

# Integrated Decision Support (IDS)

Enhancing Access to Integrated Health Data for Ontario's Health Care Providers

An OHA Collaborative



When organizations across the health system have access to the same information it allows for better informed system-level collaboration.



## Who we are

Health system integration has been a long-standing goal for both health care providers and governments alike. However, access to data has been a persistent and common challenge to integration.

**Integrated Decision Support (IDS)** was developed to address these data “blind spots” across the system. IDS is a data sharing platform across a host of subscribers, which includes hospitals, home and community care, primary care, community health centres, community mental health, paramedic services, and population census data. Currently in the pilot stage are integrations with community support services and long-term care.

Through a *Personal Health Information Protection Act* (PHIPA)-compliant access algorithm, IDS offers **data at a patient level** across a continuum of health care services – not just what occurs within the purview of a single organization or provider. IDS has evolved into Ontario’s most mature and widely used collaborative solution for sharing integrated health partner data for planning, system-wide improvements, data quality and CQI, performance and analytics.

## What we do

Building a better health system for Ontario requires shared insight and information across the system and IDS enables this by **actively collecting and linking normalized data sets and applying flags, risk scores, and indicators across the patient’s journey**. When organizations across the health system have access to the same information, it allows for more informed system-level collaboration.

Because patients have the right to choose where they receive care, often crossing regional boundaries, IDS offers viable and effective tools that give providers a line of sight into the patient journey. More than just a data sharing platform, **IDS makes it easy to turn data into insights** through hundreds of pre-built, on-demand report templates and dashboards that save analysts countless hours of data preparation work. This equips providers with greater insight into potential solutions aimed at generating efficiencies and enabling better system planning.

## How we do it

Currently, IDS links patient data for...

