



Listowel Wingham Hospitals Alliance

Board of Directors Meeting

February 2019

Enriching life's journey together.

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

Non Urgent Patient Transportation

The current arrangements for non-urgent patient transportation continue to be an issue throughout the South West. Opinions about how to best proceed vary greatly. Hospitals are looking for additional competition for this business. Other hospitals would like to see current Emergency Medical Services take on some of this volume while one hospital is actively investigating the idea of purchasing their own vehicles and hiring staff to provide service. The South West LHIN has agreed to provide some resources to work through this challenge with South Bruce Grey Health Services offering to take a leadership role.

London Cerner

We continue to await the decision of the board of London Health Sciences Centre regarding their commitment and timing to move forward with the Clinical Documentation Project. While LHSC is committed to the goals of the project, their current financial challenges are hampering their ability to move forward. We expect that they will have a final decision by the end of March and if they cannot move forward, the remaining 10 hospitals will proceed on their own without London.

Pharmacy

Pharmacy is working on meeting requirements to become National Association of Pharmacy Regulatory Authorities (NAPRA) compliant. A group has been pulled together to work on all of the elements, including cleaning processes, compounding processes, training, testing and logging, temperature regulation etc. At the end of February, work will resume to correct air exchange issues involving the chemo preparation room and future intravenous preparation room. We are purchasing software and policy/procedures to support the implementation of the changes, with funding from our Small and Rural grant. We will be one of the first hospitals in the region to be compliant. Our pharmacist continues to reach out to regional partners to understand their readiness plans, and collaborate where feasible.

Oncology

We continue to monitor the oncology census. We have recently seen a rise in weekly numbers of treatments. With weather cancellations, it was difficult to find appointments to accommodate the cancellations, as each day was full. With the funding changes, we are working with finance to understand the cost of an additional treatment day, impact to staffing/supplies/cleaning in both pharmacy and oncology, and number of net new patients per week to support a fourth day. In addition, we will be taking part in a Survivorship Clinic trial where patients will receive follow up from an oncology family physician in Wingham, instead of going to see an oncologist in London.

Cultivating a workplace that nurtures individual and collective potential.

Dr. Paul Rutherford

Since 1966, Dr. Paul Rutherford has been providing excellent care to patients of the Listowel Memorial Hospital. Few others can claim his level of dedication in terms of length of service and daily presence in the facility. While Dr. Rutherford will no longer be actively practicing medicine, we suspect he will continue to share his wisdom throughout the Listowel Memorial Hospital. We wish him nothing but the best in retirement.

ASIST Training

Applied suicide intervention skills Training (ASIST) is being offered at the Wingham site. This is in collaboration with the Mentally Fit organization. Participants will include a combination of emergency room nurses and community members. This is a two-day interactive workshop in suicide first aid. Studies have shown that the ASIST method helps reduce suicidal feelings in those at risk and is a cost-effective way to help address the problem of suicide. This practical and interventional learning will offer tools transferable to working with patients presenting to the emergency department with mental health concerns.

Listowel Triage

The Listowel triage renovations are complete. There is significantly more room for patients to maneuver, and the wider sliding door makes the space much more accessible. Nursing staff now have full view of the waiting room through the one-way glass. New desk furniture will improve the ergonomics for nurses working in this space. There is now a safe exit for nurses, should a threatening or violent situation arise.

Medical Advisory Committees

The following physicians were appointed to the Medical Advisory Committees:

Listowel Memorial Hospital

Russell Latuskie – Chief of Staff
Arif Qureshi, President of the Medical Staff
Derek Gateman – Secretary of the Medical Staff
Barb Matthews

Wingham and District Hospital

Greg Antoniadis – Chief of Staff
Jim Shuffield – President of the Medical Staff
Bonnie Marshall – Secretary of the Medical Staff
Steven Vanderklippe
Mark Moores
Shawn Marshall

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

Hospital Service Accountability Agreement

As expected, the LHIN will not accept deficit budgets. With the higher than anticipated transition funding from Cancer Care Ontario, Wingham submitted a balanced budget for 2019/20. Listowel submitted a budget with a 1% deficit along with the required performance improvement plan. We expect to receive 1% in incremental funding and do not have concerns about balancing Listowel in the event this funding is not received.

Quality Huddle Boards

The quality huddle board has been hung in Listowel CCC; with go live the first week of March. The clinical nurse lead has been trained to facilitate the huddles and staff are aware of the pending process. It is anticipated that change ideas will lead to improved efficiencies as staff look for ways to improve workflow and reduce waste.



Cultivating partnerships to offer a seamless patient experience.

Fisher Family Primary Care Centre

In addition to the benefit of having new physician recruits practicing in Listowel, there have been some changes in the Clinic to accommodate the additional practitioners. Some staff have been ‘doubled up’ within existing spaces and other staff have transitioned to using ‘hotel’

Board Highlights – February 2019

workstations that allow them to dock a laptop and work for the day. An open meeting area at the back of the clinic will also be converted to workstation space. Exam rooms are regularly 100% utilized. Once everyone has settled into their practice routine, we will assess the space requirements for primary care in Listowel.

Mennonite Health Care Access Equity

Several Public Health Units in the South West have cooperated on a joint initiative to standardize the rates charged to Mennonite and Amish community members. Despite paying income and other taxes, many Mennonite and Amish do not register with OHIP and therefore receive an invoice for any hospital services. These fees vary greatly by hospital. The proposal is to standardize the rates at 50% of the daily hospital rate determined by the province.

One Care

Following some of the Board discussions regarding the hospital taking more accountability for health care services outside the hospital, we have had discussions with One Care Home and Community Support Services. Most of the discussion focused on potential partnerships that involve the two organizations working more closely together on support for patients at home subsequent to discharge.

Home at Last

Last year in Listowel, we admitted 23 patients to Complex Continuing Care and 34 to Medicine with the diagnosis of *failure to cope*. These patients are often admitted through our emergency room. We are doing some random chart audits and interviewing staff to identify commonalities in root causes for these admissions. We are trying to understand what services could be utilized to support these patients to remain in their homes. Long hospital admissions can be associated with decline in function, and make it more difficult to return home. We will be working with One Care to develop strategies for assisting patients to go home from the emergency department with required resources.

Health Care Restructuring

The Board had the opportunity to discuss the draft health care restructuring legislation, The People's Health Care Act. They also reviewed the draft strategic plan for the Listowel Wingham Hospitals Alliance in the context of this restructuring legislation.

Some of what we know so far about this legislation:

Integrating multiple provincial agencies, including all LHINs and specialized provincial programs, into "Ontario Health", a single agency with a mandate to promote health service integration and provide a central point of accountability and oversight for the health care system.

- Cancer Care Ontario
- Health Quality Ontario
- eHealth Ontario

Board Highlights – February 2019

- Trillium Gift of Life Network
- Health Shared Services Ontario
- HealthForce Ontario Marketing and Recruitment Agency
- and 14 Local Health Integration Networks

Providing Ontario Health with the authority to assume LHIN functions and responsibilities, including, among other things, managing accountability agreements, funding and supply chain management services;

Organizing health care providers to work in new, coordinated “Ontario Health Teams”, focused on patients and specific local needs with the objective of ensuring patients experience easy transitions from one health service provider to another.

Potential Impact on LWHA

- Organizations are determining what partnerships to pursue.
- Feeling that you need to be picking partners or they will be chosen for you.
- Average population size of 300,000. This creates large geographic areas in rural Ontario. E.g. Grey, Bruce, Huron and Perth counties
- No government guidance on governance
- Expectation of fewer transfer payment agencies.