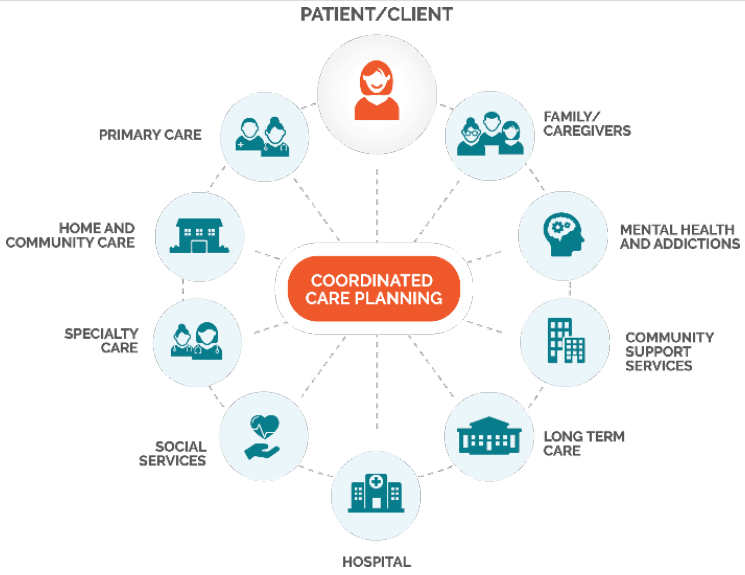
Coordinated Care Planning – Information for Health and Social Services Providers

WHY?

Multiple providers, appointments, and complex care issues can make it difficult to support a patient/client's unique needs. A more collaborative approach to care can be achieved through Coordinated Care Planning.

Bringing together multiple providers, the patient/client, and his or her informal supports enables the development of a care plan that best supports the patient/client goals and needs.

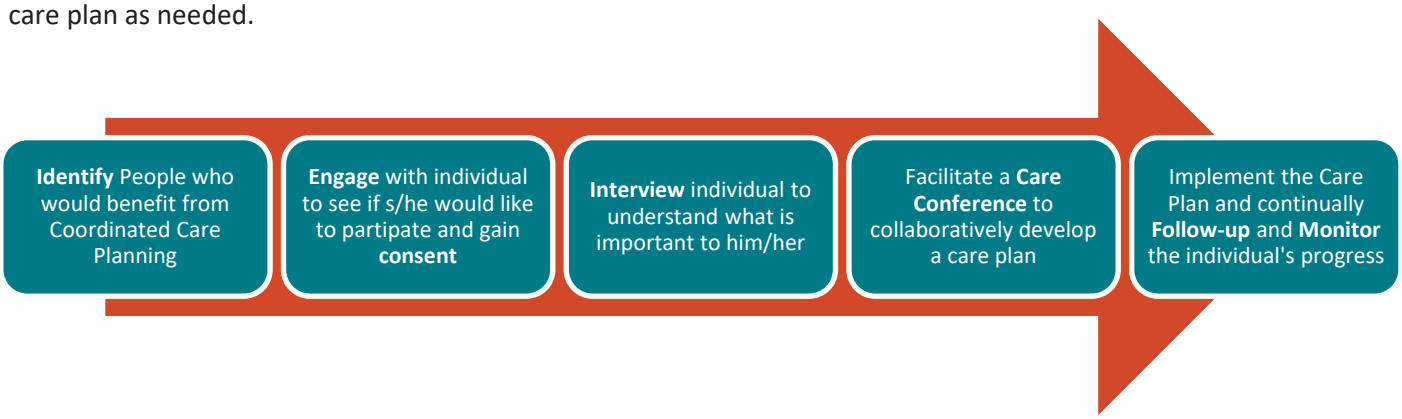
To ensure a standardized, high quality approach for all, the Care Plan is documented on a provincial template which can be shared and viewed across the system.



WHO?

HOW?

Once an individual is **identified,** and consent is obtained to participate in Coordinated Care Planning, a Lead is determined. The Lead is ideally someone with an existing, trusting relationship with the patient/client and becomes the single point of contact for the care team. The Lead and the individual meet face to face to establish the individual's care needs and goals. They work together to identify existing care partners and anyone who should be included in creating a care plan, including informal supports (e.g. family, spiritual support). The Lead coordinates a **care conference** with the team and individual present to develop the care plan and begin the journey toward better care. Over time, care needs and goals may change; the care team will continue to **monitor progress** and adjust the care plan as needed.



HealthLinks

Ontario
South West Local Health Integration Network

YOU HAVE OPTIONS FOR CONNECTING SOMEONE WITH PERSON-DRIVEN COORDINATED CARE PLANNING TODAY

For more information about Coordinated Care Planning and how you can lead, connect with local in-person resources:

Elgin, elginhealthlink@eefht.ca

Grey Bruce, healthlink@sbghc.on.ca

Huron Perth, huronperthhealthlink@npfht.ca

London Middlesex, healthlink@thamesvalleyfht.ca

Oxford, oxfordhealthlink@oxchc.ca

For individuals who need Home and Community Care Services through the South West LHIN and Coordinated Care Planning, please complete a referral form:

Go to: https://tinyurl.com/LHINreferral

To discuss Coordinated Care Planning for a specific individual across the South West LHIN, call:

1-855-371-6337

For more information, documents and tools, go to: http://swhealthlinks.southwesthealthline.ca/