The Grey Bruce Ontario Health Team

"**Working** toward a better healthcare experience for **you** close to **home**."

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Grey-Bruce
OHT

HOSPITALS AND ACUTE CARE ARE THE ROOF AND STRUCTURAL BEAMS

Essential and highly visible components that provide protection and intensive support when things get serious. But they rely on the foundation (OHT) and walls (other providers) to function well.

PRIMARY CARE, COMMUNITY SERVICES, HOME CARE, MENTAL HEALTH, AND SOCIAL SUPPORTS ARE THE WALLS, WINDOWS, AND DOORS

They provide day-to-day comfort, accessibility, and protection, and they're where most people enter, live, and interact with the system.

PATIENTS AND CAREGIVERS ARE THE PEOPLE LIVING IN THE HOUSE

Their needs determine how the house should be built, maintained, and improved.

THE OHT IS THE FOUNDATION OF THE HOUSE

it supports and connects everything, ensuring the entire structure (health system) is strong, stable, and coordinated.

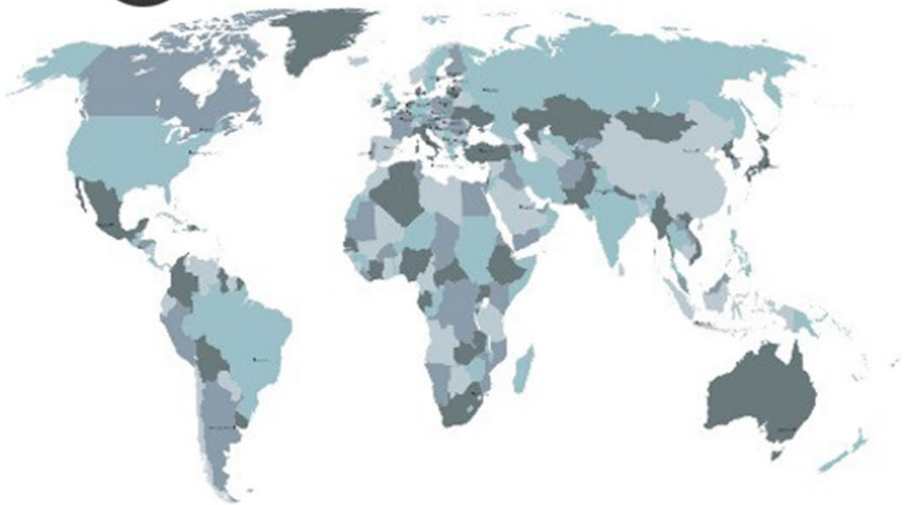
Analogy emphasizes that while hospitals are essential, the OHT provides the structure that makes integrated, seamless care possible, ensuring all the parts work together to support the individual health experience.

Support a shared vision through alignment of strategic objectives across partners → collaborative governance, agreement on how we will work together, shared strategic direction and priorities with individual operating plans.

Partners and Affiliates

Integration is a Worldwide Movement For Population Health and Wellbeing *Quintuple Aim Health Systems Are Converging*

Health systems around the world are converging on their aims but differ on their 'how to' and the stage of implementation.



The most pressing areas of focus continue to come together all over the world for health care improvement: integration and co-designing with patients/ clients and caregivers.

OHT Priority Areas 25/26

This year's priorities are reflective of OHTs' existing clinical areas of focus and demonstrate a de-emphasis of structural deliverables.

Priority Area 1: Primary Care Access, Attachment and Enablement

- Lead the development of new interprofessional primary care team proposals
- Facilitate attachment of patients registered with the Health Care Connect Program
- Develop an initial plan to support 100% attachment of local population by 2029
- Implement collaborative initiatives to provide clinical services to unattached patients
- Improve navigation supports, particularly for unattached patients
- Advance digital priorities in support of primary care, including eReferral and OAB
- Increase participation in cancer screening including supports for unattached participants accessing screening and follow-up services in collaboration with the Regional Cancer Program
- Continue advancing a Primary Care Network (including a Primary Care Network Clinical lead)

Priority Area 2: Integrated Clinical Priorities

- Develop and implement a plan to advance community-based care for individuals at risk of living with chronic disease to support primary care and reduce hospital use
- Develop and implement an ALC action plan aligned to OH regional ALC planning that identifies the greatest opportunities for ALC prevention and management
- Note: The initial 12 OHTs will continue to advance additional expectations related to chronic disease prevention and management, including COPD and CHF. As well, the OHTs already involved in implementing Integrated Clinical Pathways and Home Care Leading Projects will be supported to continue this work.

