

March 2015

## Island Health – Geographic Realignment

### Background:

Island Health is realigning its program, service and administrative structures to a more geographic, community-based model. This shift originates from a 2013 strategic planning process that involved Island Health staff, physicians and community stakeholders. This engagement process identified the need to shift how health care services are delivered to better support the health of the population by:

- Delivering care that is driven by patients/clients to better meet their needs and improve their experiences;
- Supporting patients/clients to move smoothly through the health system with improved outcomes;
- Strengthening local accountability and decision-making;
- Engaging community partners in ways that better support residents, patients and clients; and
- Creating a great place to work and learn for Island Health employees and physician partners.

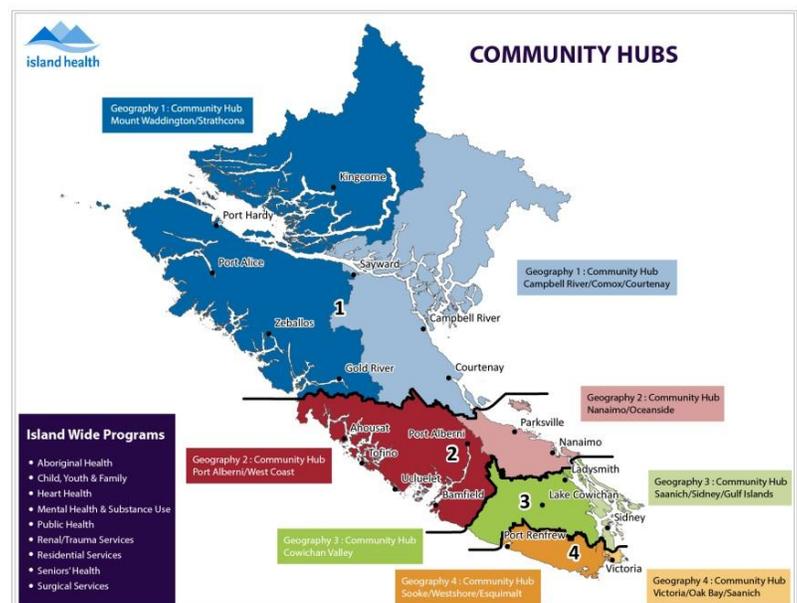
Island Health recognizes people are better served when planning and decisions are made with the needs of local communities in mind. Communities have a unique understanding and knowledge of their local area and population. A more community-based model for health and care will improve how Island Health can support the long-term health of the population and needs of patients, clients and residents.

This geographic realignment is an ongoing process that will continue to evolve over time.

### Geographic Regions and Community Hubs

Island Health has created four broad geographic areas. Island Health considered where people live (population distribution), where Island Health provides care (concentration of staff) and distances between care locations when creating these broad geographic areas.

For the public and health care providers who work in the community, it is important to note that these geographies will not place ‘borders’ around communities or patients; neither do they determine how or where patients are referred to for services.



Each geographic area is jointly led by a leadership team of an Executive Director and an Executive Medical Director (a physician) who share accountability and responsibility for services across the geographic area.

Each of the four geographic areas is in turn divided into several community hubs under the leadership of a Director as well as a Medical Director. Within each hub there will be a combination of locally-delivered and managed health services (e.g. emergency departments, home and community care) as well as services that are planned and coordinated across Island Health (e.g. mental health and addictions, public health, specialized hospital services). Locally-managed and delivered health services will evolve and be integrated at a community level, based on input from local communities, staff and leadership.

Within the communities, there are also clinical directors overseeing the three largest hospitals (Nanaimo, Victoria and Royal Jubilee).

Island Health’s intent is to build on existing community partnerships and develop new relationships across our service areas that create solid community networks which support excellent health and care for patients, clients and residents.

### Continued Specialized Island-wide Services

While several of Island Health’s programs and services will be transitioning to the community-based delivery model, initially some specialized programs and services will continue to benefit from an Island-wide structure and planning process. While these Island-wide services will continue to be integrated with the other programs in the communities in which they are delivered, the Island-wide approach has been maintained for these services to ensure an overarching approach for highly specialized services (such as surgical programs, heart health, renal programs, medical imaging, laboratory, pharmacy, public health, child/youth/family, seniors’ programs and mental health and addictions).

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