



Understanding our Ontario Health Team



We would like to acknowledge and thank Algoma Ontario Health Team's Community Partnership Toolkit for the inspiration for this toolkit.

What is an Ontario Health Team

Ontario Health Teams (OHTs) are being built across the province to provide a new way of delivering more connected care and facilitating access to care for individuals and their caregivers. They are teams of health, community, and social services providers working together to be professionally and financially responsible for making sure people get the care they need, when and where they need it.

Introduction to the Frontenac, Lennox and Addington Ontario Health Team

The FLA OHT was officially formed in 2020. We're a team of 300 health-care providers & community members; 160 family doctors and 3 hospitals.

We are all working together to meet the health and wellness needs of approximately 220,000 people in the region spanning Deseronto, Napanee, Kingston and Gananoque in the south; Denbigh, Sharbot Lake and Cloyne in the north; and surrounding communities in between.

The FLA OHT is committed to developing a team-based health-care system that prioritizes mental, physical, emotional, spiritual and social health and wellness to meet our community's needs. Our OHT is founded on a bold vision of offering a People-Centred Health Home for everyone our OHT serves. This includes seven principles for care that is equitable, accessible, connected, collaborative, continuous, holistic, and accountable.

Our work towards this vision is being done in partnership with community members and over 70 organizations, grouped into networks of care centered on the needs of people they serve, including home & community care and community support services, long-term care, addictions & mental health, primary care, hospitals, specialists, wellness & equity and education & research.



Quintuple Aim

The FLA Ontario Health Team vision for health care in Ontario is well-aligned with the 'Quintuple Aim,' an internationally recognized framework for the design and delivery of an equitable and accessible health-care system.

Our goal is to achieve the Quintuple Aim:

- Improve the person and caregiver experience
- Improve the health of populations
- Improve the work life of providers
- Improve the value of care, reduce the cost of health care
- Improve health equity by understanding the social determinants of health

Vision

A healthier community where we all have equitable access to high-quality care, services and supports that empower us toward Achieving our best health.

Mission

A People-Centred Health Home for everyone in Frontenac, Lennox & Addington counties.



Who we serve

This area is composed of vibrant urban cities, many small towns, picturesque villages along Lake Ontario and many rural and remote areas – yet many health and wellness challenges exist:

- We are older than the rest of the province. One in four people is older than 53.
- We have a total population of about 220,000 where one in eight or over 20,000 people do not have a primary care provider. This puts more pressure on emergency departments and hospitals.
- Hospitals in the region are experiencing severe shortages of health-care workers and longer wait times have become normal.
- Mental health and addiction needs in this region are higher than the provincial average.
- The regional Indigenous population is higher at 3.7 per cent compared to the rest of the province at 2.8 per cent.
- More people speak French as their first language at 3.1 per cent compared to the provincial average of .03 per cent, and we are a designated area under the French Language Services Act.

Who is part of the FLA OHT

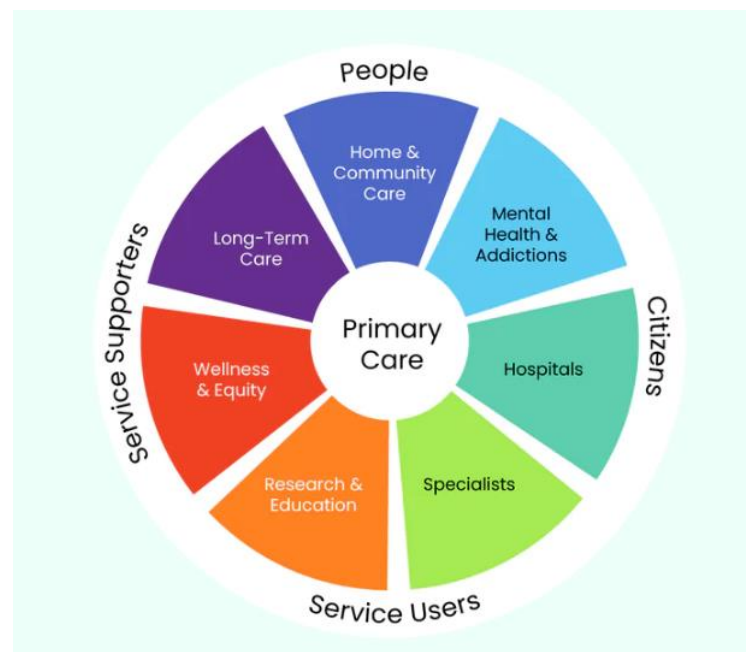
FLA OHT partners come from several Networks:

- Primary Care
- Home and Community Care
- Mental Health and Addictions
- Specialists
- Hospitals
- Long-Term Care
- Wellness and Equity
- Education and Research

FLA OHT partners with other affiliations:

- Francophone
- Indigenous
- Municipalities

View a list of all [FLA OHT partners on our website](#).



Collaborative Decision-making arrangement

Our partners agree to the FLA OHT Collaborative Decision-Making Framework Agreement (CDMA). Intending to further address equity and integrate care and services for our common population, our work together is:

- Collaborative
- Voluntary
- Project-based

This agreement is NOT about formal legal governance structure changes, reporting, funding or accountabilities. We are led by the Transitional Leadership Council and supported by FLA OHT backbone team. Our small group of staff are dedicated to OHT activities. They support decision-making, project management and operations, communications, analytics, research, and community engagement. It's important to remember that the FLA OHT is not a single set of employees – we are a network of people and organizations working together as one large team to make big, system-level changes.

Projects you may contribute to:

- **Access to Primary Care** – This group is working on building new models of care for people who don't have a primary care provider - family doctor or nurse practitioner - with the support of other health and wellness providers. As well as ensuring everyone, including children, youth, seniors, people experiencing or at risk of homelessness and newcomers have timely access to the care they need.
- **Aging Well at Home** – this group is working on initiatives to better support individuals and caregivers to age well and at home and improve awareness and navigation of resources to support people accessing home and community services.
- **Coordinated Discharge** – this group is working on coordinated care transitions to reduce emergency department visits and readmissions to hospitals and improve people's recovery after being in the hospital.
- **Digital Health** - Increasing use of digital health tools, improving quality of care by simplifying systems and enhancing collaboration and simplifying systems and processes to help people, families and providers.
- **Palliative Care** – this group is working on improving the quality of life for individuals with serious illness and their families, creating positive integrated care experience for palliative care providers and increasing home visits to reduce the pressure and visits to Emergency Rooms.
- **Mental Health and Addictions** – this group is working to increase access to mental health and addiction services for those in need and build stronger relationships with health-care providers to support and serve those in need.