



OHT Impact Fellows Program

Please complete this form to indicate your OHT’s interest in hosting an Impact Fellow. Refer to the [Call for Hosts](#) for instructions.

The deadline for EOIs is May 25, 2021.

Interested OHTs are encouraged to [reach out to program staff](#) early on to discuss potential ideas. OHTs may submit more than one EOI but may only host one Impact Fellow at a time.

Please note that submitting an EOI does not guarantee that the OHT will be matched with a fellow.

1. OHT Name	OHT-Northumberland
OHT Location	Northumberland County
OHT Website (if applicable)	www.ohtnorthumberland.ca
2. OHT Primary Contact	Adrienne Bell-Smith
Primary Contact Email	abell-smith@nfht.ca
Are you willing to be contacted by prospective Fellows to discuss projects?	Yes
3. Host Mentor	Adrienne Bell-Smith
Position / Title	Adrienne Bell-Smith (Exec Dir Northumberland Family Health Team) and Trish Baird (Executive Director Community Care Northumberland) will be interim mentors until the new OHT-Director is in place in July.

4. OHT Priority Areas

As its first priority population, Ontario Health Team-Northumberland is improving access and coordination of health care services for the rural population. “Rural population” is defined as residents who are vulnerable and living in rural areas and communities having a rurality index less than 4.0, outside of Northumberland County’s four largest population centres (Cobourg, Port Hope, Brighton and Campbellford).

The three initial projects are: Rural Outreach, Community Paramedicine and Volunteer Peer Support programs. The use of digital health to enhance care, especially for the rural/vulnerable population, is an aim that runs through each priority project.

5. OHT Goals

The current goals of the OHT have been defined by our Quality Road Map, which is rooted in the Quadruple Aim Framework.

- Seek out broad population health information to determine which patients we should be seeing

and who we may not be seeing

- Enable and empower patient & caregiver participation by providing knowledge and tools
- Empower providers to co-create plans of care with other providers, patients and caregivers by taking a more holistic and collaborative approach
- Determine where resources can have the most positive impact, while minimizing the negative impact elsewhere

6. Proposed Projects

We are proposing a program of work (series of interrelated projects) focused on our rural and vulnerable population and rural outreach. The nature of this work is to include:

- a) Understanding our rural population and recommending a population health strategy (including demographics, health & social indicators, service maps, identify gaps, environmental scan of comparative communities and leading practices)
- b) Further implementation, spread and evaluation of the OHT-N Outreach model based on population health data, targeting the rural and underserved (priority population in year one). The model will address:
 - transfer and alignment of resources from least to most deprived areas utilizing existing health service resources
 - synchronization and integration of services to support rural residents
 - integration of home and community care services with primary care/outreach clinic
 - expansion of digital technology
 - improved access to interprofessional teams and services
 - evaluation of impact of interventions on rural population health, especially seniors care, palliative care and mental health
- c) Assisting in the development of a Digital Health Strategy, in the context of this project, including:
 - Patient portal for accessing care
 - Patient portal for accessing health information
 - Digital supports for coordinated care planning/sharing info among care team

Project Summary

Expansion and implementation of an Outreach Strategy to Improve Access to Care and Population Health for Rural Vulnerable Residents in the Ontario Health Team of Northumberland.

7. Desired Competencies

Broad understanding and interest in community health and social services, including primary and interprofessional care.

Ability to work with population health data.

Awareness of the influence of social determinants of health on health outcomes.

Experience with provider and patient/caregiver engagement and co-design

Does Your OHT Require a Fellow with Bilingual Proficiency? No

8. OHT Environment

Drawing on a strong history of collaboration, patients, caregivers, health and community care providers from across Northumberland County are working together to improve patient and caregiver experience of health care in our community, as well as provider work-life experience, through the Ontario Health Team (OHT) model.

OHT-N is ready and excited to host an Impact Fellow from September 2021-August 2022. Any Fellow that joins our team will find that we are innovative and collaborative group of health and social service leaders, patients, providers and caregivers with a high degree of mutual respect and drive to improve health services within our community. The Collaboration and Facilitation Councils of the OHT-N gave careful thought and discussion to the decision to apply for an Impact Fellow. We are dedicated to providing a meaningful experience and look forward to impactful work produced by an Impact Fellow.

The OHT-N is currently in the final stages of hiring a Director, who will be the primary mentor for the Fellow, with support from our Collaboration Council. The addition of this dedicated, full time Director to our OHT will provide the capacity to adequately support the Fellow. In addition to the OHT-N Director, the Impact Fellow can expect to participate as an ad hoc (non-voting) member of the Collaborative Council and will become a member of the Rural Outreach Committee. Our Rural Outreach project has started with the establishment of an outreach clinic in a rural community, which means that the Fellow will be able to start with a established first intervention to evaluate. They will then be expected to use information from a variety of sources (both qualitative and quantitative) to support broadening and deepening the rural outreach strategy.

The Fellow would have the full support of the Collaboration Council (our partner leadership table), Facilitation Council (a sub-team of the collaboration council that meets more frequently to operationalize actions of the OHT – like an executive committee), the project teams (Rural Outreach, Community Paramedicine, Volunteer Peer Support, COVID) and advisory teams (including Patient and Caregiver Experience Partners Council, Clinical Advisory Committee, Digital Health Committee). In addition to the OHT Co-Chairs and Director, the Fellow would be working closely with the Rural Outreach Project Leads and we are intending to contract hours from the Quality Improvement Decision Support Specialist (QIDSS) from one of our partner FHTs to help support performance measurement/evaluation.

Preferred Work Arrangement for Fellow

Hybrid Flexible depending on candidate needs

9. Opportunities for Professional Growth and Development

Collectively, our OHT is open to facilitating opportunities for professional growth and development based on the learning goals of the IMPACT Fellow. These can include both formal and informal opportunities, such as networking and mentoring.

10. Additional Information

OHT-N was one of the first 24 OHTs approved to form in December of 2019. As such, our OHT has had the opportunity to begin its maturity journey and the establishment of its structure, norms and culture. This has certainly been strengthened during the current COVID-19 pandemic, as our OHT leveraged this partnership to provide care and support to our community.