

**Transformation Update
June 14, 2018**

General Information:

Information related to Manitoba’s Health System Transformation will be regularly updated, highlighting key activities and progress made at <https://www.gov.mb.ca/health/hst/>.

This website will include the most up-to –date information available to both health system staff and the public. If you have additional questions, please raise them with the transformation program by email at healthtransformation@gov.mb.ca.

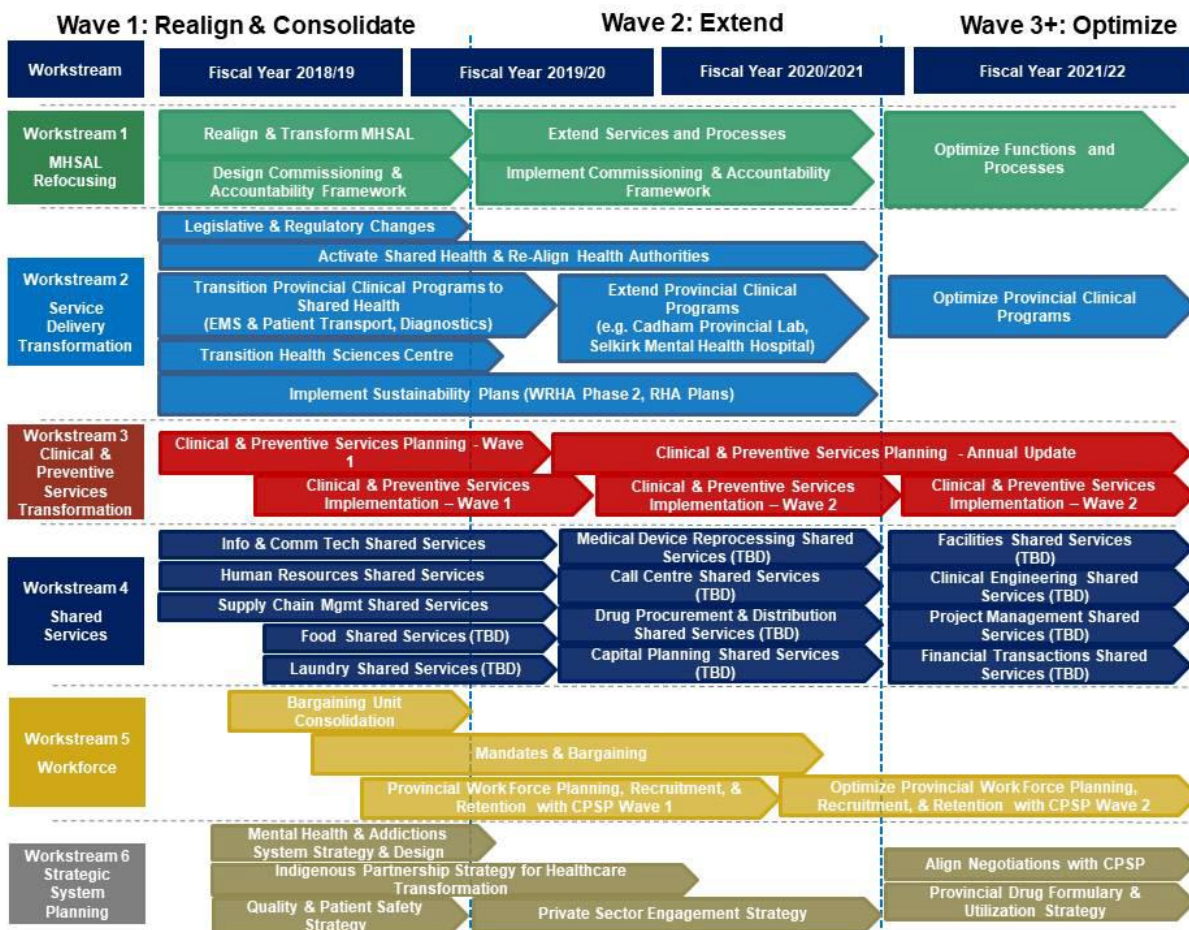
New Developments:

Blueprint and Roadmap

The transformation leadership team (<http://www.gov.mb.ca/health/hst/program.html#tlt>) has now finalized a blueprint (the “what”) that outlines the role of each health organization, the functions it will perform in the target state and how organizations will interact with each other to achieve a more aligned and responsive health system for Manitobans.

