COMPASSIONATE NORTH YORK

NORTH YORK TORONTO HEALTH PARTNERS
COMPASSIONATE NORTH YORK

Strategic Plan 2022-2025

Introduction

North York Toronto Health Partners (NYTHP) is pleased to share our first Strategic Plan for creating a strong and sustainable local health system and healthy community.

NYTHP is an Ontario Health Team (OHT), an approach to health care where providers and health professionals coordinate services, engage with patients, families and caregivers, and act as one team supporting people with their health and wellness needs.

NYTHP is one of Ontario's first OHTs, with 21 core members, a Patient and Caregiver Health Council, a Primary Care Advisory Council and over 40 Alliance partner organizations working together to meet the health needs of our communities.

NYTHP's strategic vision was created in 2020. With the participation of patients/clients, caregivers, organizations, staff and volunteers serving North York, the NYTHP developed a **Shared Purpose**, *Compassionate North York*. Together, we embraced Collective Impact – a structured approach to collaboration to address complex challenges and achieve transformational change.

During its first few years, NYTHP played a lead role in the pandemic response – from distributing personal protective equipment (PPE) to frontline workers, to supporting over 60 long-term care and congregate homes with expertise and Infection Prevention and Control (IPAC) resources, leading testing and vaccination for the public, to outreach to vulnerable and diverse groups. During this time, NYTHP became a more connected health system by using digital technology to improve people's access to care and creating new models to support people in their homes and communities, with a focus on seniors, palliative care and mental health and addictions.

In fall 2021, NYTHP further developed the Strategic Plan to respond to the community's post-pandemic needs, using the practical experiences gained during NYTHP's first 1.5 years. The three-year Strategic Plan will be reviewed and updated as needed to adapt to changes in the NYTHP's environment.

Thank you to everyone who has been involved in our journey and in creating our path forward to achieve better health for all in North York.

Who We Are

21 Core Partners

Primary Care Association (200+ Primary Care Providers)

