

# The HFHT is the Patient's Medical Home



Executive leadership at the Hamilton Family Health Team, along with the CEOs of Hamilton Health Sciences and St. Joseph's Healthcare, the Medical Officer of Health, the City Manager of Hamilton, the CEO of the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN), and other stakeholders have recently formed the Hamilton Community Health Committee. This group is piloting a new strategy that better integrates health and social services and empowers primary care providers and patients to navigate the complex health care and social service system. Health and social services will be tailored to the needs of unique populations or communities (or, as we like to call them, neighbourhoods), and HFHT primary care teams, integrated with community partners, will become what is called the Patient's Medical Home (PMH).

The Patient Medical Home (PMH) is a vision shared across family medicine providers in Canada. The goal of the PMH, as the Ontario College of Family Physicians defines it, is to have "every family practice in every community across Canada be able to offer comprehensive, coordinated and continuing care to their populations through a family physician working with an interprofessional health care team." There are 10 "pillars" of the PMH (see image below) that will help primary care teams across the country to meet this standard of care.

In many ways, the HFHT is already delivering care that aligns with the goals of the Patient Medical Home. By moving to a neighbourhood-based model of care, our services will be more patient-centred, easier to access, and more integrated with other health and social service providers, so that we can ensure patients receive continual, comprehensive care.

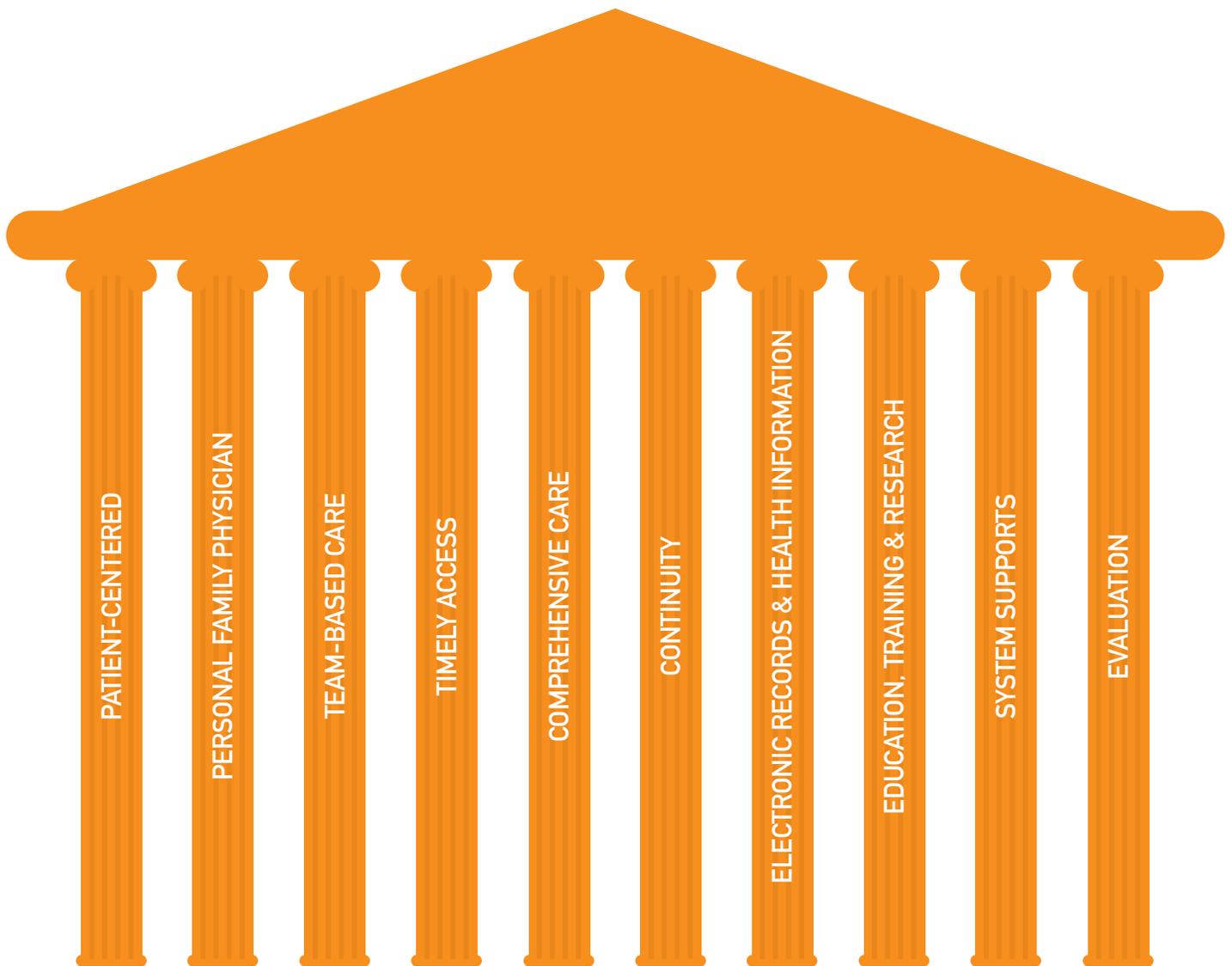
The Hamilton Community Health Committee has chosen to pilot a PMH model in the Stiplely, Rolston, and Dundas neighbourhoods of the city. While the HFHT is involved in planning in all three pilot areas, we have taken the lead in developing a PMH in the Dundas community. So far, we have analyzed census data to get an understanding of typical health and social issues in the area; worked with community members to create a map of the community's assets and identified gaps or weaknesses in the health and social services sectors; held a Town Hall meeting to encourage further community dialogue about strengths and weaknesses in terms of supports available in the neighbourhood; and, we are currently developing a survey to reach the community more broadly to ensure that we have accurately captured the needs of the population.

Throughout this planning process, it has been important for us to listen to the many voices of the community and to help community members recognize and embrace the role they play in helping their community to be a healthier place to live. In Dundas, a group has formed which we have aptly named the Dundas Community Leaders Planning Table. Members of this group are representative of others in the community (i.e. local business owners, churches, older adults, youth, etc.) and are helping to lead the way in making Dundas "a community that cares for itself." Through the Community Leaders Planning Table, we are able to use real voices from the community to help us actualize the PMH concept in Dundas.

As we continue to venture forward in reorganizing our services into a Patient Medical Home model, we look forward to working with new communities to deliver care in ways that meet their needs.



# 10 PILLARS OF THE PATIENT'S MEDICAL HOME FRAMEWORK



Adapted from the College of Family Physicians and Surgeons/[www.patientsmedicalhome.ca](http://www.patientsmedicalhome.ca)

