

Patient's Medical Home

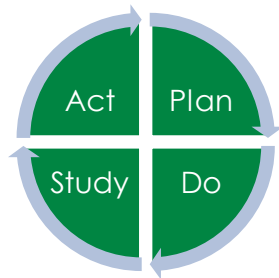
Where care centred on the patient's needs is provided by a team that knows his or her story



Team-based Care

Supporting:

- physical and mental health needs
- prevention and wellness
- acute and chronic care



Culture of Improvement

- committed to **evidence-based medicine**
- **responsive** to patient feedback



Patient-Centred

- Care that focuses on the **whole person**
- Patients and families are **partners in care**



Access to Care (and information)

- When the patient **wants** or **needs** it



Coordinated Care

Patient's Medical Home:

- is the **centre** of patient/family care
- **aligns care** between specialists, hospital, community services, and others

System Supports for the Patient's Medical Home

- Provincial support programs
- Education and workforce development
- Integrated information systems
- Supportive payment structures

Patient's Medical Home

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Engaged Leadership

- **charts** the course
- provides **resources and tools** to support transformation
- **removes barriers**



Organized Evidence-Based Care

- **evidence-based guidelines** embedded into daily practice



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Panel & Continuity

- physicians and teams **know** whose care they're responsible for
- clinics have processes for **identifying, maintaining and managing** patient panels
- patients see the **same provider and care team** whenever possible

Primary Care Network Supports (customized by PCN)

- Clinical Services – CDM programs, referral coordination, etc.
- EMR/IT Supports
- Quality Services – access to improvement facilitators, physician champions, improvement methods, tools and resources
- Evaluation
- Governance and business planning