~500k population

30+ Alliance Partners

Patient & Caregiver Health Council

Backbone Team

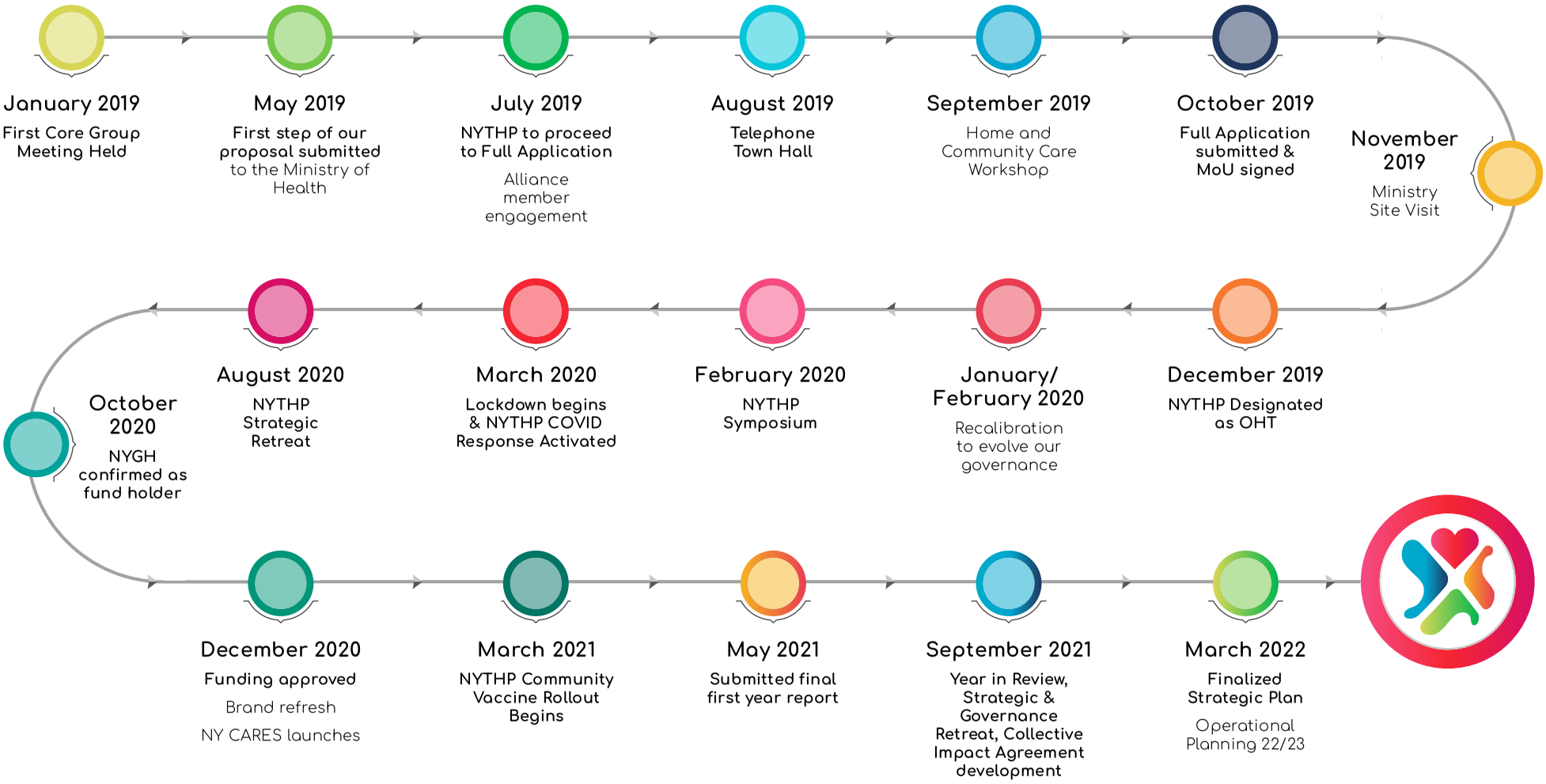
Patient and Caregiver Health Council	Co-Chairs of the Primary Care Advisory Council
Wendy Wu Ron Beleno Rifka Eisenstat Shana Habernam Judy Katz Kim Leung Leela Prasaud Min Wang	Dr. Rebecca Stoller, Co-Chair Dr. Maria Muraca, Co-Chair Council represents the Primary Care Association Members

Core Partners - Health care organizations that signed the original MOU

Alliance Partners - Health and social care organizations that partner on specific initiatives

Backbone - Team from NYTHP organizations that supports the work of our OHT

www.northyorktorontohealthpartners.ca


January 2019
First Core Group Meeting Held
May 2019
First step of our proposal submitted to the Ministry of Health
July 2019
NYTHP to proceed to Full Application
Alliance member engagement
August 2019
Telephone Town Hall
September 2019
Home and Community Care Workshop
October 2019
Full Application submitted & MoU signed
November 2019
Ministry Site Visit
December 2019
NYTHP Designated as OHT
January/ February 2020
Recalibration to evolve our governance
February 2020
NYTHP Symposium
March 2020
Lockdown begins & NYTHP COVID Response Activated
August 2020
NYTHP Strategic Retreat
October 2020
NYGH confirmed as fund holder
December 2020
Funding approved
Brand refresh
NY CARES launches
March 2021
NYTHP Community Vaccine Rollout Begins
May 2021
Submitted final first year report
September 2021
Year in Review, Strategic & Governance Retreat, Collective Impact Agreement development
March 2022
Finalized Strategic Plan
Operational Planning 22/23

Our Shared Purpose

We are a compassionate community of providers, patients, caregivers and residents who are committed to promoting health, wellbeing and positive experiences for all.

Together we are building from our strengths both individually and in partnership. We are igniting the power within each of us to support meaningful change for our community, now and into the future.

