



2023 OHT Impact Fellows Program

Please complete this form to indicate your OHT’s interest in hosting an Impact Fellow.

Interested OHTs are encouraged to [reach out to program staff](#) early on to discuss potential ideas. OHTs may submit more than one project idea in their EOI, but may only host one Impact Fellow at a time.

Please note that submitting an EOI does not guarantee that the OHT will be matched with a fellow. The Program Team will follow-up with OHTs once Expressions of Interest are submitted to confirm necessary details before sharing these with potential applicants via the program website.

1. OHT Name	Western York Region OHT
OHT Location	Richmond Hill, Vaughan, King
OHT Website (if applicable)	https://westernyorkregionoht.ca/
2. OHT Primary Contact	Stefanie Richards
Primary Contact Email	stefanie.richards@mackenziehealth.ca
Are you willing to be contacted by prospective Fellows to discuss projects?	<input type="button" value="Yes"/>
3. Host Mentor	Kim Kohlberger
Host Position / Title	Associate Vice President Continuing Care and Community Integration and Operation Lead of WYR OHT

4. OHT Priority Areas

Western York Region (WYR) OHT was formed in 2019 as an integrated care partnership model to serve residents in the high-growth communities of Vaughan, Richmond Hill and King. With an estimated catchment population of 500,000, the region has a relatively large population of adults 65 years or older, accounting for approximately 1 in every 6 residents. WYR OHT has prioritized medically and socially complex frail older adults given that this population interacts with the health system at several touchpoints and has a high potential to benefit from integrated care services. Another emerging high priority area is mental health and addictions.

5. OHT Goals

There is a significant need and opportunity across Western York Region’s 10 long-term care homes (LTCHs) to improve knowledge and implement strategies related to palliative care. Initiating palliative care earlier has been shown to minimize emergency department visits and hospital admissions, thus improving overall access to care in the most appropriate setting. The goal for WYR OHT in the next year is to evaluate and expand a newly launched train-the-trainer model for strengthening palliative care capacity in long-term care homes through education and support, contributing to the reduction of Alternate Level of Care (ALC) days in hospital.

6. Proposed Projects

The fellow can anticipate being engaged in the evaluation of a discrete project entitled Palliative Care Training and Support for Long-Term Care Homes that was launched in September 2022 by WYR OHT as part of our collaborative Quality Improvement Plan (cQIP) for 2022/2023. With the successful launch of this project across 10 long-term care homes in Western York Region, we will continue to expand the project as part of our cQIP for 2023/2024.

The project addresses the problem that many patients with life-limiting illnesses reside in LTCHs. As with individuals living in other community settings, access to timely and appropriate palliative and end-of-life care should be available to them. Decision-making related to palliative care often occurs in crisis situations due to lack of timely discussions about advance directives and often rests with family members and/or healthcare providers as many residents of LTCHs who require palliative care suffer from dementia and cannot make those decisions for themselves. The implementation of education targeted at palliative care (PC) and end of life care (EoL) is therefore of particular importance for those working in LTCHs. Furthermore, addressing PC and EoL care delivery in LTCHs is essential for the staff to ensure that residents' and caregivers' needs are assessed and met in order to enhance their quality of life. The challenge becomes how to equip and sustain the workforce in LTCHs, where many do not have formal training in these approaches to care and where staff turnover is high.

To meet the goals of this project, a train-the-trainer (TTT) model has been developed. Evidence from the literature suggests that a TTT model has the potential to build and sustain staff capacity to deliver PC/EOL care to the residents of LTCHs and their caregivers. The overall curriculum has been broken down into four relevant topics delivered to each LTCH in the form of four in-person sessions, 1 hour in duration each. The training is delivered by an Educator/Facilitator at each LTCH, in our case a Nurse Practitioner. Each participating LTCH has selected at least two trainers to take part in all four sessions along with selected staff members representing multidisciplinary teams from administration, nursing, recreational program, and others. The trainers from each LTCH will have the responsibility to continue training the rest of the staff on an ongoing basis to ensure sustainability, including the onboarding of new hires.

Over the course of the year, the fellow will be responsible for evaluating the feasibility and effectiveness of the Palliative Care Training and Support for Long-Term Care Homes project to increase capacity of the LTCH workforce to provide PC and EoL care, and sustainability of the TTT model in embedding the knowledge and practice of PC and EoL care across 10 LTCHs. It is envisioned that a mixed model design using qualitative and quantitative methods will be utilized in the evaluation. The fellow could potentially work with other academic partners who have shown interest in the work (i.e. last year, we engaged faculty from York University).

