

How do you build equity in neurotrauma care? Neurotrauma Care Pathways in action

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Purpose

To develop regionally based implementation plans and companion quality indicators for the evidence-based Neurotrauma Care Pathway for all Ontarians living with traumatic spinal cord (SCI) and/or brain (TBI) injuries.

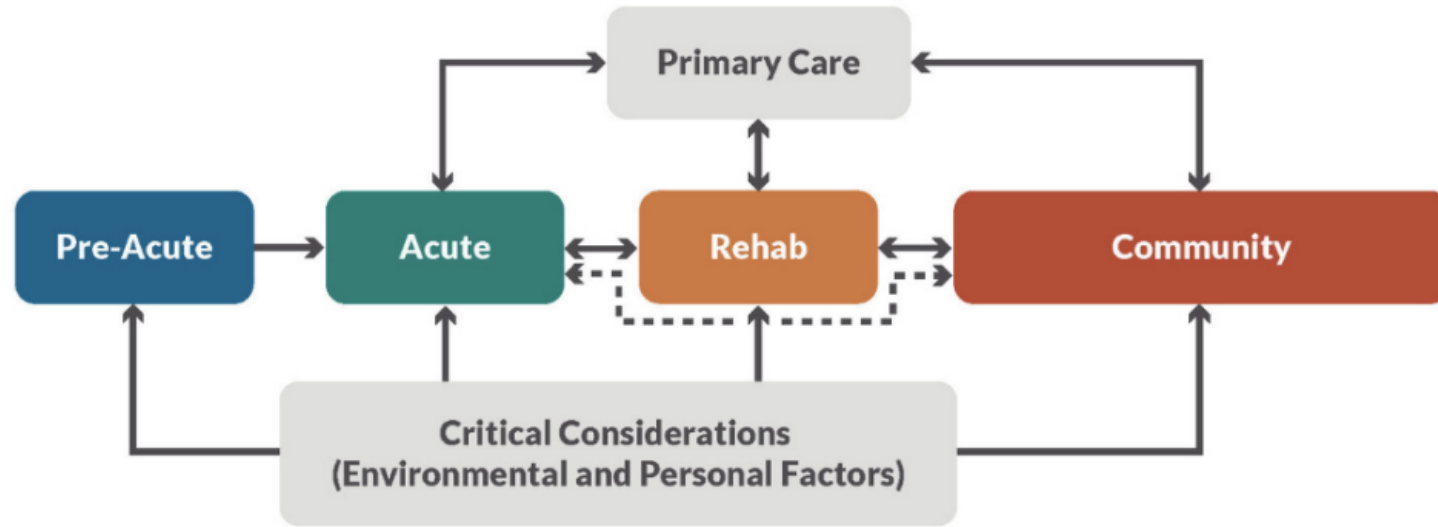
Why

Ontario lacks an equitable system of care for SCI and TBI and a common Pathway that is used in public and private healthcare is necessary.

How

Engage with regional key partners (public and 3rd party; N=160): persons with lived experience, caregivers/family and friends, clinicians, service coordinators/ navigators, service managers, healthcare planners, etc