COMPASSIONATE NORTH YORK

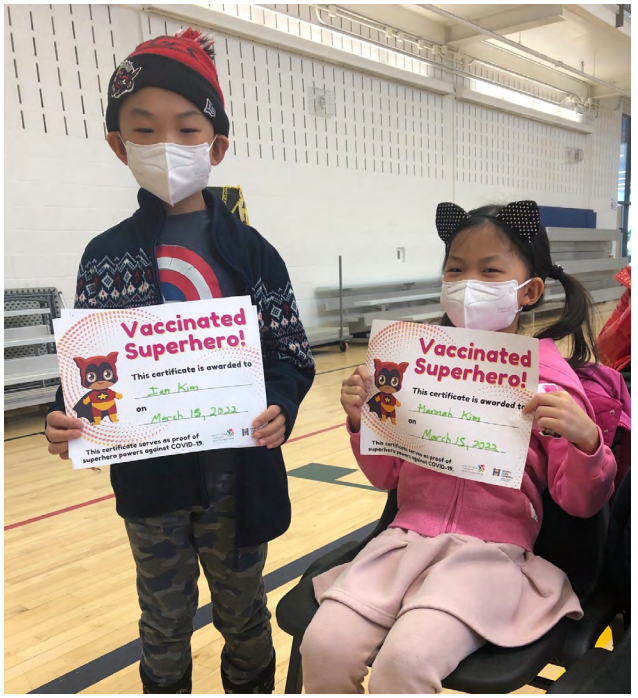


Photo courtesy of North York Mirror

Our Guiding Principles

Commitment to shared purpose and improvement within our system	Distributed leadership, shared responsibility and organization or individual resources	Coordinated and collaborative action across the NYTHP community	Driving innovation	Commitment to diversity, inclusivity and equity
Our community (patients, caregivers, residents, providers) are at the centre of co-designing the future of care.	We acknowledge that a single organization or individual cannot advance change alone. We all have a part in advancing change and sharing the assets within our community.	Through deepening the relationships and trust across our community, we aim to be connected, coordinated and collaborative within our efforts.	We are shifting our mindsets, behaviours and the ways we work to support and accelerate change. We are open to thinking outside of the box.	All voices matter. Not everyone can access services easily and there are power imbalances. By working with affected communities, we can reduce barriers and enable all people to access the care they need.

The Five Conditions of Collective Impact*

Common agenda	Shared measurement	Mutually reinforcing activities	Continuous communication	Backbone support
Participants have a shared vision for change including a common understanding of the problem and a joint approach to solving it through agreed upon actions.	Collecting data and measuring results consistently across all participants ensures efforts remain aligned and participants hold each other accountable.	Participant activities must be differentiated while still being coordinated through a mutually reinforcing plan of action.	Consistent and open communication is needed across the many players to build trust, assure mutual objectives and create common motivation.	Creating / managing collective impact requires a separate organization with staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organizations and agencies.

*https://www.collectiveimpactforum.org/blogs/1301/collective-impact-principles-practice-putting-collective-impact-action

Our Strategic Goals for 2022 – 2025

LEAD our collective strategy to respond to urgent community needs, such as pandemic response and recovery, and realize greater value through integration, transformation and advocacy.

DEVELOP collective governance and operational structures and capabilities to accelerate integrated care and build strong teams for a healthy and sustainable future.

ENGAGE patients, caregivers, staff, partners and communities in NYTHP's work to understand and improve people's experiences and health.

ADVANCE population health outcomes through improving health equity and prevention and leveraging digital technologies.

Strategic Goals and Objectives

LEAD our collective strategy to respond to urgent community needs, such as pandemic response and recovery, and realize greater value through integration, transformation and advocacy.

- Continue to deliver an integrated pandemic plan to protect and support North York.
- Formalize our pandemic response practices and create a master system playbook for other urgent situations.
- Lead an integrated recovery and transformation plan for NYTHP providers and the population, in alignment with OH/MOH direction for OHTs, including addressing care and service gaps.
- Develop a common understanding of systemic challenges, with a focus on Health Human Resources (HHR) to inform local solutions and broader policy changes.

ENGAGE patients, caregivers, staff, partners and communities in NYTHP's work to understand and improve people's experiences and health.

