

G&A OHT Supplementary - TABLE 2.8 - Services Intended to be Provided in Year 1

SERVICE	PROPOSED FOR YEAR 1 <i>Select Yes/No from dropdown list</i>	CAPACITY IN YEAR 1 <i>How many patients can your team currently serve?</i>	PREDICTED DEMAND IN YEAR 1 <i>Of year 1 population, how many patients are predicted to need this service?</i>	DESCRIPTION
Interprofessional team-based primary care				<p>Palliative: Primary Care at Home Team will deliver primary palliative care and includes Registered nurses, Social Workers with access to MDs, Nurse Practitioners, Registered Dietitians and Home & Community Care resources.</p> <p>Mental Health & Addictions: See MH&A Row below; The G&A OHT recognizes that MHA issues span across the full range of healthcare services, which contributed to the G&A OHT's decision to focus on 'tiers' of mental health / addiction issues rather than identifying the target population by diagnosis or by use of any one specific service. While this allows for a more comprehensive, inclusive and integrated approach to service, it does pose challenges around quantifying current system capacity in the absence of a system-wide mechanism to collect such metrics. For this reason, among others, the G&A OHT will provide a full range of services to individuals struggling with mental health and / or addiction issues by creating IPCT's (as described in MHA row) and by inviting other specialized and contracted services, such as those listed above, to participate in an IPCT for individuals struggling with Tier 3 – 5 mental health and addiction challenges. Additionally, the G&A OHT will take steps in year one to create a single MHA patient registry, with the goal of identifying true population need and service use patterns in order to provide better care and assess system capacity/efficiency.</p>
Physician primary care				<p>Palliative: Family Health Teams, Community Health Centres, Hospice Palliative Care MDs, Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.</p>
Acute care – inpatient				<p>Palliative: Hospitalist, specialists, RNs/RPNs, therapists will be educated and supported to identify patients who would benefit from a palliative approach to care and/or serious illness conversation (SIC) and how to deliver a palliative approach to care (SIC) Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.</p>
Acute care – ambulatory				<p>Palliative: GP Oncologists x 2, chemo nurses, SW Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.</p>
Home care	Yes	6,500	6,500	<p>Palliative H&CC SPO Nursing teams, spiritual care, palliative NPs, HPC physicians, Social Work, Occupational Therapy, Physical Therapy, Speech Language Pathology, Registered Dietitian, PSWs, e-shift, palliative care coordinators. Community based palliative care teams, including hospice and other organization providers, incl. nursing, physicians, therapy and PSWs provide holistic care within the 8 domains of palliative care including use of virtual technology See Appendix A - LHIN CCs will be integrated into existing PC teams as teams explore how to best integrate the functions of care coordination across the IPCT. Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.</p>
Community support services				<p>Palliative: Social engagement support via Hospice-supported volunteer offered to existing and new seriously ill patients. Continuation of existing community support services and Hospice volunteer services. *integration of community services into palliative community care team – shared platform for sharing information; access to 24/7 seriously ill call line; access to Integrated primary care team for wrap around service. Bereavement support for broader population of caregivers/family. Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.</p>
Mental health and addictions	Yes	750* *Estimate generated using the G&A total population of 160,000, combined with Dr. B.Rush's national population estimates for Tier 3 (6.1%) of 12,200 rostered FHT patients in G&A OHT included in Year 1 pilot	9760** **Estimate generated using the G&A total population of 160,000, combined with Dr. B.Rush's national population estimates for tier 3 (6.1%) of G&A OHT total population of 160,000)	<p>Mental Health & Addictions: IPCT- Tier 3 focus (FHT in collaboration with all OHT partners as well as specialized and contracted services on an as needed basis) Primary care, addictions counselling, mental health counselling, integrated behavioural health consultants, care coordination supports that focus on system navigation and social prescribing, 'primary worker' from the IPCT, specialized and contracted supports as needed; These functions will be provided by existing service providers within our MH&A/primary care system Please see "Interprofessional team-based primary care" row.</p>

Mental health and addictions	Yes	320*** *** Estimate generated using the G&A total population of 160,000, combined with Dr. B.Rush's national population estimates for each tier 5 (.02%); G&A OHT intends to serve 100% of Tier 5 MH&A patients in Year 1	320	Mental Health & Addictions: Rapid Access Health Hub IPCT-Tier 5 (GCHC and Sanguen Health Centre in collaboration with all OHT partners as well as specialized and contracted services on an as needed basis) 7-day / week urgent and walk in access to primary care, psychiatry, and mental health and addictions services including outreach and mobile services, 'primary worker from IPCT to coordinate care clients, virtual care visits, other specialized and contracted services as needed; These functions will be provided by existing service providers within our MH&A/primary care system and by the addition of a non-rostered physician at the GCHC to allow for walk-in / urgent primary care provision Please see "Interprofessional team-based primary care" row.
Long-term care homes				Palliative: Serious Illness care will continue to be offered to new/existing LTC residents who have a life limiting illness. Palliative Pain & Symptom Management Consultation team provides palliative expertise and consult to LTCHs. There is an opportunity to consider integration with Older Adult Services for Serious Illness Conversations and delivery of integrated care Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Other residential care				Palliative: Retirement Homes. Palliative NP for RH to support Guelph and area Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Hospital-based rehabilitation and complex care				Palliative: SJHC 10 palliative beds Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Community-based rehabilitation				Palliative: H&CC rehab programs available as needed. Rapid recovery for optimization of patient functioning Mental Health & Addictions: Addictions residential treatment beds. Please see "Interprofessional team-based primary care" row.
Short-term transitional care				Palliative: e-shift used to transition to hospice or LTC. Convalescent care available as needed. RH supporting transition from acute care to home Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Palliative care (including Hospice)	Yes	500	500	Palliative: Hospice Palliative Care Team: NPs, MDs, RNs, Spiritual Care, supportive care workers, Hospice patient and caregiver programs (incl grief and bereavement); 10 bed Hospice residential unit; community wide access to MAiD services Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Emergency health services (including paramedic)				Palliative: On site treatment being initiated. Monitoring support of COPD, CHF patients Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Laboratory and diagnostic services				Palliative: In home bloodwork for house bound patients. Point of Care Ultrasound in community. Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Midwifery services				Palliative: Available in the community but not a requirement for this priority population. Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Health promotion and disease prevention				Palliative: Serious illness conversations to improve quality of life and identification achievement of person-centred goals of care. Health teaching associated with pain and symptom management. Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Other social and community services (including municipal services)				Palliative: Aesthetic classes for patients receiving palliative care at GGH; peer / lived experience interest groups Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.
Other health services (24/7 Support Service)				Palliative: 24/7 Serious Illness support line. 911 Triage tool (for year 2). 24/7 phone support and access to coordinated care plan for Tier 5 patients through CMHA Here 24/7 service Mental Health & Addictions: Please see "Interprofessional team-based primary care" row.

APPROXIMATE SIZE OF YEAR 1 POPULATION (FROM QUESTION 1.2):	8,070
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