

## Tiers of Service Framework and Approach

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### A Provincial Approach to Service Planning

Planning and coordinating children's health services is a major area of focus for Child Health BC and its collaborators (health authorities, ministries, non-profit organizations, school boards, etc). **The Tiers of Service framework** provides a tool to define and plan such services.

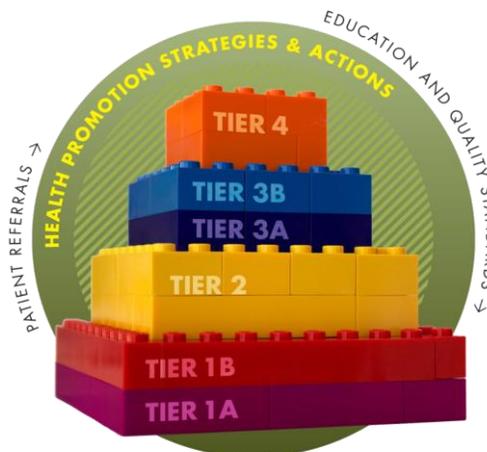
Utilizing a common language and methodology, the Tiers of Service framework:

- Recognizes that health services, while important, are one of several factors that contribute to child and youth well-being overall.
- Is informed by a review of frameworks/tools in other jurisdictions around the world (e.g., Queensland, UK).
- Facilitates system planning for clinical services, knowledge sharing/training and quality improvement/research. The responsibilities and requirements in each of these three areas are defined within the Tiers framework.

### Tiers of Service

The Tiers of Service framework recognizes **six tiers of service**:

- Tier 1A: Prevention, primary & emergent health services
- Tier 1B: General health services
- Tier 2: Child-focused health services
- Tier 3A: Designated children's health services
- Tier 3B: Designated children's health services with some subspecialties
- Tier 4: Subspecialty children's health services



### Using the Tiers of Service for Service Planning

Child Health BC is leading the use of the Tiers of Service approach to system planning. This is being done through:

1. *Creation of a series of modules*: For each of the major areas of health services - such as children's emergency care, children's medicine, children's surgery, children's intensive care - a Tiers of Service module has been or is being created. Each module has 3 parts:
  - Setting the Stage: Summary of data and literature used to create the module.
  - Tiers in Brief to Support System Planning: High-level overview of key aspects to the module.
  - Tiers in Full to Support Operational Planning: Significant detail regarding the (1) clinical service; (2) knowledge sharing/training; and (3) quality improvement & research responsibilities and requirements.
2. *Self-assessment based on the modules*: Once a module is finalized and accepted by the key partners in the province, a self-assessment is completed. Child Health BC works with health authority partners as necessary to get this work completed.
3. *System planning and service planning based on self-assessment results*: Using the self-assessment analysis, provincial, regional and local planning is undertaken through collaboration of CHBC and its partners.

Collectively, the modules and their components provide the foundation for provincial and health authority (HA) planning.