- Implement and embed a patient, community and partner engagement strategy and framework.
- Embrace the Patient, Family and Caregiver Declaration of Values for Ontario and advance and monitor its implementation within provider organizations.
- Build the capacity of all parts of the NYTHP – and work in collaboration to engage our patients, caregivers, staff, partners and communities.
- Develop skills and tools to enable co-design across NYTHP and embed in our work.
- Apply the patient, community and partner engagement framework to strengthen our network of partners (health, social care patients, caregivers and communities).

ADVANCE population health outcomes through improving health equity and prevention, and leveraging digital technologies.

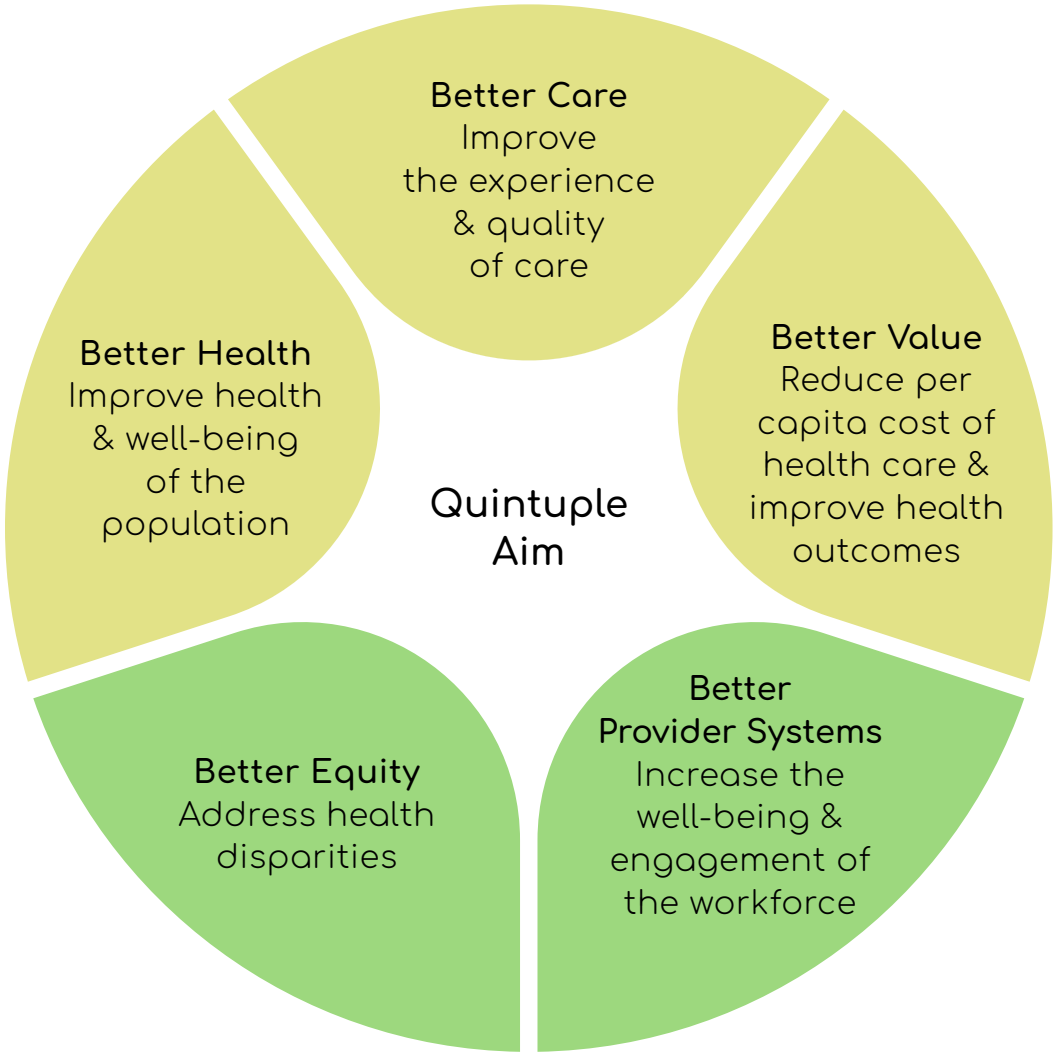
- Understand our population, and develop evidence-informed strategies to remove barriers and inequities (using data and quantitative and qualitative information from engagement and experience analysis).
- Address health inequities, focusing on identified populations/communities using culturally safe and appropriate approaches.
- Create the foundations and structures for a population health approach, including evaluation and leveraging digital health tools.
- Build and deepen our partnerships to advance an integrated health and social system that supports people to live healthy and full lives.

