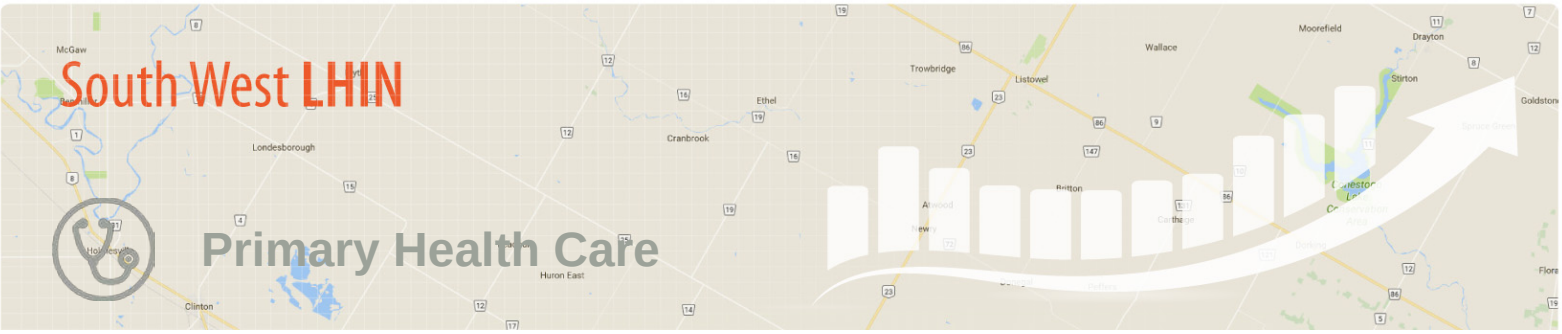
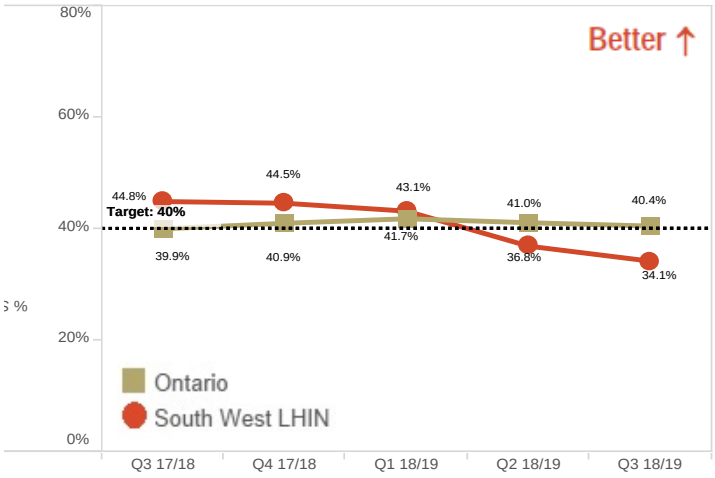


How Will We Know We Have Been Successful?

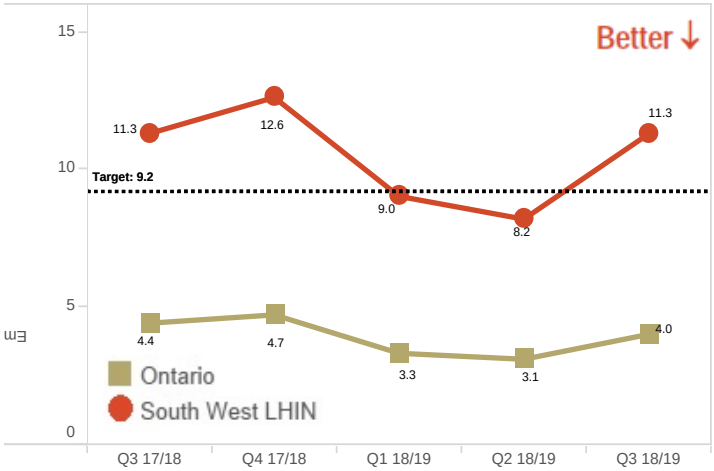
- Faster access to primary care when you are sick
- Fewer visits to the Emergency Department (ED) for conditions that are better managed in primary care
- More people see their primary care provider following discharge from hospital

How Are We Doing?

#1. Percentage of Adults Able to See a Primary Care Provider on the Same or Next Day When They Were Sick



#2. Rate of Emergency Visits for Conditions Best Managed Elsewhere (BME)



- This quarter, the percentage of respondents reporting same/next day access to primary care services in the South West LHIN continued to drop, falling to a low of 34.1%, and remains below provincial performance. However, 70.3% felt that the time they waited for their appointment felt “about right” (Ontario: 69.1%).
- The South West LHIN continues to have the 2nd poorest rate of ED use for conditions best managed in a community setting. Of the South West LHIN residents who responded to the Health Care Experience Survey (HCES), 58.1% reported difficulty accessing medical care in the evenings/weekends/holidays without going to the ED (Ontario: 52.6%).
- Avoidable ED visits are highest in the Grey Bruce sub-region (24 visits per 1,000 residents). This may be due to the difficulty in accessing after hours care without going to the ED. In Grey Bruce, 75.5% of respondants to the HCES reported difficulty accessing care after hours from their family physician.

What Is Impacting Performance?

Initiating & Planning

- **Coordinated Care Plans (CCPs) -** Existing CCP activities are being leveraged to improve focus on patient “wraparound care” and reduce unplanned ED presentations.
- **Primary Care Alliances -** Launched in Q3 17/18, sub-region representatives from the primary care sector will work to identify local care issues, needs and interests in order to improve patient access, quality and experience of care.
- **Practice Facilitation -** Partnering for Quality is developing a new program suite for practice facilitation.
- **Expanding and Enhancing Interprofessional Primary Care (IPC) Teams -** This initiative is designed to expand and enhance access to IPC teams for individuals experiencing barriers to care in London.

Executing

- **Targeted Recruitment** - The LHIN is working with HealthForce Ontario to recruit family physicians in high-needs communities.

Monitoring & Closing

- None at this time.

Potential Future Opportunities and Considerations

- There is an opportunity to continue to enhance focus on the communication that Home and Community Care staff provide to patients regarding access to the right care in the right place.