

LWHA Board Highlights September 2017 Enriching life's journey together.

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

Diagnostic Imaging

The CT Scanner is currently serving 7 patients per day with the expectation of 24/7 on call services by December 1st. Diagnostic Imaging staff and radiologists continue to be impressed with the equipment. An arrangement is in place with a large group of radiologists from London for additional and backup radiologist coverage. They commented about the high percentage of positive pathologies that are discovered in their work at LWHA. This is an indication that our physicians are not over utilizing CT services. It also speaks to the quality of work by our techs.

New fluoroscopy equipment has been installed in Listowel. This equipment was originally destined for Wingham, however, we could not coordinate the installation of this equipment with the larger construction project. Wingham's equipment will be installed in January.

Rehabilitative Care

Occupancy in Wingham rehab remains strong at or above the 5 beds. Complex continuing care occupancy has been slightly below targets. There are some great patient success stories resulting from the rehab care. Beyond the service area of the Listowel Wingham Hospitals Alliance, we have had patients from Kincardine, Huron East, Lucan, Stratford, Perth East and West Perth.

Pre-School Speech and Language Services

As part of Ontario's Special Needs Strategy, the Ministry of Health and Long Term Care (MoHLTC) reduced the funding for preschool speech and language services by \$139,778 for Listowel and \$52,109 for Wingham. The Ministry of Children and Youth Services (MCYS) subsequently provided us with the same funding amounts under a one year agreement. It was expected that planning for preschool speech and language services would be finalized by the end of 2017/18. A joint memo from the Assistant Deputy Ministers of Education, MoHLTC and MCYS has asked for a stop to planning activities and suggested a "measured and phased approach". In the meantime, while this has created uncertainty for our staff providing these services, we will continue to maintain our preschool speech and language services.

Quality Improvement and Patient Safety

The LWHA Quality Framework has been shared with leadership, the Clinical Nurse Lead group, and the Board. It will be sent out for review to both Medical Staff Associations this fall. All of our care committees have been converted to Quality Teams and have reviewed their terms of reference. Decision support is building data dashboards that will ultimately support our quality work and potential quality huddles.

A Quality Council (QC) will be commencing as of October 24th. A patient partner has been recruited. Ultimately, the council will support and monitor the activities within the organization related to patient safety, quality improvement, and performance. The Quality Council will support the implementation and maintenance of the key organizational enablers necessary to drive improvements in the six dimensions of quality and ensure the achievement of the **quadruple aim:** enhancing patient experience, improving population health, maintaining or reducing costs, and optimizing provider/staff experience.

We are working on an incident analysis policy update to ensure standardization in the way we approach incident reviews, particularly critical incidents, including checklists to support involved leaders. Recommendations derived from Quality of Care reviews will be housed in a spreadsheet that will be regularly shared with the Board, implemented by quality teams and the QC.

Accreditation Update

We are approaching the big day and planning some mock tracers to get our teams ready to brag about all of the great things that we do here at LWHA. Program leads continue to monitor and implement standards and changes into practice. Over the summer we have had four meetings to review the required organizational practices with the leads, ensuring that we are addressing gaps as a team. Currently Required Organizational Practices are 83% complete (we must have completed these prior to on-site survey). Red Flags from Program action plans are 83% complete (we must have a plan in place for each item prior to on-site survey). Monthly topics continue to be shared in "The Pulse" newsletter, and we are working on posters to update staff.

Redevelopment Program Planning

Biweekly pharmacy redevelopment meetings are underway. We are tagging equipment and have had the architects make minor modifications to the drawings to address workflow and new College of Pharmacist requirements. Oncology move meetings have also commenced. The Medical Device Reprocessing and Operating Room moves will be planned carefully to maintain standards and allow us to provide the most service possible during redevelopment. The project lead is currently working on timeline accuracy, so that we can plan our temporary space for scopes while considering availability of operating room time at LMH for cases that require a full operating room.

Maternal Newborn Steering Committee

We continue to work towards our priorities that have been outlined in the driver diagrams, to improve efficiencies and increase volumes. A working group has been established and a wish list of ideas brought to Senior Team for approval. We are hoping to secure \$75,000 to put towards painting, cabinetry, esthetics, and the call bell system. The clinical manager is working with facilities to determine capacity to complete the work. Purchasing is securing accurate quotes. The physician lead will be pulling together the OB family physicians to plan a trial for an on call model and an antenatal clinic. The next consideration will be anesthesia call and coverage.

Quality of Care Information Protection Act (QCIPA) education

Changes to legislation require changes to our policies for disclosure of a critical incident to a patient/family, which are in progress. The cause or causes of critical incidents must be disclosed to the patient/representative, and patients must be offered the opportunity to be part of the review process, including recommendations.

Cultivating a workplace that nurtures individual and collective potential.

Chief Financial Officer Recruitment

We have been checking references for a CFO recruit and hope to present an offer to our preferred candidate before month end.

Ministry of Labour

The Ministry of Labour intends to focus their inspection efforts on the prevention of violence within hospitals and health care facilities. We anticipate Ministry of Labour inspections at both sites to be assessing our processes to identify risks for violence within our facilities as well as the systems and tools that we have in place to protect our staff from potential violent situations. We have recently completed risk assessments and have spent considerable time training staff on non-violent crisis intervention.

Physician Recruitment

Our physician recruitment efforts remain vitally important to the long term viability of health care services in our communities. Following a June gathering of community stakeholders, the Wingham recruitment efforts have a renewed focus. Engaging the broader community in recruitment efforts along with ensuring reasonable employment opportunities for spouses are two of the key initiatives of the group.