DEVELOP collective governance and operational structures and capabilities to accelerate integrated care and build strong teams for a healthy and sustainable future.

- Enhance the way we make decisions, operate and do our collective work.
- Achieve better strategic alignment and collaboration across the NYTHP and its parts.
- Build the foundations for NYTHP's evolution – including processes, guideline, tools, digital and information systems, communication channels, education and training.
- Measure and share progress on our strategic goals and indicators.

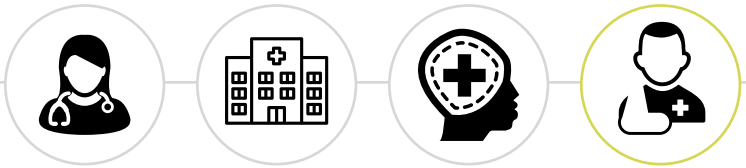
Ontario's New Approach to Integrated Care

Quintuple Aim



Adapted from IHI's Quintuple Aim

Ontario Health Teams



Individuals receive all their care, including primary care, hospital services, mental health and addictions services, long-term care, and home and community care from **one team**.

How Health Care Will Feel

"I started getting palliative care immediately after I was diagnosed with dementia because I wanted to live my life as fully and comfortably as possible."

"I transition easily between care team members and sites of care."

"I provide feedback on experience and outcomes that is used to improve care delivery."

"I have 24/7 access to navigation resources to help access the care I need."

"I am automatically enrolled in an OHT and I have flexibility to move between OHTs."

"I am proactively engaged with my care team for routine screening and preventative care."

