Provincial Clinical Teams have identified necessary improvements in areas such as coordination of care, proactive prevention and screening, increased access to specialist care and reduced travel out of community.

The importance of building capacity for care closer to home has emerged as a central theme throughout the development of the provincial plan. The special role of each health resource in communities across the province, whether primary care clinic, health centre or hospital, will support the delivery of consistent, high quality health care to Manitoba patients.

A well-planned and coordinated health system will enable investments to be made strategically, enabling sites across the province to offer consistent standards of care, building appropriate connections to technology and ensuring infrastructure exists to support the rapid referral and transfer of patients when needed.

System Level Issues and Opportunities

Clinical planning has offered an opportunity to look critically at how we care for patients today, to embrace what is working and identify what must change in order to provide better care.

Inconsistent and often unpredictable services are evident across a number of Manitoba facilities, resulting in variable health care for Manitoba patients based on where they go or even the day of the week.

**QUICK FACTS**

In Manitoba there are more than 70 identified Emergency Departments (EDs).

- **19** are on long-term suspension with EMS redirects in place.
- **16** other sites have shared care models or limited hours of operation.

In 2018/19, there were more than **3500** unplanned closures days across Manitoba EDs related to lack of physician availability.

**SNAPSHOT OF ED VOLUMES**

- **30,000+** visits to Winnipeg hospitals
- In rural Manitoba...
  - 10 sites **10,000+ visits**
  - 34 sites experienced **between 1,000-10,000 visits**
  - 16 sites experienced **less than 1,000 visits**

Limited access and variable levels of service in community-based rehabilitation and home care services mean a high number of beds are occupied by ALC patients waiting for home care.

Sources: Manitoba’s Provincial Clinical and Preventive Services Plan, 2019

*2016/17 data**
Modern health systems organize services so that patients with similar care needs are grouped together, where local services are accessible, reliable and high quality. Where providers work to their full scope of practice and access to specialized services is coordinated and consistently available either through virtual or in-person consultation.

Manitoba’s first Provincial Clinical and Preventive Services plan is building a health system for the future, a system where patients from across the province have access to consistent care from skilled providers, with the tools, education and support they require to provide their patients with appropriate care.

This “Provincial Network Model” may include care provided locally by a health care provider, but it could also involve a virtual consultation with a specialist or a referral or transfer to a specialized centre for more complex care.

A Provincial Network of Care

An integrated provincial network will focus first on building up primary care and community services while establishing inter-professional teams to provide enhanced services in the community. In this model, facilities and resources are identified as local, district, or intermediate hubs while a provincial referral hub, made up of facility-based care, specialty teams and specialty services will provide the most complex care.

Locally, care providers will offer enhanced primary care and community services, managing low acuity, general medicine and transitional care as well as community-based rehabilitation and primary care. Local hubs will have clearly defined pathways to more specialized care for patients, including direct access to provincial services through the Provincial Referral Hub.

District Hubs will provide care for patients with low to moderate acuity health issues and would also perform some general medicine and surgery interventions as well as post-acute treatment and emergency services. District sites will also provide enhanced care in areas like midwifery, palliative care and mental health, which will align with the needs of the local population and available health human resources. Clearly defined pathways will guide providers and patients to more easily access specialized care at Intermediate Hubs or the Provincial Referral Hub as required.

Intermediate Hubs will support the provision of care closer to home, offering moderate complexity medicine and surgery procedures, critical care and emergency services. Clear pathways will establish how patients move between levels of care according to their needs, with direct access to the higher acuity and specialty services offered by the Provincial Referral Hub.

Each facility across Manitoba, within each level of care, will offer services appropriate to the specific population they serve and the human resources available locally. Common across each level – and fundamental to the success of the network model – is recognition of the importance of primary care and community services and a commitment to ensuring patients are able to easily access care closer to home.

Where and How Care is Delivered - Strategic Shifts will Improve Care

Shifts in how and where care is delivered across Manitoba will improve access, consistency and quality of care for patients.

As Manitoba’s first Provincial Clinical and Preventive Services Plan is developed, opportunities to enhance capacity closer to home for appropriate medical, surgical and rehabilitative care and improve how specialized services are accessed, are being identified.

Priority shifts will enable services to be better integrated and coordinated, with connections established between communities and facilities. Centralized intake, coordinated points of contact and strategic investments in areas like digital health and diagnostics will ensure patients are more easily able to access the care they need, closer to home.

**Strategic shift 1: Enhance local capacity**

**Strategic shift 2: Increase access to specialized care**

**Strategic shift 3: Build care closer to home**

**Strategic shift 4: Provincial practice improvements**

**Strategic shift 5: Effective chronic condition management**