

Introduction to Indigenous Interprofessional Primary Care Teams

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Primary Health Care Branch, Ministry of Health and Long-Term Care

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Introduction to Indigenous Interprofessional Primary Care Teams

The Government of Ontario is committed to working with Indigenous and community partners to establish up to 10 new or expanded primary care teams that include traditional healing, and will serve Indigenous communities across Ontario. These Indigenous Interprofessional Primary Care (IPC) Teams will provide enhanced access to traditional and primary care services address health inequities and improve outcomes over the long term.

The implementation of Indigenous IPC Teams is an initiative of Ontario's First Nations Health Action Plan to ensure Indigenous people have access to more culturally safe health care services and programs, focusing on the North where there are significant gaps in care.

The Ministry of Health and Long-Term Care (ministry) is inviting applications, through an Expression of Interest (EOI), to establish Indigenous IPC Teams from Indigenous organizations across Ontario. Priority will be given to applications from the following Local Health Integration Networks (LHINs) that have been identified as geographic areas of high need for primary care services for Indigenous populations:

- Erie St. Clair Local Health Integration Network
- South East Local Health Integration Network
- North Simcoe Muskoka Local Health Integration Network
- North East Local Health Integration Network
- North West Local Health Integration Network

The ministry identified the above LHINs based on a primary care needs assessment of Indigenous peoples in Ontario that included areas having a combination of:

- Greater proportion of Indigenous populations;
- Poorer health outcomes and a higher percentage of complex high needs patients;
- Limited traditional and culturally safe and appropriate services and programs; and
- Greater unmet Indigenous primary care needs.

What are Indigenous IPC Teams?

Indigenous IPC Teams are community-driven Indigenous-governed organizations that may include traditional healers and helpers, medicine people, family physicians, nurse practitioners, nurses, mental health and addictions workers and a range of other health care providers who are committed to working together, and collaboratively within the community, to provide comprehensive, accessible and coordinated culturally safe interprofessional primary care to Indigenous populations, especially in rural, remote and northern communities.

This approach allows traditional healers to work as part of a team with other health care providers to focus on keeping clients healthy, while providing a safe and positive working environment and sharing and benefiting from the complementary knowledge and skills of their colleagues.

Through Indigenous IPC Teams, clients are able to establish a protected relationship with traditional healers and interprofessional healthcare providers (IHPs) for comprehensive, client-centred primary care in their communities. As a collaborative team practice, Indigenous IPC Teams will work with other Indigenous and community partners to coordinate and integrate services and programs, in order to effectively meet the needs of clients, especially in areas where there are significant gaps in care. Key areas of care include mental health, addictions and substance abuse services and programs, health promotion and improved management of chronic disease (including diabetes) through both, treatment and monitoring, as well as supporting clients in improving self-management skills.

The Principles of Indigenous IPC Teams include:

1. Access to culturally safe primary care services and programs for Indigenous communities, with a focus on an interprofessional model of holistic health and well-being;
2. Community-driven and Indigenous governance, based on social determinants of health and the unique needs of Indigenous clients in that community;
3. Engagement with Indigenous stakeholders and communities as partners to better coordinate and integrate services and programs, possibly serving as a “wellness hub” within the community; and
4. Connecting rural and remote Indigenous communities with specialized services and supports by leveraging and advancing new technologies.

The Roles of Indigenous IPC Teams include:

1. Providing increased access to a range of culturally safe health care providers and traditional healers to Indigenous communities where there are service gaps, and to clients without a family health care provider;
2. Providing comprehensive culturally safe services and programs through an interprofessional team of traditional healers, family physicians, nurse practitioners, registered nurses and a range of other health care professionals, each working within their scope of practice;
3. Serving as a central catalyst for the development of new, comprehensive community-based mental health and addiction services as well as chronic disease management and self-care programs;
4. Emphasizing health promotion, illness prevention and early detection/diagnosis;
5. Providing system navigation and care coordination, linking clients to other parts of the health care system such as home and community care, acute care, long-term care, public health, mental health, addictions, and other Indigenous community programs and services;
5. Providing client-centred care where the client is a key member of the team and uses information and support to make informed decisions on how to manage his/her self-care needs; and
6. Collaborating with other Indigenous community health care organizations and partners to meet the specific needs within the community.

Applying for an Indigenous IPC Team

To accommodate communities at different levels of readiness, the ministry is offering two (2) options to apply for an Indigenous IPC Team, in order to streamline the evaluation and approval process and facilitate the implementation of Indigenous IPC Teams for applicants that are at an advanced state of readiness.

