**APPLYING THE HEALTH LINKS APPROACH FOR ADULTS WITH INTELECTUAL/DEVELOPMENTAL DISABILITIES AND COMPLEX HEALTH NEEDS**

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**Objectives:** Health Links is an Ontario initiative that brings together local healthcare providers to redesign an enhanced coordinated model that is patient-centered for the purpose of improving outcomes for the most complex patients. People with intellectual/developmental disabilities (IDD) have been identified as a complex population that would benefit from Health Link system coordination across healthcare and social sectors as past research has shown that they experience higher rates of emergency department use, higher rates of hospitalizations due to ambulatory care sensitive conditions, and have poorer health status and access to health care compared to the general population. The tool used by Health Links is the Coordinated Care Plan (CCP), which helps patients, their caregivers and health care providers identify goals, document health information and develop a coordinated plan that is tailored to fit the patient’s unique needs for health and social support. This pilot study examines the integration of the Health Link’s approach and tools with the Ministry of Community and Social Services (MCSS) Developmental Services sector’s IDD expertise for patients with IDD and complex health needs. Our study will assess the feasibility and success of implementing the Health Links approach to care coordination for adults with IDD and complex health needs and examine the clinical and social outcomes for participants.

**Methods:** Patients with diagnosed/identified IDD and complex health (as defined by the Kingston Health Link (KHL)) are referred to the study by members of the MCSS’ Pressures and Priorities committee in Kingston, Ontario. Thirty eligible participants (and their informal/professional caregiver where necessary) meet individually with a KHL nurse who completes the CCP (which has been modified from the Ministry standard form) and ensures the plan is put into action through engaging health and social care providers. Using a mixed method approach, researchers will evaluate the implementation of this pilot project. Surveys and interviews with patients and caregivers, as well as chart reviews at the primary care and hospital level will explore the experience of participants and examine health/social service usage of participants before and after the intervention.

**Results:** Data collection is in progress. Our presentation will outline the various approaches and tools used in coordinating care for this vulnerable population. It will also highlight patient demographics, early patient and system outcomes related to the implementation of the CCPs, as well as barriers and facilitators related to fostering cross-ministerial coordination and collaboration.

**Discussion/Conclusion:** The goal of the intervention is to increase the capacity of healthcare providers and social services workers to deliver coordinated, patient-centered care to some of the most vulnerable and complex patients in our region. As funding and support for Health Links continues to grow in Ontario, this pilot project can be used as a framework for the expansion of Health Links interventions that target other vulnerable populations across Ontario’s LHINs.

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