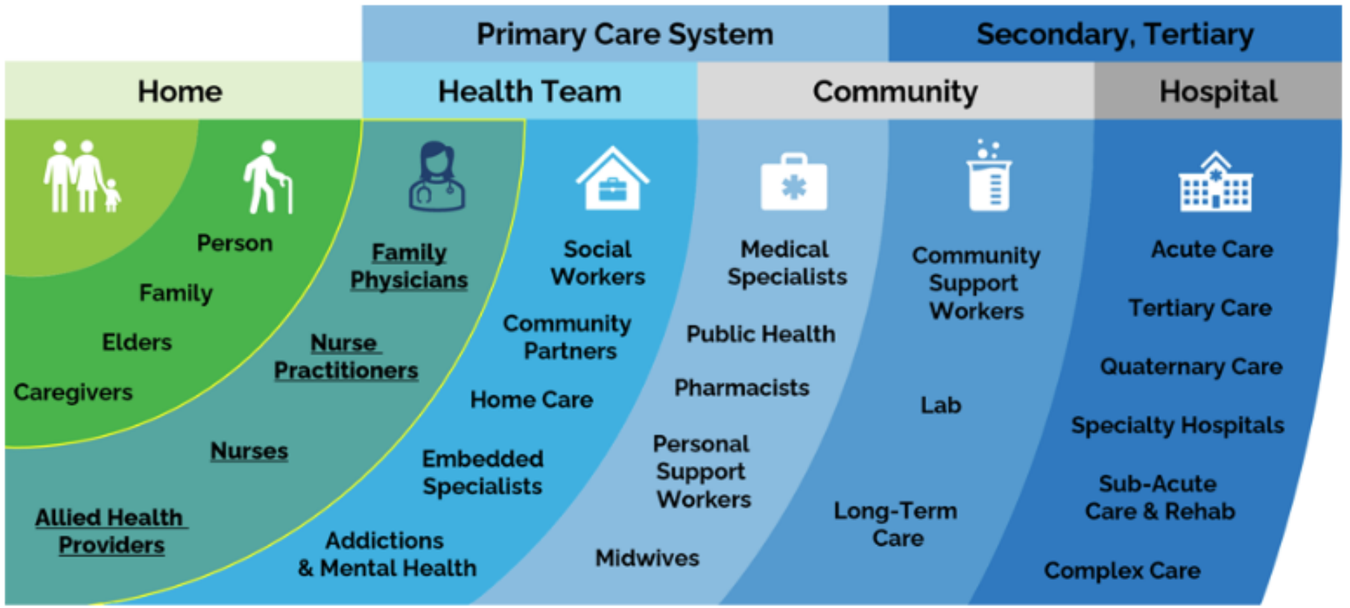
Notes:

- OHTs will also continue to advance work in OHT membership, equity and patient, family and caregiver engagement (**Priority Area 3 – OHT Capacity Building**)

Ontario's Primary Care Action Plan

Connecting every person in Ontario to primary care

Mandate: 100% of people in Ontario are attached to a family doctor or a primary care nurse practitioner working in a publicly funded team, where they receive ongoing, comprehensive, and convenient care.



Ontario's Primary Care Action Plan

Primary care: right care, right place, right time

- Primary care is the model of care that supports first-contact, comprehensive, coordinated, convenient, and person-focused care.
- Health systems with robust primary care systems have **better health outcomes, lower health care costs**, and **more equity.**
- By providing care in the community, primary care **reduces reliance on costly parts of the system** such as emergency departments and hospitals

Ontario's Primary Care Action Team, led by Dr. Jane Philpott, will implement a **Primary Care Action Plan** supported by the government's historic investment of $1.8 billion to connect two million more people to a publicly funded family doctor or primary care team within four years, which will achieve the government's goal of connecting everyone in the province to a family doctor or primary care team