Both options include the submission of an Application Form for evaluation, however applicants will identify in the Application Form if they:

- 1) Have resources available to prepare a *Business Plan* and *Operational Plan* without financial assistance from the ministry. Application Forms will be evaluated, and recommendations will be made for ministry approval. Successful applicants will be able to proceed with the development and submission of a *Business Plan* and *Operational Plan* for ministry review and evaluation.
- 2) Do not have resources available to prepare a *Business Plan* and *Operational Plan* and an Application for Development Funding is being submitted in addition to the Application Form. The Applications for Development Funding will only be reviewed for those applicants that **will be recommended for ministry approval**. Successful applicants will enter into a Development Funding Agreement (DFA) with the ministry and once the DFA has been signed by the parties involved, applicants will be able to develop and submit a *Business Plan* and *Operational Plan* for ministry review and evaluation.

The Application Form, and Application for Development Funding if applicable, must be submitted by the deadline. Applications received after the due date will not be considered.

In the application stage, all applicants will:

- Submit a completed Indigenous IPC Team Application Form.

Applicants that will be applying for financial assistance to develop a *Business Plan* and *Operational Plan* will:

- Submit a completed Development Funding Application.

Note: Submitting an Application Form for an Indigenous IPC Team or an Application for Development Funding does not guarantee approval. All applications will be evaluated to determine which applicants will be approved to proceed to the next stage or if Development Funding will be provided.

Key Criteria for Assessing Readiness to Implement an Indigenous IPC Team

When establishing an Indigenous IPC Team, the following five factors will inform the evaluation of applications and are the foundational building blocks to support an enhanced state of readiness:

1. **Governance:** All Indigenous IPC Teams must develop appropriate Indigenous governance. The following governance models are available:
 - i. Primary Health Care Organization-Led – This incorporated group is governed by a Board of Directors (which may include the local Band or Tribal Council) and may currently be funded by the ministry [e.g., Aboriginal Health Access Centres (AHACs), Indigenous governed Community Health Centres (CHCs), Family Health Teams (FHTs) or Nurse Practitioner-Led Clinics (NPLCs)]. In this model, the Board of Directors provides the governance and oversight, and is the funding recipient and the employer.
 - ii. Band or Tribal Council – A Band or Tribal Council provides the governance and oversight, and is the funding recipient as well as the employer of traditional and primary care IHPs and administrative staff.
 - iii. Partnership – A combination of organizations that share the responsibilities of governance and oversight, are joint funding recipients and are joint employers of traditional and primary care IHPs and administrative staff.
2. **Human Resources:** Indigenous IPC Teams may include traditional healers as well as family physicians, health care professionals and an administrative team committed to a model of holistic health and well-being that will be tailored to the size of the population served and its health care needs.
3. **Accommodations:** To promote collaboration, health care providers are expected to co-locate at one or more sites that include physicians, IHPs and administrative staff. Applicants who have identified space that can accommodate the proposed team and requires little or no remodelling/renovation will be ready to implement the proposed Indigenous IPC Team more quickly.
4. **Collaboration and Integration of Indigenous Traditional Health Services in the Community:** Demonstrate knowledge of the number of the client population in the catchment area of your proposed team that do not have a primary care provider; demonstrated knowledge of community population health (e.g. prevalence of chronic diseases), as well as social determinants of health; and existing and/or planned collaborative integration/coordination of traditional Indigenous health services and programs within the community.
5. **Information Technology:** An implemented Clinical Management System with Electronic Medical Records for clients is an asset.

The more advance planning you do towards addressing these five key factors, the greater your state of readiness will be to enable an efficient, effective and accelerated path through implementation to become a fully operational Indigenous IPC Team.

Development Funding

Development funding will enable applicants to hire appropriate resources to complete your *Business Plan* and *Operational Plan*, as well as to establish governance and incorporation-related activities as needed.

To receive this development funding, you will need to enter into a DFA with the ministry, and subsequently enter into a contract/agreement with a project manager/consultant or subject matter expert(s), who will help prepare your *Business Plan* and *Operational Plan*. Recipients of development funding are expected to observe due diligence and fiscal prudence, and any unspent funds must be returned to the Minister of Finance as per accountability directives.

If you are approved for development funding, these are the steps you should follow:

- Open a separate bank account in the name of your Indigenous IPC Team where developmental funding and future operational funding will be held, and provide the necessary banking information to your ministry contact;
- Engage a consultant to help you develop your *Business Plan* and *Operational Plan*;

- ☑ Make a decision on appropriate governance arrangements;
- ☑ Take appropriate steps to formalize the legal arrangements for your governance option – this may include incorporation for non-profit and professional groups; and
- ☑ Develop by-laws that will assist your decision-making processes.

If your group is selected to become an Indigenous IPC Team, you will receive a letter of confirmation from the ministry providing your Indigenous IPC Team with conditional approval to proceed. At this time, you will also be assigned a ministry contact who will support you in moving through the required stages to implement your Indigenous IPC Team.

The deadline for submission of all applications is 5:00 p.m., August 21, 2017.

Strategic and Program Planning Stage

Strategic planning is a part of governance that focuses on planning for the goals of your Indigenous IPC Team.

The strategic planning process will establish a vision for your Indigenous IPC Team, setting long-term objectives, developing plans and procedures to achieve these objectives, and determining if these objectives have been met. Planning for the long term assists Indigenous IPC Teams to develop an approach to services, including how the team will address population health needs and determine if they are met.

