Pushing The Boundaries Toward A ‘People-Centred’ Healthcare System

Ted Ball

March 26th, 2012

Striving to stay on the leading-edge of healthcare innovation and evidenced-based decision-making, the Association of Ontario Health Centres’ (AOHC) Annual Conference this year (June 7-8th) is being organized around the theme: “People-Centred Care, Are We There Yet?”

Interesting debate. Most people are just starting to talk about “patient-centred care” and Ontario’s Community Health Centre’s are now pushing the envelope to extend to yet another paradigm shift. What is that shift?

Vaughan Glover, President & Co-founder of the Canadian Association For People-Centred Health (CAPCH) says “too often ‘people-centred’ is a term used for its political popularity, with only a vague idea that is means designing our health services delivery system in a fundamentally different way.”

Glover says “people-centred care builds around the reality that the larger healthcare system is already in place as a community – the network of individuals and organizations through which we define our lifestyle, and our individual journeys to maintain our health and our well-being.”

“By contrast”, says Glover, “many organizations implement strategies which try to ‘lock’ the person into their monolithic silos of care via portals, individual electronic records and networks”. He says, “this well-intended but half-baked approach will fail because no single organization can offer everything a person needs.”

Ultimately the goal of “people-centred care” is to enable proactive partnerships. “Its value,” says Glover, lies in the fact that “not only does the demonstrated cost of illness care fall, which it does, but population health and well-being also increase -- and in the long run, total system costs decline.”

Vaughan Glover will be speaking at the AOHC’s Conference on People-Centred Care on June 7th on a panel with myself and Sholom Glouberman, President of the Patients’
Association of Canada -- where our topic is “The Role Of Governance In Promoting Patient-Centred Care”.

Another governance-oriented workshop is entitled “Board to Board Dialogue: Patient/Client-Centred Care Culture Change”. At this workshop Rideau Community Health Services will explain their own governance experience, and facilitate a discussion among participants on the role of governance in promoting patient/client, and people-centred care.

The Conference features Cathy Fooks, the CEO of The Change Foundation, and Stephen Lewis, an expert on the topic of patient-centred care.

A workshop entitled “Nothing For Us, Without Us” being presented by the South Riverdale CHC will focus on the ‘lessons learned’ from an innovative model of chronic disease treatment and prevention. This workshop will explain how an integrated peer support program -- with education & training components -- has improved Hep C treatment outcomes for participants.

Also presenting at the AOHC’s conference is a team from Alaska’s renowned Southcentral Foundation who will explain their Nuka Model of Care – which serves that state’s First Nations communities. They will explain how they achieved dramatically improved health outcomes by applying the concept of “customer-ownership.”

This year’s AOHC Annual Conference will be interesting not only because they are “pushing the envelope” on the concept of “people-centred” – but also because this sector – with its 77 CHC’s across the province -- is on the brink of growth as the McGuinty Government puts the finishing touches on their Primary Care Reform Strategy.

Just this month the Institute of Clinical Evaluative Sciences (ICES) released their long awaited study comparing seven models of primary care in Ontario. The seven models included the blended-fee-for-service model, under the Family Health Groups (FHG’s); the blended capitation model, under the Family Health Networks (FHN’s); a blended capitation model, under the Family Health Organization model (FHO’s); the inter-professional team model (composed of FHNs and FHO’s) under the Family Health Team (FHT’s) -- as well as the multidisciplinary salaried model under the Community Health Centres (CHC’s).

This in-depth study demonstrated why the more holistic and integrated care model offered by the CHC’s is the most effective primary care delivery model – because it is
most effective at keeping people out of hospital emergency departments, and because it serves populations with much more complex needs in a cost effective manner.

Why do CHC’s do the best job? ICES says “possible factors include health promoting services, community engagements, longer appointment durations, the presence of long-established interdisciplinary teams, extended hours, client preferences, provider practice styles, practice location in relation to existing services, and the nature of appointment scheduling. These are each “key issues” if you intend to focus on people.

CAPCH’s Vaughan Glover says that “while progress toward ‘people-centred’ ideas is heartening, in practice, it all too often means the adoption of a poorly defined term -- rather than actually understanding how to implement these ideas to work effectively”. CAPCH believes it is time to move beyond the rhetoric.

Glover says, “unless governments and providers acknowledge today’s modern, web-empowered person and embrace genuine people-centredness, their ‘reforms’ and ‘action plans’ risk further segregating those who seek to serve us, and will remain little more than minor tinkering around the edges of a system in decline”.

“Real system reform means embracing a system model in which the person – supported by skilled and credentialed professionals – works in partnership alongside their trusted network of confidences to support them”, says CAPCH’s President.

Health Minister Matthews’ Action Plan flagged for the health care system that under her watch, there will be a reallocation of resources based on evidence, and that she was going to be “obsessively patient-centred” as reforms are implemented through the LHINs. She said “that means we have to shift spending to where we get the highest value.”

As the CHC’s appear poised for growth, they are learning how they can be truly “patient-focused”, and “people-centred”. If you are interested in how others are applying these concepts, you should register for one or both days of their conference. To find out more about this June 7-8 Conference in Toronto – look at the widget on the right under “People-Centred Care Conference” to obtain the full list of workshops and to register for one or two days.

This looks like a great learning opportunity.

Hope to see you there!