHT Steering Committee:

- Interim direction and signatory with accountability for delivering year 1 outcomes identified in our application
- Sector engagement to inform decisions and disseminate information to Partnership Council and other stakeholders.

### IMS

- Priority setting and implementation for year-one plan
- Required signatories with Board endorsement and responsible for delivery and outcomes for year 1 plan (w/ exception of Ontario Health)
- Support transition of leadership to WE-OHT anticipating year 2
- Ongoing Incident Management System in partnership with WE-OHT

## **Next Steps**

Reach out to your sector representatives if you haven't already been briefed on the work that has gone into our planning up until now. It's important that you attend the **September 3rd** meeting informed and ready to participate. We'll be running on adrenaline by then and could use your positivity to get us across the finish line.

This has been a monumental effort and we thank everyone in advance for their support in moving this work forward on this expedited timeline and for the flexibility in adapting our strategy in the context of COVID-19.

We look forward to receiving your feedback through the attached survey and in our **September 3rd** consultation on the draft plan. Where organizations are comfortable and able to demonstrate their general commitment to the WE-OHT work, **we welcome and will accept letters of endorsement between now and September 16, 2020**. In this regard, your commitment is to supporting the target population, develop of an effective Collaborative Decision-Making Arrangement, and preparedness for year 2 implementation.

Please contact the Steering Committee Co-Chairs, Secretariat Executive Lead, or your sector representatives to inquire about information and support that can be provided to your organization and Board when completing your letter of endorsement.

## **Secretariat**

In-kind support of the Windsor-Family Health Team and Hôtel-Dieu Grace Healthcare has been provided to assemble an interim Secretariat. We are pleased to announce the members of our Interim Secretariat:

- Janice Kaffer Executive lead & MOH liaison HDGH
- Marla Jackson, HDGH Co-Lead (Acting for Terra Cadeau)
- Ron Sheppard, WFHT Co-Lead
- Marina Pokrajac, HDGH Project Assistant
- Lisa DePutter, HDGH Administrative Support

The team will be reaching out to members over the next 4 weeks as they work through the work plan to meet the submission timelines.