

## D. Developing Regional Program Management

Residents of Southeastern Ontario express a need for improved access. What they often mean is enhancing capacity or providing more service. Access can be improved, capacity enhanced and service increased through better system management of our current regional resources. This is the concept of getting more from what is available. Regional program management is about managing health services, which may currently be managed separately in two or more sites across our region, as one program. It includes services that are delivered in multiple sites and are integrated across the region depending on volumes and availability of resources.

In the context of health care, it is about organizing and integrating capacity from a regional perspective instead of single isolated sites, with the following expected benefits:

- Common standards for care delivery and integration of services across a continuum of care;
- Common understanding of institutional site roles in delivering a regional system of care for specific programs (e.g. cardiac, orthopedics, general surgery, obstetrics, etc.);
- Improved communications between service sites;
- Common referral processes for family physicians and specialists;
- Common transfer protocols;
- Common understanding of return to referral site agreements;
- Joint human resource planning and recruitment across the sites. Clinicians could be hired into the regional program, serving one or more sites, understanding the regional program clinical protocols and the roles of each site component of the regional program.

Regional program management would allow for a clinical and administrative lead to facilitate the development of a common vision and targets, thus improving accountability for service performance across the region. A longer term goal may or may not include regional budgeting of the program. The concept will evolve over the course of the next three years beginning with orthopedic surgery (specifically hips and knees) and cardiac care. In the past two years orthopedic clinicians and administrators have held discussions about the development of a regional surgical program. To date, advancement has been achieved on a model for e-referrals and a common algorithm for assessment and referral (see priority for e-health).

### Objectives:

- To regionally standardize access to and use of selected specialized medical care
- To consider the establishment of centres of excellence for some specialized medical/surgical procedures
- To maximize capacity across the South East health-care system by managing selected services at multiple sites through one coordinated management structure

#### Measures

- ❖ 90% of cardiac by-pass procedures fall within annually defined waiting times
- ❖ Ensure palliative care patients are no longer considered ALC
- ❖ Wait time to see a surgeon (Time 1)
- ❖ Common referral process developed for family physicians and specialists
- ❖ Common transfer protocols developed
- ❖ Common understanding of institutional roles in delivering a regional system of care for specific programs (e.g. cardiac, orthopedics, general surgery, obstetrics, etc.)

### Planned Actions

- ❖ Develop regional program management for cardiac services.
- ❖ Develop regional strategy for end-of-life services.
- ❖ Finalize regional surgical program implementation.
- ❖ Implement integrated management of critical care across all our critical care hospitals.
- ❖ Development and implementation of critical care medium surge capacity plan.
- ❖ Expand the use of integrated back-office services across health service providers.
- ❖ Evaluate the performance of the new 'Surgi-Centre' at Hotel Dieu Hospital and determine potential for future use.
- ❖ Build upon regional efforts for joint human resource planning and recruitment across the region. Develop innovative processes such as hiring clinicians into the regional program, service one or more sites, understanding regional program clinical protocols and the roles of each site within the regional program.