

Health Networks in Saskatchewan

Physicians

Key Messages:

- Health Networks are **collaborative teams of health professionals**, including physicians, and community partners providing fully integrated services to meet the health needs of individuals and communities.
- Creating Health Networks is all about ensuring our **patients get the right care at the right time from the right health care provider as close to home as possible**.
- Health Networks exist within a small, defined geography. They aim to **deliver healthcare services closest to where the patient lives/works**. Care is accessible, coordinated, timely and centered on the needs of the patient.
- Health Networks will advance the **integration of team-based community and primary health care** in both urban and rural Saskatchewan – reducing the likelihood of citizens needing acute care, and strengthening transition back to primary or home care from the hospital by embracing a team approach.
- Health Networks will ensure that communities have **consistent access** to the care and services they require – including physicians and other providers such as pharmacists, nurse practitioners, physiotherapists, dietitians, mental health counselors social workers, and more.
- These Networks will allow citizens to receive consistent care **closer to home**, and will also improve supports offered to physicians and other health care providers, which can help recruit and retain providers.
- The geographies and services offered within each network have been informed by data and validated by the citizens of the network, to help ensure the networks are **reflective of the communities they serve**.
- Networks will provide care that is **accessible, coordinated, timely and centred on the needs of the patient** by adapting to the needs of the specific population for that geographic area.
- The creation of networks will allow the SHA to better allocate staff and resources to **meet the particular needs of the citizens** living within that network.

Questions & Answers:

What are Health Networks?

- Health Networks **are collaborative teams of health professionals**, including physicians, and community partners providing fully integrated services to meet the health needs of individuals and communities.
- Health Networks are a tool that will enable **team-based care** in the community.

Why health networks?

- Patients, providers, physicians, and leaders all call for **integrated, coordinated health care** in the community, as we currently have a fragmented health system with various parts requiring integration.
- Creating Health Networks is all about ensuring our patients get the **right care at the right time from the right health care provider as close to home as possible**.

What's new?

- Networks will facilitate accessible, coordinated and timely care that is centred on the needs of the patient.
- Health services will be informed by population and public health data and adapted to meet the **needs of the specific population** within that geographic area.

- When Health Networks are fully developed, providers can expect **enhanced navigation and access to care** for their patients.

Are the Health Network geographies just new boundaries, like the former regions?

- The geographical boundaries are for internal operations only, and are **not meant to inhibit the provision of patient care**, as patients will be able to seamlessly move between networks as required.
- Health Networks support our large provincial organization to maintain local connections with the people we serve.
- Patients and citizens do not need to know which network they belong to in order to receive appropriate care, and the geographical boundaries of networks will not be promoted publicly.

Are Health Networks the same as the Patient’s Medical Home (PMH)?

- Health Networks and Patient’s Medical Home are not the same, but are **designed to work together**. The Patient’s Medical Home (PMH) provides seamless care that is centered on individual patients’ needs, within their community, throughout every stage of life, and integrated with other health services. It’s based on comprehensive team-based care with family physician leadership.
- The Health Networks will **enhance the role of the PMH** and allow it to fulfill its full potential of offering comprehensive, coordinated and continuing care. The PMH exists within, and is supported by, the larger, surrounding Health Network.
- For example, a PMH might not have a full-time dietitian working within the home but there will be dietitians within the Network that will be linked to the PMH so that patients can receive this service close to home, in their home community.
- Multiple PMHs will exist within any Health Network. However, not all physician practices may wish to organize themselves as a patient medical home, and that’s okay. The services and resources that exist within a network will be **available to all patients and their care providers**.

How were Health Network geographies determined?

- The process for development of geographies for the SHA was **data-driven and community informed**. There was oversight from the tri-partite bodies of Health Network Advisory Committee (HNAC) and the Network Program Oversight Group (NPOG), both of which are co-lead between SHA, SMA, and Ministry of Health.

How many Health Networks are there in Saskatchewan?

The process has resulted in **38** Health Networks:

North West: 6
North East: 8

South West: 6
South East: 9

Saskatoon: 5
Regina: 4

What is next?

- The next steps in this process will involve a detailed inventory on the current population’s health status within each network followed by an assessment of health services available locally.
- The goal is to align resources as best as possible with local health service needs so patients receive care as close to home as they can.