The roadmap (the “how”) that will guide the implementation of changes is made of a series of individual projects to be implemented in three waves over a five-year time frame. The projects are intentionally organized in their timing and focus to ensure the foundational changes – including the further establishment of Shared Health and the development of a provincial clinical and preventive services plan – are in place to enable the success of projects in future waves. (See figure 1 below). For more information, visit: (<http://www.gov.mb.ca/health/hst/resources.html#updates>).

Reviews will be conducted at the end of each wave to ensure projects remain on track and are achieving their anticipated benefits. As part of the planning process, a thorough evaluation and detailed business case will be developed for each project before decisions are made to implement changes.



The Need for Change

Currently, services are funded by the health department and organized through five regional health authorities, three health organizations and provincial services and facilities.

More than 200 service delivery and stakeholder organizations, more than 250 service purchase agreements and 183 bargaining units exist in the current state, resulting in a health system that has been described by numerous expert studies as being “overly complex”. Complexity increases costs and affects how care is delivered.

Wave One

Wave One includes changes that lay the foundation for strategic system realignment, including refocusing the role of Manitoba Health, Seniors and Active Living into one of health-system planning, health-system performance and accountability management, as well as shared services for information management and analytics. The roles of all health system organizations will be realigned and Shared Health will be established.

This wave includes a focus on the development of a provincial clinical and preventive services plan, the early stages of which encompass efforts to align the planning and implementation of clinical consolidation in Winnipeg with the broader provincial plan. Health Sciences Centre Winnipeg will transition to Shared Health, and work to streamlining bargaining units, simplify labour negotiations and establishing priority shared services within Shared Health.

An Indigenous partnership strategy will be developed to ensure engagement and partnership with Indigenous organizations and communities throughout the transformation process.

By the end of Wave One, the planning for organizations within the health system to adapt to their new roles and functional responsibilities will have largely been completed.

Wave Two

Wave Two focuses on extending services to achieve more consistent provincial service delivery. Shared services and provincial programs will continue to be consolidated, following thorough evaluation and the development of detailed business cases for each area of focus. Work is expected to begin in areas related to medical device reprocessing, pharmaceutical procurement and distribution and capital planning.

Manitoba Health, Seniors and Active Living will no longer provide direct service delivery, and will transfer operations of Selkirk Mental Health Centre and Cadham Provincial Laboratory to Shared Health. The implementation of a provincial clinical and preventive services plan will continue through this wave, as will service and protocol changes to emergency medical services across the province.

The clinical and preventive services plan will include recommendations for service changes in rural Manitoba based on population need. Additional planning and evaluation is required to ensure consistent, reliable, high-quality services are available province-wide.

Wave Three

Wave Three completes the transformation, aligning planning, implementation and labour negotiations across all projects to ensure the successful functioning of each organization within their target state.

The new structure will be both administratively and organizationally smaller – with fewer organizations (eight versus 12), fewer boards (seven versus nine), fewer bargaining units (approximately 40 instead of 183), and standardized service purchase agreement templates (two versus more than 250).

Common standards of care will be in place across the province, leveraging services that should be delivered provincially to ensure both excellent care and efficient delivery in a system designed to be patient centric.

Next Steps

Many of the foundational projects and activities required to get the health system from the current state to the target state are underway. Work to plan individual projects and program-wide activities, and to identify their resource needs, is ongoing. For updated information on project planning, resource requirements and the status of applications from staff interested in participating directly in the health system transformation, please visit <http://www.gov.mb.ca/health/hst/faq.html>.