Coordinated Seniors Care Initiative: Networking Event

October 29, 2018, 9:00 am. – 4:00 pm. (8:00am Registration & Breakfast)

The Westin Wall Centre, Vancouver Airport – 3099 Corvette Way, Richmond

Goal of Event

• To engage in new collaborative conversations - to share ideas and insights, and identify emerging themes in understanding coordinated care, and how it can be delivered, measured and strengthened.

Objectives

- Establish a consistent understanding amongst the attendees, of the intention and vision of this initiative
- Build greater shared understanding of the definition of COORDINATED CARE focusing on the attributes/principles of coordinated care
- Identify the opportunities to align with other emerging and established initiatives, specifically, with the PCN/PMH work: and how this work supports the SYSTEM of care
- Find innovative ways to increase the engagement of Specialists into the Coordinated System of Care

Background

Recognizing that moderately complex patients require involvement of multiple Specialist physicians, the challenge for providers is to effectively coordinate care for a seamless experience, where the specialist provides consultative, episodic or longitudinal care. Also, for these patients, families are often actively involved in daily care, but not recognized as part of the care team.

The Shared Care Committee's mandate is to provide funding and support to Specialist Physicians, Family Physicians (including GPs with Focused Practice) and other providers to develop patient centered, coordinated models of care as patients move between health care providers and settings. Shared Care's Coordinated Seniors Care Initiative focuses on the population of older adults with multiple chronic conditions including cardiac conditions, COPD, Dementia, Diabetes, Arthritis and others.

The Shared Care Committee is allocating resources for interested communities to better connect Specialist physicians to other providers and family caregivers, to create an integrated approach to health care delivery at the community level.

	AGENDA	
Monday, October 29 th		
8:00-9:00	Registration & Breakfast	
9:00-9:10	WELCOME	Margaret English
	Introduction to the day	
9:10-9:45	Setting the Stage	Valerie Nicol
	PRESENTATION	
	1. High level introduction to the philosophy of engaging Specialist physicians in the	
	PMH/PCN 2. Overview of this Shared Care initiative and goals	
9:45-10:45	NCQA Presentation	Tricia Barrett
	PRESENTATION	
	What has been learned elsewhere	
	 How do you begin doing data-driven population health management (starting with Care Plans) in a region with multiple EMRs/EHRs? 	
	2. How do you influence providers and funders to move to quality-based payment for service?	
10:45-11:00	Break	•
11:00-11:15	Setting the Stage	Brigitte Mettler
	PRESENTATION	
	Doctors Technology Office (DTO) IM/IT Strategy	
11:15-12:30	Coordinated Care	Sue Davis
	SMALL GROUP DISCUSSION	
	Using patient stories submitted by communities as part of the EOI process, we are going to explore gaps and opportunities identified in each for a group discussion.	
12:30-1:15	Lunch	1
1:15-2:40	Coordinated Care	Sue Davis
	LARGE GROUP DISCUSSION	
	Report out on PMH/PCN/SP alignment re issues identified in Patient Stories, create visual summary	
5 min	STRETCH AND MOVE	
2:45-3:00	Collective Impact (CI)	Valerie Nicol
	PRESENTATION	
	Overview and Activity – Define Collective Impact and draft a CI model for your initiative	
3:00-3:35	SMALL GROUP DISCUSSION	Sue Davis
3:35-3:55	Where to Next	Sue Davis
	GROUP DISCUSSION	
	What would be a better name for this initiative?	
	What actions should we be taking from here?	
1.00	How do we continue to connect this work to that of the emerging PMH/PCNs?	
4:00	Closing & Thank You	Margaret English