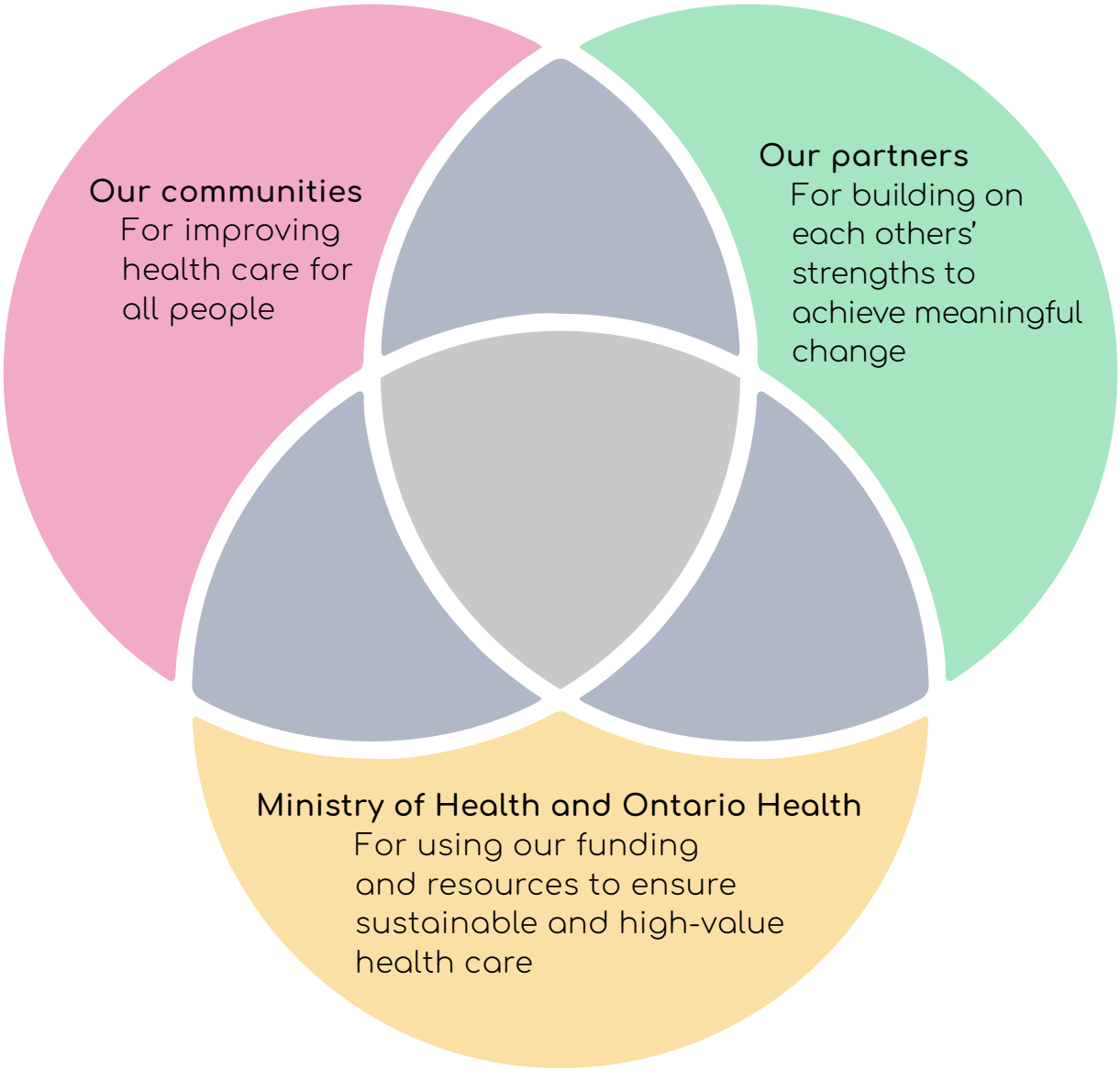
"I feel empowered because I have access to my information, care plan and self-care resources and tools."

"My health condition has improved because of the care I am receiving."

Graphic adapted from Ontario Health

Our Accountabilities

NYTHP is accountable to our communities, our partners, the Ministry of Health, and Ontario Health.



Measuring Our Success

NYTHP is accountable for improving the performance of the health system and the quality of care. We measure our impact on:

- Improving patients' access to care in the most appropriate setting (as measured by Alternate Level of Care days)
- Increasing access to community mental health and addictions services
- Enhancing preventative care with a focus on cancer screening

NYTHP's focus has been on three priority populations identified when originally planning our OHT – **seniors, mental health and addictions and palliative care**.

What is Palliative Care?

Palliative care is a holistic approach to maximizing one's quality of life that can be accessed as soon as a life-limiting diagnosis is received.

Who do we serve?

Our population includes people who live in the NYTHP geography (see map) and people who are part of our "attributed population".

Geographic population

It is crucial that NYTHP understands and meets the needs of everyone who lives in our communities, including those who are not well-served by the health system such as people without a primary care provider.

By understanding and designing services with and for people living in a geographic area, we can address health inequities. For example, by understanding the barriers different people encounter accessing local services, and shining a light on the impact of "social determinants of health" such as lack of housing, employment and food.

