

Cultivating quality care that is patient centred, timely, efficient, effective, equitable and safe.

Palliative Care

Planning has started in order to identify the location of a palliative room and family area in Wingham. Through the initial stages of the planning exercise, it is clear that improvements are also necessary to the isolation room in Wingham along with inpatient washroom facilities. It is hoped that planning and construction drawings can be completed in the next few months in order to allow construction to begin immediately after the large redevelopment.

Accreditation Update

During accreditation, we failed a Required Organizational Practice (ROP) related to narcotic safety. The surveyor was concerned that we were not labelling high alert medications adequately. Last summer we put careful safe labelling practices into place to provide additional warning to staff accessing high alert narcotics in the Omnicell cabinet; therefore, we appealed the decision. We have received notification from Accreditation Canada that our appeal was successful. Accreditation Canada has awarded us with the highest level of performance: **“Accredited with Exemplary Standing”**. Exemplary Standing demonstrates excellence in quality improvement while meeting all ROPs.

Clinical Informatics

Nursing clinical documentation has gone live at both sites in the Emergency Departments. Staff were trained by the informatics team prior to go live. Additional staffing, regional professional practice, and the clinical informatics team were present to support. This new system will improve clarity and standardization of documentation, while allowing notes to be available across care encounters and sites. This will improve safety and efficiency. The new functionality has introduced an adjustment for nursing as they learn to modify necessary workflows and navigate the new IT components. Physicians are adjusting to the retrieval of the documentation that is now found within the electronic chart. The new functionality and additional components of our EHR have been well received by the clinical staff. Both emergency departments have also adopted closed loop medication administration, in line with the inpatient areas.

Professional Practice

The Regional/Rural Trauma Team Development Course (RTTDC) is coming to both LMH and WDH emergency departments this spring. It emphasizes a team approach to the initial evaluation and resuscitation of the trauma patient outside of a Level I trauma center. With more than 60% of trauma deaths occurring in rural areas, this course focuses on shared strategies between trauma physicians and nurses from LHSC and our regional partners to manage complex trauma patients. This one-day course includes interactive lectures and trauma simulation in your own institution to facilitate the team's understanding of our unique resources and challenges. This course offered in rural centers will

help to develop strategies for the optimal care of trauma patients in Southwestern Ontario. Staff and physicians have shown strong interest in attending. This course will occur in Listowel on April 5th and in Wingham on May 24th.

Rapid Assessment Zone (RAZ)

Through work completed to reduce wait times to admission for admitted emergency department patients we discovered that patients are more concerned with wait times to see a physician. Patient surveys and discussion with staff have verified this. The LMH emergency department RAZ is on track to go live in April. As we get closer to the go live, we are encouraging providers to ensure documentation of physician assessment time on the emergency documentation so that we can begin assessing the average times that patients wait to see a physician. We have started auditing how often this documentation is complete so that we can collect accurate wait times to see a physician. Collecting this baseline will help us understand if our changes are leading to improvement once the RAZ trial has begun. The data is being reported back to physicians at the medical staff advisory committees.

Cultivating a workplace that nurtures individual and collective potential.

Volunteer Appreciation

Volunteers have a significant and vital impact on the patient experience at both sites of the Listowel Wingham Hospitals Alliance. Our volunteers include Auxiliary members, Foundation members and the Hospital Board plus some individuals who provide support to specific areas within the hospitals such as entertainment or spiritual care. Vicki Bartel of Listowel organizes an evening meal and entertainment to acknowledge volunteer efforts at the Listowel Memorial Hospital on April 25th. A luncheon will be hosted at the Wingham Legion on April 18th in conjunction with the Wingham Auxiliary's spring rummage sale and volunteer appreciation week. Hospital and Foundation members are welcome to attend either event.

Physician Recruitment

There has been significant recruitment activity recently at both sites. Dr. Shubat has announced his retirement effective March 31, 2018. Two new grads who are hoping to begin practice in July have toured the Wingham, Lucknow and Teeswater clinics and continue to express strong interest in our communities. A GP anesthetist along with his spouse, a nurse practitioner, have recently toured Listowel and are expected to return in April for a locum opportunity. Plans are being finalized to preserve the roster of patients in Lucknow in order to have a practice available for any potential new recruits. Locum and nurse practitioner coverage is also being arranged to cover the Lucknow clinic.

Nursing Resources

We are in the process of interviews as we have had great response to our nursing postings. We have hired one RN, with several potential hires pending. We are currently interviewing RPNs.

Cultivating a sustainable and resilient environment that is here for future generations.

Finance

Both hospital corporations are expected to end the fiscal year with surpluses from hospital operations. Expenditures on wages and benefits are very close to budgeted amounts. Ministry of Health and Long Term Care and Cancer Care Ontario funding are higher than expected, while amortization (depreciation) is lower than expected due to delays of significant capital projects and large diagnostic imaging equipment purchases.

We are currently finalizing contract details with the preferred respondent to the Request for Proposals, Ward and Uptigrove, to conduct the search for the Chief Financial Officer position.

Hospital Services Accountability Agreements

Accountability agreements between both hospitals and the South West Health Integration Network are expected to be approved and signed before April 1, 2018. These agreements are on a new template and require additional reporting and attestations to the SW-LHIN.

Redevelopment

Construction continues on the pharmacy and oncology departments. Drywall is currently being installed. The chemotherapy hood or biological safety cabinet and the CIVA or laminar flow hood have both been ordered for the pharmacy.

Improving Efficiencies

A small working group has been formed in WDH to work on improving efficiencies and staff experience related to change ideas identified at a staff meeting in January. This group will look at expanding current trials aimed at improving processes such as break coverage, discharge rounding, assignments, and workflow. Ultimately, our goal is to improve staff satisfaction, prevent clinician burnout, and reduce overtime.

Cultivating partnerships to offer a seamless patient experience.

Schulich Medical School

A presentation was made to the leadership of the Schulich School of Medicine with respect to the challenges of physician recruitment in rural hospitals. The discussion included a review of the current residency model and how it can be improved to benefit rural hospitals in need of recruiting physicians with a strong generalist training and work aptitude. Schulich expressed a strong interest in improving access to learning opportunities in Listowel and Wingham.

Smoother Transitions

We recently met with the supervisor and the deputy chief of operations of Perth County Paramedics to discuss transfer of mental health patients in crisis to schedule 1 facilities. We talked about how we can improve communication between hospital staff and EMS dispatch and crews to ensure smoother transitions, as well as gaps in the current decision making tool developed by the South West LHIN. We will continue to work with EMS, patients, non-urgent transfer, and the South West LHIN to advocate for the safe and effective transfer of these patients. In addition, a guideline for supporting patients in

mental health crisis who need to be admitted to our hospitals has been developed. This will help to support staff and patients when accessing a mental health bed is not possible. Education will be rolled out this spring.

Other Board Highlights

The Board approved the 2018/2019 capital budget plans and the operating budget plans for both the Listowel Memorial Hospital and the Wingham and District Hospital as well as the 2018/2019 Quality Improvement Plan.

Linda Bross from our auditors, BDO, met with the Board to outline the audit plan for 2018/19.

Dr. Anthony DiLabio, a general surgeon from Stratford, was granted Courtesy privileges and will be replacing Dr. O'Neill's time in the Wingham OR.

Dr. Alexandra Peel, a geriatrician, was also granted Courtesy privileges and will be offering a geriatric outpatient clinic in Wingham as well as seeing inpatient one day per week.