Impact of primary care: by the numbers

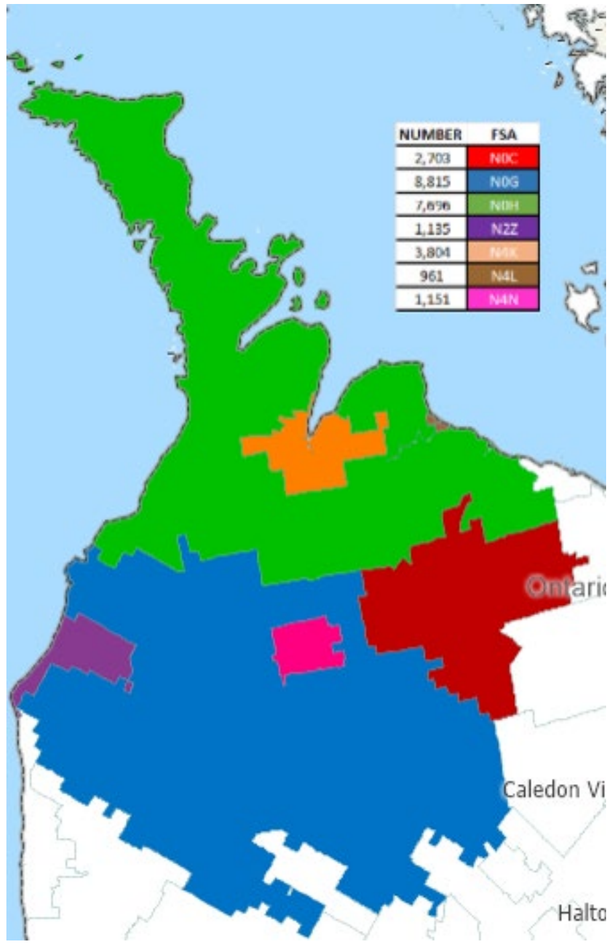
- **Primary care visits are 33% of the cost** of a visit to an emergency department (Ontario)
- **36% fewer emergency visits** when connected to primary care (Quebec)
- **29% more likely to be hospitalized** when poor access to primary care (Alberta)

The Action Plan will help implement a broad series of initiatives in collaboration with primary care leaders and health system partners across **three pillars:**

- Connecting You to a Primary Care Team
- Making Primary Care More Connected and Convenient
- Supporting Primary Care Providers

Grey Bruce Primary Care Landscape

- Total Attributed Population 234,713
- Number of Unattached 26,265 (11.2%)
- Number on Health Care Connect 5437 (2.3%)
- 7 FSAs
- 108 Family Doctors , 28 Nurse Practitioners Associated with Primary Care
- 72% Family Doctors Associated with Team Based Care
- 6 Family Health Teams (FHTs), 1 Community Health Centre (CHC), 1 Aboriginal Health Centre, 1 Indigenous Primary Care Health Organization
- 4 Medical Clinics without Team Based Care



IPCT Expansion Proposals

Round 1

- Targeted call for proposals due May 2nd by 5:00 PM (announced April 10th)
- Funding decisions announced Summer 2025
- Primary care practices and clinicians providing care to people living in identified postal codes are invited to submit proposals through the OHT and PCN
- Identified postal codes are based on the highest number of people not currently attached to primary care
  - GBOHT invited to submit proposal for:
    - N0G
    - N0H

Round 2
Sept. 2025

Role of OHT and PCN

- Lead local efforts to support primary care practices, family doctors, nurse practitioners and other primary care clinicians to identify attachment gaps within their identified postal codes and coordinate and submit proposals that will help achieve ongoing attachment to regular primary care clinical for their local population over time.
- Responsibilities:
  - Communications
  - Coordinate and support proposal development
  - Proposal Submission

N0H Proposal Summary

Lead Organization

- Kincardine Family Health Team

Listed Organizations

- Kincardine Family Health Team
- Peninsula Family Health Team
- Meaford and Thornbury FHO (future Grey Highland FHT)

Municipalities Supported

- Northern Bruce Peninsula
- South Bruce Peninsula
- The Town of Blue Mountains
- Meaford
- Chatsworth
- Saugeen Shores
- Arran-Elderslie

Proposed Net New Attachment at Full HR Complement

- 9600

Number of currently attached patients who will gain access to Team Based Primary Care