**100+**

Health organizations  
across regions

**1000+**

Users

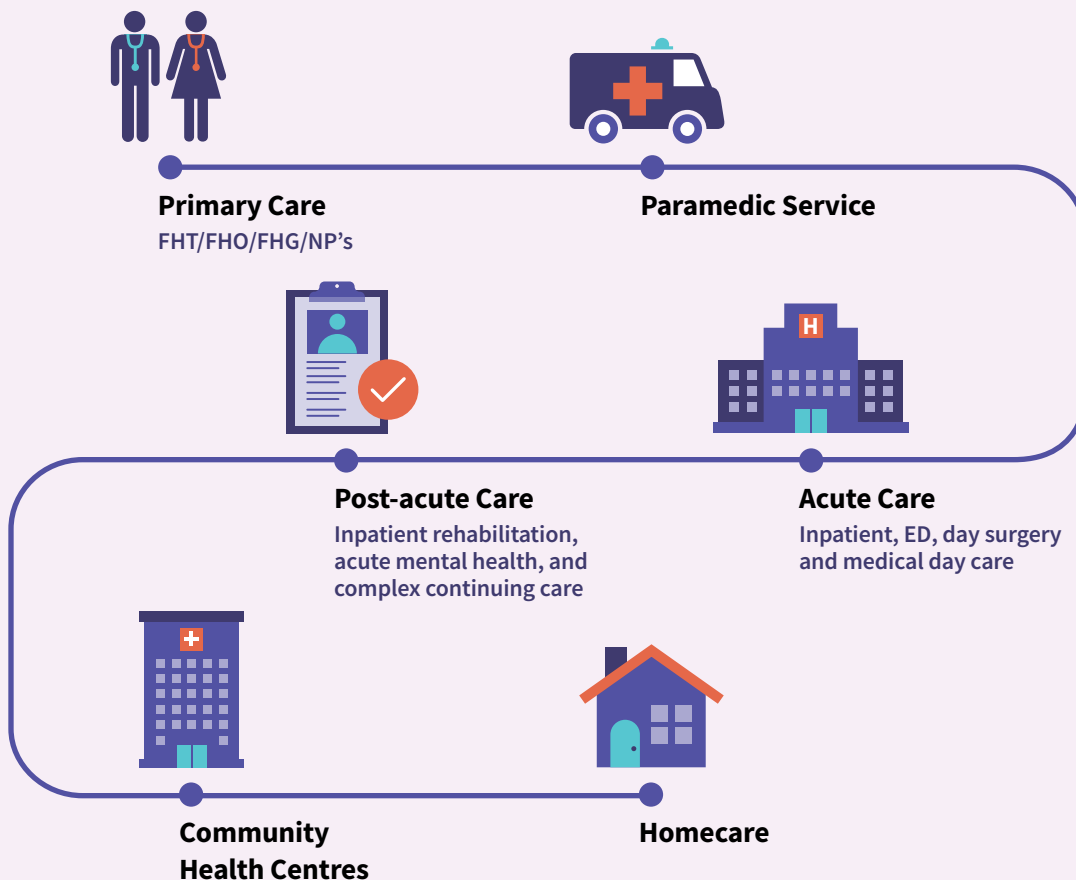
**180+M**

Encounters

**9.8+M**

Unique patients

Using a timely longitudinal patient record,  
IDS clients can follow patient data:



These data are used for system planning, performance management and efficiencies, analytics, reporting, integrated care planning, outcome measurement and evaluation, and population health management.

IDS also integrates province-wide Statistics Canada Population Census information and the Ontario Marginalization Index, **allowing population health equity concerns to be married with health care data utilization in a population health management approach right to the patient level.**

IDS continues to attract new subscribers due to its unique ability to support Ontario Health Teams (OHTs), integration activities, and cross-sector care programs like bundled care.



## What's unique about IDS?

**IDS is not an aspiration. It is having daily impact as a 'for provider, by provider' solution putting analytical power in the hands of its user community.**

Timeliness of the data available through IDS is critical for providers' analytics, and as such, any new data, when submitted, are made available weekly in IDS, with most organizations submitting new data each month.

IDS is continuously attracting new subscribers because of its unique ability to support Ontario Health Teams (OHTs), integration activities, and bundled care. Continued expansion of the IDS network to include more data sharing partners will give more OHTs the benefits enjoyed by current IDS users and provide limitless possibilities and opportunities to evaluate program and service changes as teams mature and bring on new partners. Exciting pilots are underway with non-traditional datasets, such as hospital ambulatory clinic and community support services data. These datasets promise to add even greater value to IDS' already rich longitudinal patient journey insights.

As a not-for-profit collaborative solution that is provider-led and locally developed – IDS is responsive to its clients' needs. This shared resource is a pathway for organizations looking to address data gaps which have impeded their efforts to integrate care.

The more health care providers that participate in the IDS network, the richer the data available to improve health service delivery across the province. Ultimately, **IDS is actively supporting the vision of an integrated and patient-focused system of care.**

# Benefits of IDS

**Integrated Patient Data** – IDS offers a comprehensive ready-to-use platform with an integrated view of patient activity. Organizations are not limited to their current data sharing partners, but any IDS participant that their patient’s encounter.

**Save Analyst Time** – By removing the “grunt work” of data analysis, IDS helps save much-needed time. The pre-linked data – complete with pre-defined flags, metrics, and segmentation tools – saves countless hours of data preparation and curated tools allow analysts to easily monitor, benchmark and evaluate cross-sector interactions and performance.

**Economies of Scale** – There is no need to build infrastructure, reports and negotiate multiple partner agreements as IDS provides a robust, pre-built platform with data governance, data sharing agreements, and hundreds of pre-built solutions inspired by an active community of analytical users.

**Timely Access to Data** – Getting access to data that are 30 to 55 days post-encounter supports rapid cycle outcome testing and performance monitoring. Moreover, the IDS cubes can be made accessible to an organization’s BI tools in addition to the tools provided within the IDS Portal.

**IDS can segment, cluster and stratify the population to identify ‘actionable’ patients within an integrated care risk pyramid and complements the quintuple aim framework. Key Performance Indicators can then be applied to an organization’s or OHT’s cohort for tracking and trending.**



By Disease/Diagnosis/  
Condition



By Utilization/Cost



By Ontario Health/  
Ministry of Health  
Indicators/KPIs



By Patient  
Risk Score



By Geography



By Attributed  
Population



By Social  
Determinants  
of Health



By combinations  
of above

**Interested to learn more? Contact:**

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