



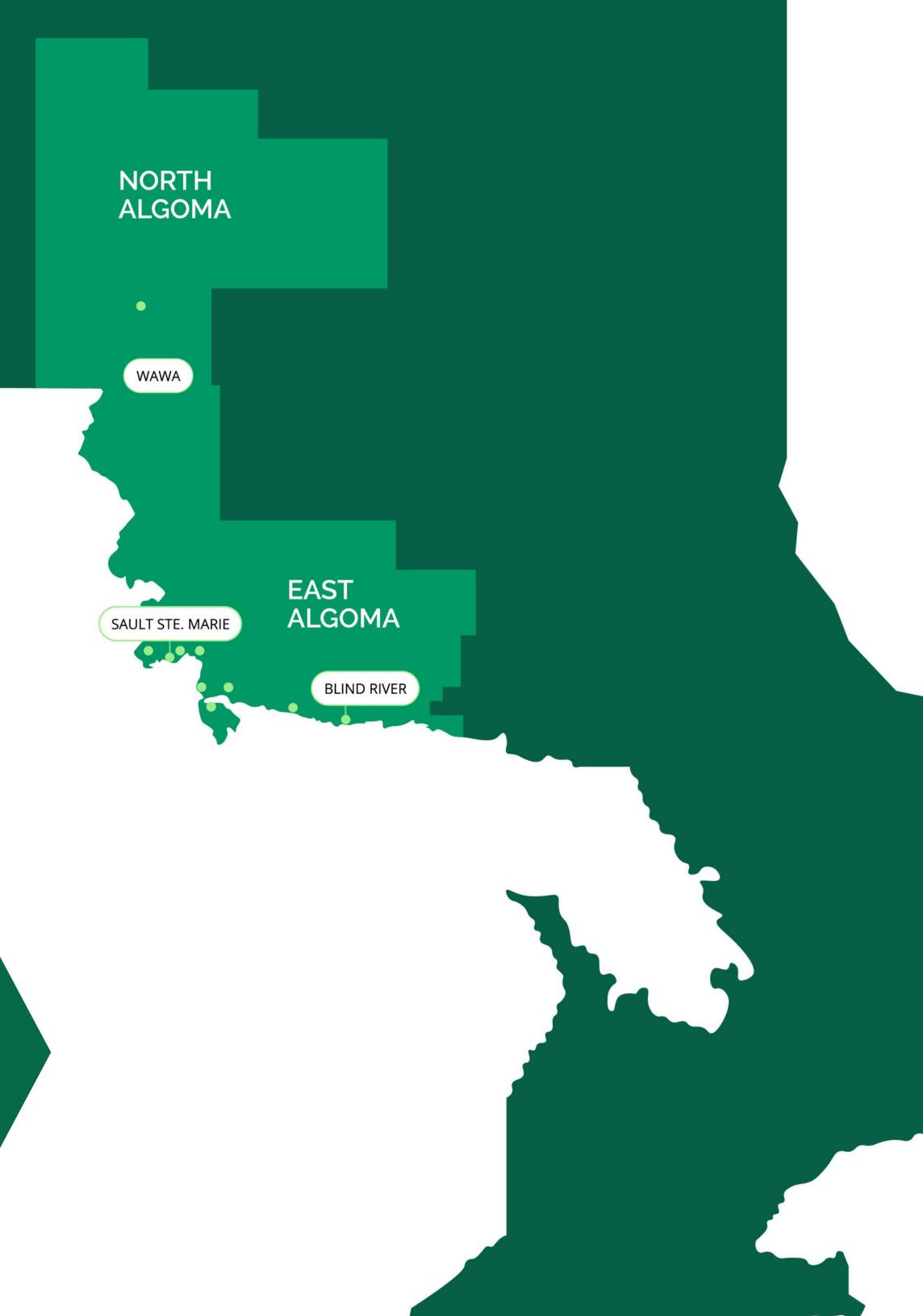
As we look to the future, we want to extend our sincere gratitude to our community for their continued support and dedication to furthering integrated care in Algoma. It is an honour and privilege to serve the residents of Algoma, and we look forward to what the future holds.

LOOKING BEYOND THE NEXT YEAR...

The AOHT continues to look ahead and plan for broad health outcomes to achieve integrated care in Algoma.

As we near a mature state, the AOHT structure may change, but our commitment to local priorities will not waver. During this fiscal year, we will also explore opportunities to improve clinical pathways for the chronic diseases outlined by Ministry of Health guidance.

Ministry of Health guidance has informed the governance and leadership activities listed in the annual plan, which helps the OHT reach a mature state to integrate care in Algoma.



HOW WE WORK



OUR MISSION

The AOHT will collaborate in a model of care that is person-centred, efficient, and simplified for both individuals and providers.



OUR VISION

An integrated health system focused on the unique needs of Algoma residents.