At this point:

- ☑ Develop the Indigenous IPC Team vision, mission and goals to help define what your Indigenous IPC Team's role will be in your community;
- ☑ As new members join your team, you will want to ensure that all members understand and share the vision, mission and goals of your Indigenous IPC Team;
- ☑ Further define the population you will be serving, including demographics and health needs, and your plan to address these needs; and
- ☑ Develop a list of programs and services your Indigenous IPC Team wishes to provide, that will address the health needs of your client population, and set realistic objectives for these programs and services to improve health outcomes.

Your list of programs and services should reflect a development plan to become operational within three (3) months.

Business and Operational Application Stage

At this stage, with the aid of a project manager/consultant, you will be required to develop a *Business Plan* and *Operational Plan* for your Indigenous IPC Team. These plans may initially be at a general level. As you acquire resources, refine program needs and continue to consult with your community and health delivery partners, they will evolve and become more refined.

Your next steps are to:

- ☑ Prepare a detailed *Business Plan* and an *Operational Plan*; and (These will set staffing requirements for your Indigenous IPC Team and will indicate resource supports coming from your community)
- ☑ Plan and submit a detailed budget including salaries and benefits, overhead, space plans (including site renovations) and final one-time costs for program/medical equipment, IT equipment, office furnishings and associated equipment.

Once submitted, your *Business Plan* and *Operational Plan* will be assessed by the ministry. Your ministry contact will meet with you to discuss your submission and may request some revisions.

Pre-Operational Stage

By this stage, you will have completed all of your plans, and held discussions with your community and other local providers. You will begin to acquire resources and space to run your Indigenous IPC Team.

The ministry will have reviewed your *Business Plan* and *Operational Plan*, discussed your budget request and provided approvals to implement your Indigenous IPC Team. Each Indigenous IPC Team will need to prepare an implementation plan, based on its own unique set of circumstances.

The key steps involved in making your Indigenous IPC Team operational include:

- Your Indigenous IPC Team may have to provide a revised first-year overhead and one-time cost budget request, based on the approved complement of IHPs and administrative staff;
- Your Indigenous IPC Team may recruit and hire an administrative lead, if needed, early in this stage to carry out and/or lead the key activities required to make the team operational;
- Work that will needed to be completed early in the implementation of your Team could include such tasks as human resources recruitment, as well as acting as a key contact for communications with your Indigenous IPC Team's internal and external stakeholders, including the ministry; and
- Your Indigenous IPC Team will need to acquire appropriate space to accommodate your approved first-year staffing complement. Indigenous IPC Teams requesting additional space for expansion of their current approved Indigenous IPC Team complement and related premises costs; and/or one-time funding for facility improvements, will be required to complete the Community Application Form and Business Case.

(Your ministry contact will be available to assist you through this process, and provide the necessary tools to guide you through the steps involved for space planning.)

Some Indigenous IPC Teams may need to find, and enter into, interim space arrangements pending the completion of a detailed facility expansion/improvement plan. Your ministry contact will answer questions, discuss alternatives and advise on the information required to consider and approve appropriate interim space arrangements for your team.

Other pre-operational stage activities may include:

- Select and acquire an appropriate employee benefits package;
- Ensure you have established personnel policies and procedures;
- Plan and arrange for appropriate training to meet staff needs;
- Acquire supplies and equipment, as approved by the ministry;
- If you haven't already done so, determine your clinical information needs and select your team's Clinical Management System (CMS)/Electronic Medical Record (EMR) vendor, if appropriate;
- Once your team has selected a CMS/EMR system, please forward a detailed IT funding request to your ministry contact;
- Once you have confirmed your insurer or insurance broker, please forward a listing of your insurance coverage and related costs to your ministry contact;
- Arrange for a certified external auditor to audit financial statements and compliance with agreements – you are required to submit annual audited financial statements to the ministry;
- Establish systems and processes for physicians and other clinical staff to complete required information for ministry reporting; and
- Consider establishing:
 - A Community Advisory Board to assist in advising your Indigenous IPC Team, if appropriate; and
 - An internal committee structure to facilitate communication and decision-making for your team.

Operational Stage

By this stage, your Indigenous IPC Team will have acquired its health providers and will be building a collaborative team.

Key activities at this stage include:

- Develop and implement programs for targeted client populations based on defined needs;

- ☑ Ensure that programs include defined and measurable objectives to enable your team to assess results and adjust programs as necessary;
- ☑ Ensure service delivery systems and administrative operations are in full compliance with terms set out in the Indigenous IPC Team Agreement; and
- ☑ Submit periodic service, financial and other reports to the ministry according to schedules set out in signed funding agreements.

Where to Get More Information

All Applicants who have received conditional approval to proceed will be assigned a ministry contact who will guide and assist you in working through the details and options of establishing an Indigenous IPC Team.

Questions can also be directed to IIPCT@ontario.ca