Pharmacy Coordinator Recruitment

As of August our pharmacy coordinator is no longer working at LWHA. We have interviews set up for the last week of September with some fantastic candidates. We are looking for a pharmacy leader with expertise in their field, a drive and passion for quality improvement, and leadership experience. Currently Northwest pharmacy telephone support is being utilized 4 hours per day, 5 days per week to allow us to continue verifying orders and functioning at full capacity.

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

Wingham and District Hospital Capital Project

Nith Valley discovered structural issues with the original hospital construction that have to be addressed. This has slowed progress on the project. We anticipate a March occupancy of our new oncology space, pharmacy, gift shop and foundation office. The Wingham and District Hospital Auxiliary has closed their gift shop until their new space is constructed. Asbestos abatement continues in various locations in advance of construction.

New boardroom and meeting room (terrace room) space will be available in the former clinic in October. A number of administrative staff and functions will move into the former clinic as well.

Small, Rural and Northern Funding

The SW-LHIN is anticipated to approve the following funding of small, rural and northern transformation projects:

- Hospital Information System Optimization \$575,000
- Nursing Clinical Documentation \$300,000
- Laboratory Interfaces \$123,330

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This funding is shared between Wingham, Listowel, Tilsonburg, Ingersoll, Middlesex Hospital Alliance and the South Huron Hospital. We would not be in a position to advance our electronic health record without access to this funding.

Oncology Program Update

All of the permanent positions have been filled, with orientation underway. We continue to look to build capacity in our casual staff. There was a brief decrease in numbers due to a loss of several oncologists in London, but we are now resuming regular volumes.

Float Nurse Trial

We have initiated the float nurse trial in Wingham. It has proven successful in Listowel in terms of optimizing resource utilization, preventing overtime, allowing cross training opportunities for nurses, and accommodating patients where the need arises. We are also exploring opportunities for the night Emergency Room nurse to float at both sites due to their lower volumes after 11pm. This is anticipated to improve relationships between units, relieve pressures in busy areas, and encourage teamwork/collaborative problem solving.

Cultivating partnerships to offer a seamless patient experience.

Royal Oaks

Several physicians, staff and patients, have been frustrated by some air handling system issues in the new clinic. The rooms in one corridor do not have sufficient air flow and air conditioning. The engineers, general contractor, subcontractor and air balancing contractors have all been working to resolve this issue. Outside of this issue, the general contractor has been finalizing some fit and finish issues in order to complete their contract.

Information Technology Convergence

As we continue to increase the electronic health record across multiple hospitals, one of the challenges is the variation in clinical equipment that produces data for the record. With 11 hospitals sharing a single system, each variation in equipment such as vital signs monitors, IV pumps or anesthetic equipment requires a new interface to be built and maintained. Regional hospitals continue discussions to determine how to best allow individual organizations to choose the best equipment to meet local needs while minimizing the costs of multiple connections.

London is also providing some necessary leadership on issues such as malware and data security across the region.

Community Hub

Rural communities have long recognized the value in working together. Throughout the province, small and rural communities are creating community hubs in order to make it easier for local residents to access the health, social, cultural, recreational and other resources they need together in one spot.

Community hubs serve as a central access point, which:

- offer services in collaboration with different community agencies and service providers
- reduce administrative duplication

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• improve services for residents and are responsive to the needs of their communities With space available in the Royal Oaks facility, the opportunity exists to create a community hub for Wingham and area. With the assistance of the Perth Huron United Way, we are holding a meeting of interested community organizations on October 3rd to gauge the interest in additional usage of this space.

United Way Campaign

Following a BBQ at Ward and Uptigrove in Listowel, the Perth Huron United Way Campaign stopped at Royal Oaks as part of their campaign kickoff tour. One Care, a Royal Oaks tenant, is both a strong supporter and beneficiary of the United Way. A local campaign will be held to ensure hospital staff have the opportunity to contribute towards the \$1,556,455 goal for Perth Huron.

Professional Practice and Informatics

We have received a project roadmap from the London regional group. We will be implementing electronic vital signs and electronic intake and outputs in October to improve accuracy and availability of documentation. Automated screening tools will go live, which will trigger response/interventions if patients are at risk for certain poor outcomes (e.g. bed sores/ulcers).

The next steps will include emergency nursing clinical documentation, closed loop medication administration, and vital signs integration in the emergency room occurring March 2018. There is a Mandatory Cerner skills update in September and October. Almost 100% attendance is confirmed.

Home First

The SWLHIN is moving forward with a Home First relaunch, which will be newly designed to meet our local needs. We have a working group in place and are looking at trials that we can put into place to support our patients to safely wait for long term care at home, where appropriate. We are partnering with Home and Community Care (formerly CCAC) to explore opportunities and determine how this can work in our communities.

Best Possible Medication History (BPMH)

We are currently trialing the pharmacy techs completing BPMHs in Wingham, with input from LMH pharmacy staff, the pharmacist, WDH pharmacy techs, nurses, informatics, and physicians. The trial is off to a good start with techs completing BPMHs on Mondays, Wednesdays, and Fridays in order to work out the process kinks. Our intention is to improve accuracy, efficiency, and overall safety.

Other Board Highlights

Ainsley Morrison, Quality and Patient Experience Coordinator, presented the Quality Improvement Plan, the Risk Report and Patient Feedback from Quarter 1 data.

The board discussed various financing options for the Royal Oaks facility. A 5 year term mortgage amortized over 25 years from RBC was accepted.

Like the staff of the Listowel Wingham Hospitals Alliance, the Board of Directors is busy practicing and preparing for Accreditation. The Board education session in October will be based on Accreditation as well.