Patient, Family, and Caregiver Declaration of Values

We strive to uphold the following values when providing care:

- Accountability
- Empathy & Compassion
- **Equity & Engagement**
- Respect & Dignity
- Transparency

Principles for Advancing Integrated Care

These principles guide how we work with others to improve Algoma's health system.

- Patient-centred & Culturally Safe
- High Quality
- Universally Accessible
- Community-led
- Strengthens Population
 Health with Primary Health
 Care



Activities

Our 2024 Goals:

At Maturity...

Healthy Aging

- Increase uptake of the coordinated access referral form among primary care providers
- Increase early identification of frailty in primary care.
- Support the implementation of the post-fall pathway into communities and services
- Conduct consultations to ensure the Algoma COVID-19 Pandemic Recovery Plan for Older Adults and their Caregivers reflects 2023 community needs

The following three programs are strengthened and expanded across Algoma:

- Coordinated Access to Geriatric Services
- Early Frailty Identification
- Post-fall Pathway
- Establish a renewed Healthy Aging Strategy

Actively manage health outcomes for the attributed population

Conditions Better Managed in the Community: Complex Chronic Disease

- Bring partners together to conduct a community scan of the current state and opportunities related to complex chronic disease management
- Establish an Advisory Committee

Mental Health and Addictions

- Implement integrated community-based mental health and addiction planning recommendations. Recommendations will have a focus on governance and structure
- Strengthen and increase partnerships within the health system and expand the scope of services provided to bus visitors, including improving access to primary and preventative care

- Identify a priority initiative, and initiate a project to improve clinical pathways for ambulatory care-sensitive conditions
- Develop a multi-year plan to address complex chronic disease needs in Algoma
- Establish a Mental Health and Addictions System Planning Table
- Strengthen and expand the Community Wellness Bus project

Deliver a full continuum of care for all but the most highly specialized conditions

Seamless transitions through the health and social service systems

System Navigation

- Develop an Algoma OHT 24/7 system navigation support platform, coordinating with the provincial digital front door, Health 811
- Support the development of a Mental Health and Addictions Resource Guide/Roadmap for providers and the community
- System navigation supports across priority areas are implemented to improve health system navigation for providers and the community

24/7 coordination and system navigation



Activities

Our 2024 Goals:

At Maturity...

Community Engagement

- Develop and share a roadmap to implement AOHT's Guiding Values and Principles
- Meaningfully engage community voices by forming a Primary Care Patient and Family Advisory Council
- Compile, analyze, and share data from Phase 2 of Caregiver ID from the Caregiver Focus Groups
- Adopt and implement a framework for equity, diversity, and inclusion
- The adoption of the foundational values for care and the principles for advancing integrated care is increased among AOHT partners
- Algoma's primary care delivery priorities are communicated and incorporated into future planning
- Caregiver ID is expanded across Algoma, increasing the recognition of caregivers as an essential part of the care team
- Tangible steps to improve equity, diversity, and inclusion are identified and planned for

Meaningfully partner and engage with community voices to build a health system that is designed by and for the communities we serve

Activities

Our 2024 Goals:

At Maturity...

Digital Health

- Strengthen the Digital Health Committee and Privacy Officers' Community of Practice
- Create a performance-based measurement of AOHT digital health systems across partner organizations
- Develop a work plan on privacy, security, and data-sharing with partner organizations to create an Algoma OHT Privacy Toolkit
- Develop the program design for the Virtual Episodic Access to Care programs for unattached patients in Northeastern Ontario in collaboration with other OHTs
- Knowledge and expertise of digital health champions to advance digital health maturity is leveraged and aligned with Ontario Health's digital health strategy and digital health maturity objectives
- The current AOHT digital health capabilities and performance status of digital health systems are understood
- Implement key objectives in our AOHT Harmonized Information Management Plan (2022)

Digital health solutions support delivery of care, ongoing quality and performance improvements, and patient access to information when and where they need it

Performance Measurement and Evaluation

- Continue to host a series of cervical screening clinics
- Develop and implement a performance measurement framework based on research to measure overall success
- Increase access to preventative screening for unattached patients
- Based on collaborative Quality Improvement Plan (cQIP) indicators, develop indicators that measure AOHT performance

Provide care according to the best available evidence and clinical standards

Leadership, Governance, and Partnerships

- Establish a Board of Directors
- Develop Collaborative Decision-Making Agreements among our partners
- Establish a framework for expanding AOHT membership
- Develop a communications protocol to improve engagement and understanding of AOHT priorities and identification of partners
- Build and strengthen relationships with rural and Indigenous organizations and neighbouring OHTs

- Develop and implement a path to not-for-profit incorporation
- Strengthen the foundation of our OHT through renewed structures, increased involvement, and communication with key stakeholders

Operate through a single clinical and fiscal accountability framework, including an integrated funding envelope based on care needs of attributed population





















F.J. Davey Home





Sault Family Health
Organization





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