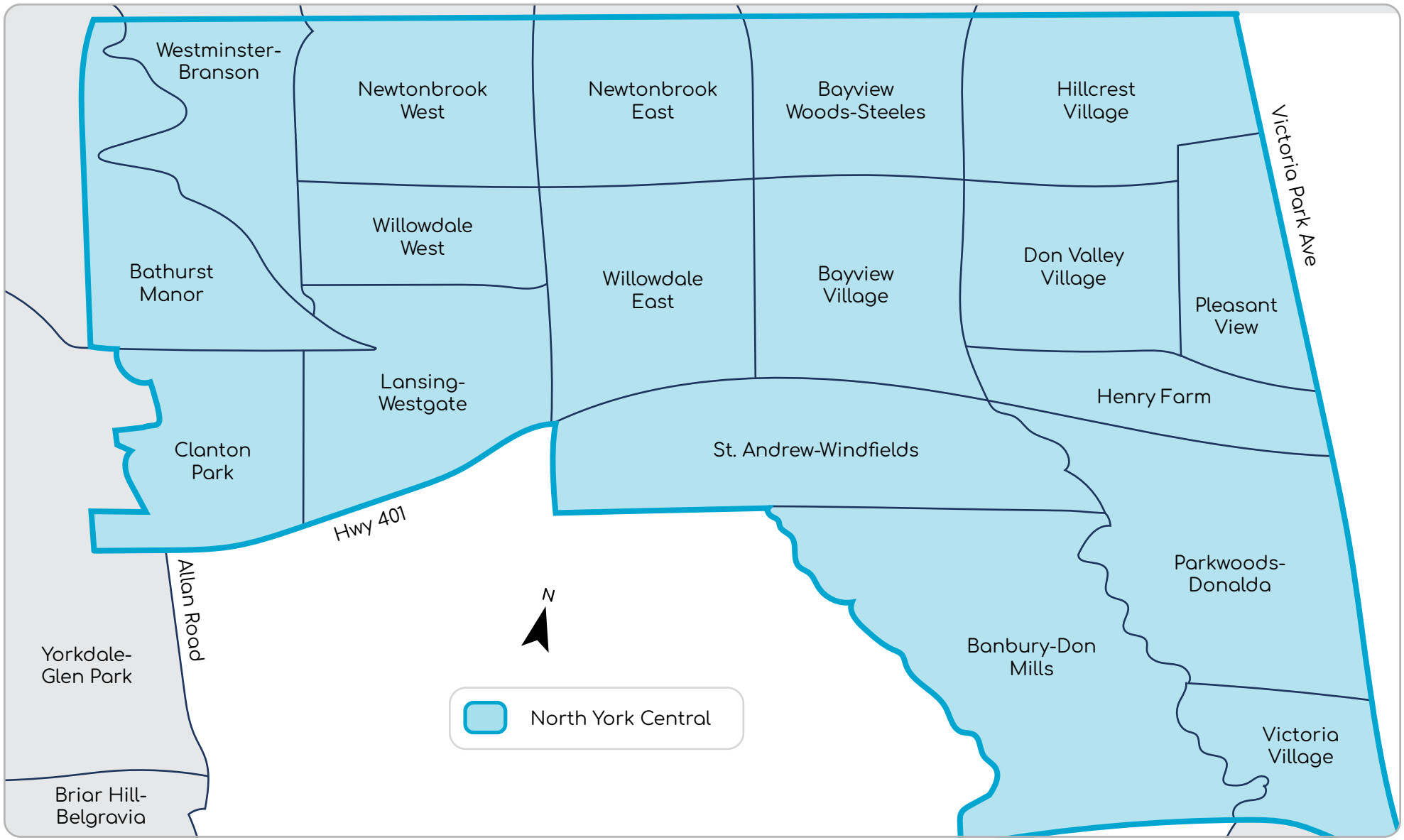
Attributed Population

Health care organizations serving North York also support people who live outside our geographic area, and we know people's health is influenced by more than their postal code. Patient attribution is not based on where one lives, but rather on where they access health care. For example, some people do not live in North York, but work in and receive care in North York, close to their workplace. Where people receive primary care (e.g., enrollment in a Family Health Team) is the starting point for assigning patients to an Ontario Health Team.