- 24,843

N0G Proposal Summary

Lead Organization

- Brockton and Area Family Health Team

Listed Organizations

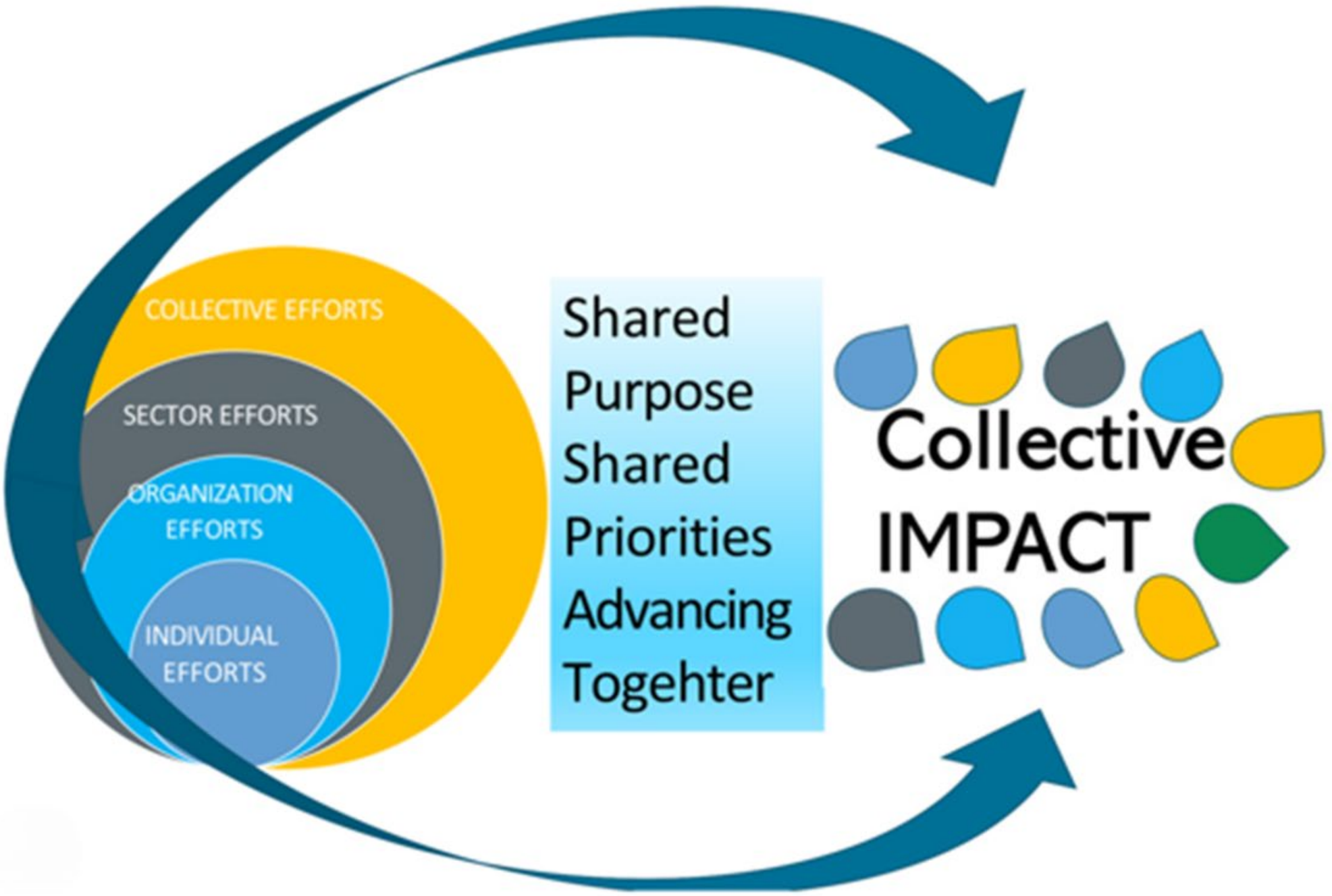
- Brockton and Area Family Health Team
- Kincardine Family Health Team
- Hanover Family Health Team
- Mount Forest Family Health Team
- Upper Grand Family Health Team

Municipalities Supported

- Ayton, Elmwood, Neustadt
- Durham
- Brockton, Chesley, Paisley, Mildmay
- Ripley, Tiverton
- Huron Kinloss
- Mount Forest*GWOHT
- Arthur*GWOHT
- South Bruce, Morris-Turnberry, Ashfield-Colborne*HPA OHT

Proposed Net New Attachment at Full HR Complement

- **8000**


COLLECTIVE EFFORTS
SECTOR EFFORTS
ORGANIZATION EFFORTS
INDIVIDUAL EFFORTS
Shared Purpose
Shared Priorities
Advancing Togehter
Collective IMPACT

Thank you.
Merci.
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To learn more about the Grey-Bruce OHT or how your organization can become involved, please contact **lajohnston@Brightshores.ca**