Project Summary

Over the course of a year, the fellow will be responsible for evaluating the effectiveness of the Palliative Care Training and Support for Long-Term Care Homes project, to increase capacity of the long-term care workforce to provide palliative care and end of life care, and the sustainability of a train the trainer model in embedding knowledge and practice across 10 long-term care homes in Western York Region. It is envisioned that through potential academic partnership, a mixed model design using qualitative and quantitative methods will be utilized in the evaluation to support Western York Region OHT's collaborative Quality Improvement Plan.

7. Desired Competencies

Desired competences of the Fellow include:

- Experience with evaluation design (mixed methods utilizing qualitative and quantitative methods) in complex environments (e.g., able to explore multiple impacts from different perspectives and data points).
- Health system integration thinking, strategic vision, understanding of service delivery models within the provincial health system.
- Technical proficiency in Microsoft Office Suite – Excel, Word, PowerPoint, Visio.
- Ability to manage, analyze, interpret, and mine findings from large datasets.
- Ability to communicate and present evaluation results visually, transfer knowledge effectively to others.

-Assets: Interests in health care evaluation, change management, and quality improvement (PDSA); familiarity with long-term care and palliative care and end of life care; passion for health human resources and enhancing patient outcomes.

Does your OHT Require a Fellow with Bilingual Proficiency?

No

8. OHT Environment

Our OHT is built upon the strong existing relationships between 16 partners in the from the hospital, primary care, community services, home care, long term care, hospice, mental health, and the municipality of York. We have the ability to scale up and add more providers from our collective networks to contribute towards delivering a full and coordinated continuum of care. Our OHT partners include:

Alzheimer's Society of York Region
Carefirst
CBI Health Group
Community & Home Assistance to Seniors
Hill House Hospice
Hospice Vaughan
Mackenzie Health
March of Dimes
Primary Care Lead/Family Practice Network
Reena
SE Health
UniversalCare Canada Inc.
Vaughan Community Health Centre
Woodbridge Medical Centre Family Health Team
York Support Service Network
York Region

Our OHT has a unique opportunity to leverage strong digital infrastructure to improve sharing of information between patients, families and their care team. Introducing patients, caregivers, and providers to integrated digital health solutions from the hospital to the community will support better patient experience, effective care delivery, and ongoing quality and performance improvements.

Our Collaboration Council (co-chaired by Mackenzie Health and Reena) serves as the oversight body for the WYR OHT. Although our governance structure continues to evolve as we expand into there are currently a number of working groups reporting to the Collaboration Council, including Digital Health; Patient, Caregiver and Family Engagement; Primary Care; Integrated Care; and Communications. A Backbone Support Team, includes leadership and project management expertise in bridging strategy from the Collaboration Council to operationalize support to our working groups and integrated initiatives. Incoming fellows will have the opportunity to work closely with both the Collaboration Council (comprised of executive level leadership) and Backbone Support in terms of mentorship during the fellowship. There are also opportunities to engage in co-design activities with community members via our Patient, Caregiver and Family Partners.

Preferred Work Arrangement for Fellow

Flexible depending on candidate needs

9. Opportunities for Professional Growth and Development

As part of Continuing Care and Community Integration at Mackenzie Health, the Fellow will enhance their leadership skills working in close collaboration with the Associate Vice President, OHT Manager and the OHT Project Management Team. The fellow will work with and learn from our OHT partners across our Collaboration Council and working groups.

Professional growth and development opportunities include:

- Evaluation of an early integrated care program where evaluation frameworks can be tested over one year.
- Understanding of provincial health initiatives through participation in regional networking forums and information sharing with other OHTs.
- Gaining exposure to the senior leadership of OHT Partners in acute care, primary care, home and community care, long-term and residential care, and palliative and hospice care.
- Contributing to a technologically interconnected health system through Mackenzie Health's smart care delivery initiatives.
- Improving and showcasing effective communication at Council meetings and refine skills as an impactful leader.

10. Additional Information

Our WYR OHT by the numbers:

- Canada's first smart hospital and Vaughan's first residential hospice opened in 2021
- 16 partners with a history of 20+ relationships and deep trust
- Over 100 physicians currently being reached through a Family Practice Network
- 1 signed Collaboration Agreement
- 400+ hours of patient, caregiver advisor participation in co-design workshops
- 11 patient-centered Design Principles developed