Overview of the Ideal Care Pathways



3 related but separated Pathways

- Concussion



- Moderate to severe TBI

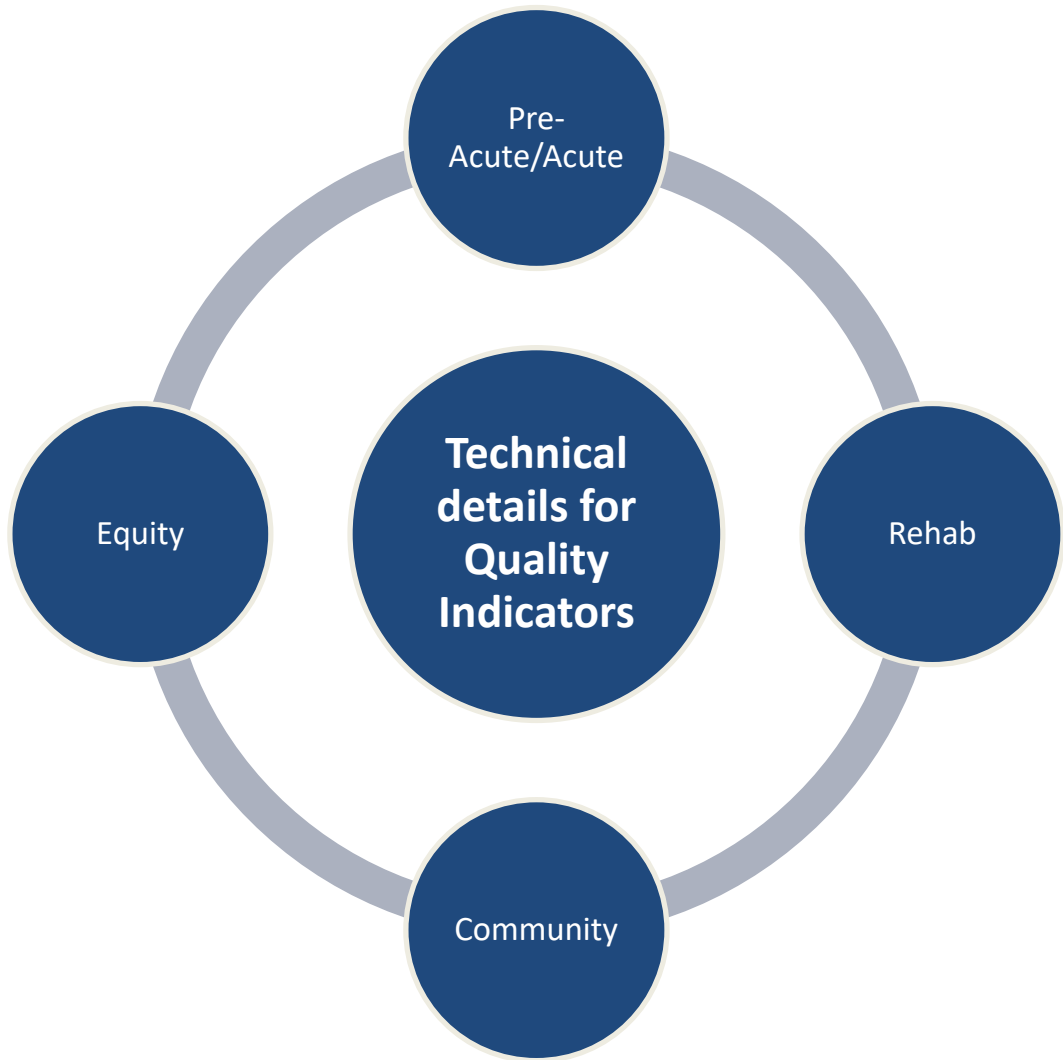
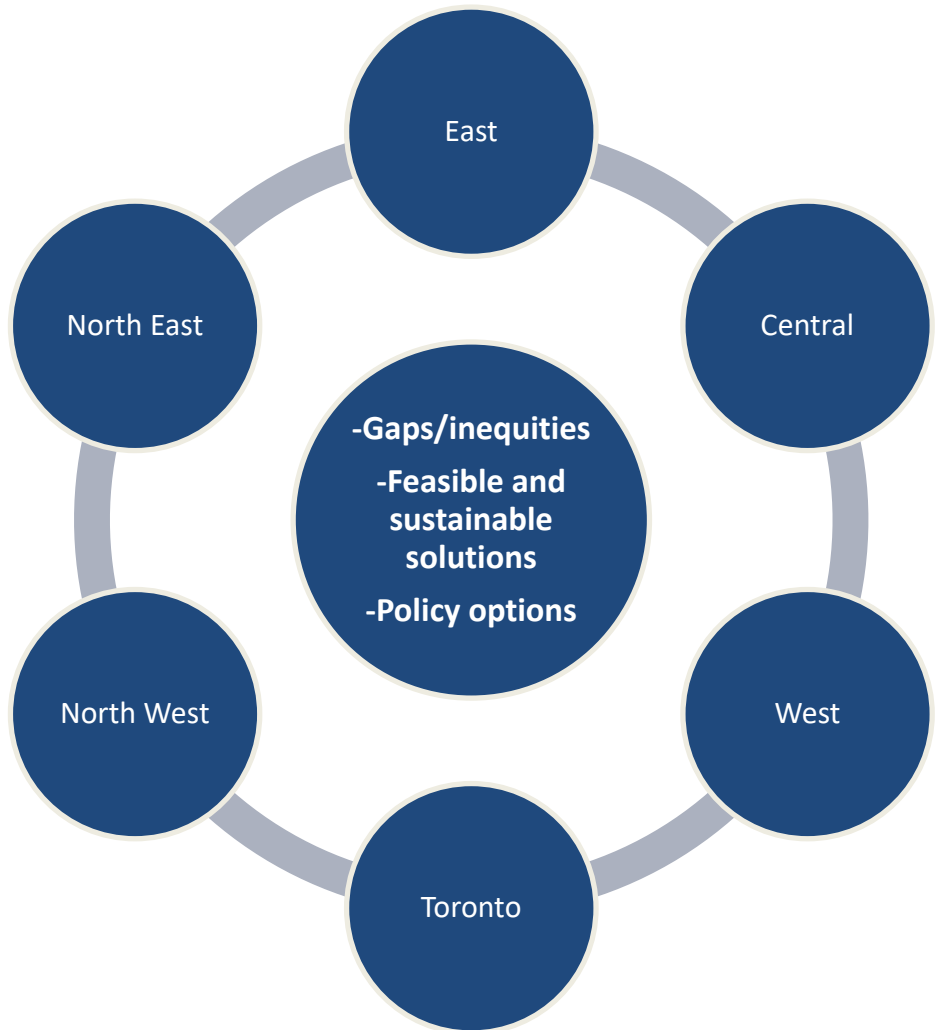


