Remote Care Management During the COVID-19 Pandemic

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What is Remote Care Management?

Remote care management (RCM) programs are enabled by technology to provide high quality evidenced based care and promote patient self-management.

RCM programs utilize remote monitoring solutions to assess a patient's ongoing health status and utilize this data to guide care plan changes, address patient education needs, and activate interventions to proactively address emerging issues.

New Funding Opportunities for RCM

Ministry News Release

COVID-19

Improve COVID-19 care by ensuring safe access to health care while abiding by self-isolation and social distancing guidelines.

Program Example

Michael Garron Hospital | South East Toronto Family Health Team

Discharged COVID-19 patients answer questions remotely about their condition through an app or by phone. Nurses review responses and arrange virtual visits or physician consults if necessary.

More Information

MGH Media Release | OH (OTN) Resource

Sample COVID-19 Pathway

Geriatric Rehab

Support vulnerable seniors and provide safe transition from hospital to home along with positive handoffs to other community care.

Program Example

Centre de soins prolongés St. Joseph's Continuing Care Centre

Discharged patients use an app for care-plan reminders, self-care resources, and virtual visits with their care team. Bluetooth devices can monitor blood pressure, weight and pulse.

More Information

St. Joseph's Media Release

Sample Geriatric Rehab Pathway

Surgical

Positively impact recovery and overall experience of care by enabling surgical patients to heal at home with their family or caregivers nearby.

Program Example

Central East LHIN | Lakeridge Health

Surgery patients recover at home with an app to track their symptoms and conditions daily, with a virtual nurse-surgeon team monitoring and escalating to a hospital team if needed.

More Information

Lakeridge Media Release

Sample Surgical Pathway

Palliative

Provide support to patients who prefer to receive in-home palliative care by connecting them with their health care team.

Pilot Program Example

Champlain LHIN | Bruyère

Patients respond to self-assessment surveys on a tablet from their home. Care providers receive real-time feedback which can trigger specific events and corrective actions.

More Information

Champlain LHIN Project

Sample Palliative Care Pathway

Chronic Disease

Drive positive behaviour change by complementing existing care with a preventative and upstream approach to empower patients to learn about their condition and manage it appropriately.

Program Example

otn telehomecare — Better Health. At Home.

Provincial six-month health coaching and remote monitoring program, free for patients with chronic obstructive pulmonary disease (COPD), congestive heart failure (CHF), and diabetes.

Telehomecare is available in 9 LHINs with 11 host sites that operate the programs.

Lower Intensity Model

Shorter-term patient-centred program, for more activated patients and is tailored to their needs.

More Information

Learn More and Get Started With Telehomecare

Sample Chronic Disease Pathway

Other RCM Programs in Ontario

medly | CPRPM | Future Health — Better Health At Home.

Hamilton Health Sciences

University of Ottawa Heart Institute — Institut de cardiologie de l'Université d'Ottawa

THE SMARTVIEW CoVeRed

Send us your feedback!

This summary describes some remote care management programs and does not represent all of the virtual care offerings available in Ontario. For more information, please email info@otn.ca.

Ontario Health OTN