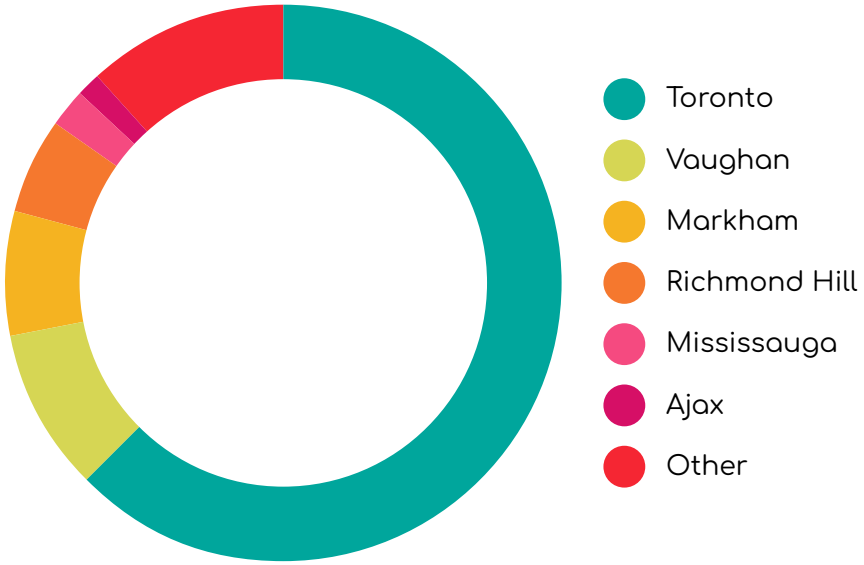
NYTHP determines its populations considering both where people reside and where they receive primary care. For example, the COVID-19 vaccination was delivered geographically and within neighbourhoods.

For accountabilities, such as the Collaborative Quality Improvement Plan, we are required to improve outcomes for our attributed population.

North York Toronto Health Partners Geographic Area



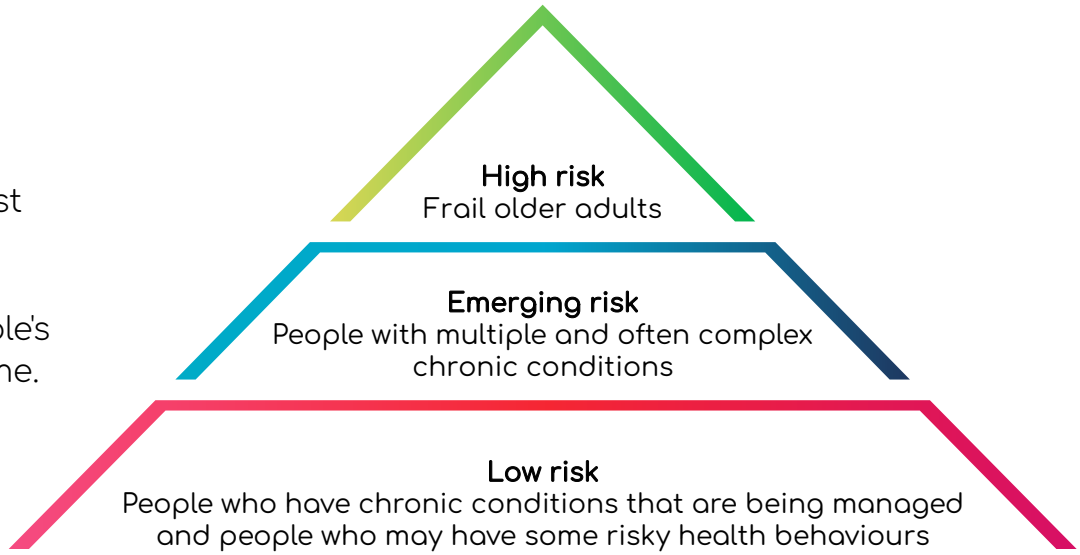
NYTHP's Attributed Population



Community	Attributed Population	% of OHT population
Toronto	311,409	62.7
Vaughan	46,678	9.4
Markham	34,979	7.0
Richmond Hill	28,935	5.8
Mississauga	10,019	2.0
Ajax	6,775	1.4
Other	57,670	11.6
Total	496,474	

*Note: Toronto includes all of Toronto, not only North York General. **Data is from 2016-2018

Population health must address each level of complexity and risk, recognizing that people's needs change over time.



For **more** information, contact nythp@nygh.on.ca
or visit northyorktorontohealthpartners.ca

NORTH YORK
TORONTO
HEALTH PARTNERS
COMPASSIONATE NORTH YORK