- tSCI



- Building blocks of ideal care linked to clinical practice guidelines have been created for each care stage across the lifespan
- It is a framework to develop strategies to assess the quality and equity of care across the health care system and lifespan
- Personalization is possible based on geography and individual circumstances

Working Groups



Separate SCI and TBI groups; merge at end of process

Regional Priorities

All 6 regions are working on similar priorities and have developed short-, mid- and long-term actions

Improve care coordination within existing structures

Short-term: Clear and standardized pathways for service referrals

Mid-term: Role standardization (funding, scope of work) of provincial system navigators

Long-term: Scale navigation services to serve more people – ↑ funding

Improve education/training for healthcare providers (regulated and non-regulated)

Improve access to community services and supports, particularly primary care, specialized services and HOUSING

Quality Indicators

- Clear definitions of Quality Indicators: **who, why, how, where**
- Engage data coders/abstractors to ensure data collection is consistent and indicators have high face validity
- Continue to collaborate with public and 3rd party data providers (Home and Community Care Support Services, WSIB, and Ontario Rehab Alliance) to discuss the types of data that can be collected and how it can be shared
- Leverage standardized Patient Reported Experience Measures (PREMs) to assess care quality/equity.

Conclusions

- Creating equitable specialized services in a regionally funded system is very challenging. **Equity is not the same as equal**
- What can **you do** at an organizational/clinician level?
 - Stay engaged with our project to share best practices and collaborate with other service provider organizations – COMMUNICATION and COLLABORATION
 - Implement the core set of quality indicators; share the data and lean into what it tells us
- What is the Neurotrauma Care Pathways going to do?
 - Continue to work at the provincial and regional levels to tie everything together.



Be MINDFUL of the service you provide, how you provide it and how you know you are making a difference in the lives of persons with TBI

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