

# LWHA Board Highlights June 2018

# Enriching life's journey together.

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

#### **SW-LHIN Stroke Care**

It's been approximately 2 years since the changes to stroke care were implemented in the SW-LHIN. The new process bypasses local hospitals and directs suspected stroke victims to Regional Stroke Centres for specialized care. Since the change, there has been a significant improvement in the number of patients receiving care on a stroke unit, reductions in stroke mortality and increases in the percentage of patients receiving the clot-busting tPA drug. While there are still improvements to be made, the SW-LHIN was recognized for the greatest improvement in the Province on these key stroke indicators.

## **Non Urgent Patient Transportation**

Hospitals across the SW-LHIN participate in a shared arrangement with Voyageur for non-urgent patient transportation services. Since the implementation of this contract, the quality and consistency of vehicles, staff and care has improved significantly. We remain disappointed with the cost and the timeliness of this service. Despite renewing the contract with Voyageur for the next two years, hospitals are currently strategizing how to enable other service providers to enter the market.

#### **Mental Health and Addictions**

The loss of staff at the SW-LHIN resulted in delays to their planned efforts to improve the mental health and addictions services across the South West. With the appointment of an interim CEO for the LHIN, we are hopeful that their efforts will begin again. Improving care for our patients dealing with mental health and addictions issues often requires the assistance of other organizations.

## **Continuous Quality Improvement & Joy in Work**

Quality huddles are quick stand up meetings where staff assemble to review performance and collaborate on idea generation and implementation to integrate patient safety, continuous improvement & common purpose. Daily measurement and visual graphs drive sustained performance. The purpose of unit based daily huddles are to ask what is going well, where we could do better, and are there any safety concerns. This supports staff to solve problems in real time, to focus on patients and safety, improve flow, and increase fiscal awareness and responsibility. Daily quality huddles will increase autonomy as well as support organizational and team visions. Implementation not only aligns with our quality framework, it is part of our strategy to improve joy in work.

"The most joyful, productive, engaged staff feel both physically and psychologically safe, appreciate the **meaning and purpose** of their work, **have some choice and control over their time**, experience **camaraderie** with others at work, and perceive their work life to be fair and equitable"- Institute for Healthcare Improvement, 2017

We will be looking to implement a daily quality huddle trial in 1-2 areas over the summer.

## **Professional Practice/ Clinical Informatics**

We are currently reviewing our transfer of accountability processes and looking to capitalize on tools already built into Cerner. Since the emergency department is fully electronic from a nursing perspective, there is opportunity to pull information important to patient care on admission from the documentation to assist in transferring the care of patients from the ED to the inpatient units. The clinical nurse leads will be working on streamlining a process that utilizes this technology.

#### Cultivating a workplace that nurtures individual and collective potential.

#### Non Violent Crisis Intervention

Addressing violence within health care settings continues to be a provincial focus. All staff of the Listowel Wingham Hospitals Alliance are required to take a full day of Non Violent Crisis Intervention training as well as a 4 hour refresher every two years. Our approach has been to provide all staff with the opportunity to acquire and practice these skills.

#### Recreation Therapy

We are excited to have A.J. Beasley expand his employment to include Listowel Memorial Hospital. He has recently begun as a cross-site full time position. A.J. is a recreation therapist who has worked part time in Wingham for several years. He will be coordinating both group and individual activities for our Inpatients. These activities are social but include therapeutic aspects that are focused on each patient's individual goals, and outcomes. His work will help to enhance all of the other therapy being provided by our Allied Health Team.

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

#### Redevelopment

When the board meets again in September, we expect to have moved into new oncology, pharmacy, gift shop, foundation and team station space. A temporary procedure suite will have been created in order to perform scopes and other procedures not requiring an operating room environment. Ambulatory care will have moved to temporary space to create space for patient recovery following their procedures.

#### Nursing

With great sadness, we said goodbye to Marilyn VanderWoude, RN. She passed away on June 14<sup>th</sup> and had been a long time employee of Wingham and District Hospital. Many in both the hospital and greater community knew her as a dedicated, compassionate, and giving nurse, good friend/family and colleague.

We are welcoming many new nurses to our teams in both Wingham and Listowel, as we have been recruiting to cover maternity leaves, retirements, and some vacancies related to our Clinical Nurse Lead model change. We have filled five vacancies in Wingham inpatient, one in Listowel Emergency, and three in Listowel inpatient. With new staff comes orientation and mentoring that takes a significant amount of time. Staff working in the inpatient and emergency departments are required to have specific cardiac training, which they will be working on over the summer and early fall. We are carefully monitoring census, staffing availability, and overtime costs to ensure quality care delivery. Continuous assessment of our daily staffing and full time/part time ratios is part of our ongoing strategy to reduce overtime and improve efficiencies.

#### Financial Planning

Finance and purchasing are working closely to streamline our capital planning and operational budgeting processes. We will be finalizing requests for changes, variances, and capital purchasing over the summer months.

Cultivating partnerships to offer a seamless patient experience.

#### **New Provincial Government**

The first new provincial government in 15 years will undoubtedly result in changes within health care. Bob Bell, the Deputy Minister has also retired. Some of the risks for hospitals include:

- Government commitment to \$2 billion in 'efficiencies'
- Uncertainty of the government's opinion of the new LHINs
- Plans to end 'hallway medicine'
- Implementation of value for money audits
- Any funding that has not flowed yet, may be at risk

# **Foundation Support**

Annual meetings are an opportunity to reflect on the previous year's events. Both hospital foundations have demonstrated their strong commitment to our hospitals and communities. At last month's board meeting, the hospital board was presented with a cheque by the Wingham and District Hospital Foundation totaling \$1,328,828. This is following a donation of \$1,577,254 the previous year.

The Listowel Memorial Hospital Foundation also provided donations over the last two years of almost \$3.2 million. This level of support from these small communities is a testament to the communities' faith in the work of their hospitals.

#### Schulich School of Medicine

Dr. George Kim, Assistant Dean, Rural & Regional Community Engagement, Schulich School of Medicine & Dentistry, Western University attended the Listowel Medical Staff meeting recently. We remain hopeful that Schulich will continue to consider the needs of rural hospitals when designing their medical school curriculum and residency programs.

## Regional Musculoskeletal (MSK) Strategy

The South West LHIN is taking part in a provincial strategy to reduce wait times for hip, knee, and low back pain assessment and surgeries. The vision is that all Ontarians have timely access to a high quality, integrated continuum of MSK care. A patient pathway is being developed and hinges on a regional assessment team with assessors located in various locations around the region. This will bring assessment closer to home, increase efficiencies in referral to surgeons, and improve non-surgical patient referrals to community resources and linkages. A central number will improve access for both patients and primary care. Waiting for hip/knee/spine care and surgery increases health risks including opioid misuse. There is evidence that shortening wait times to surgery in itself provides some therapeutic benefits. Wingham has been recognized as an ideal location for a full time Spine Assessor. We are in the process of investigating reporting structures, funding, space and IT resourcing required, and recruitment implications. We feel this would fit nicely with our rehabilitative services and will increase access to quality MSK care, symptom relief, and treatment in our communities.

# **Other Board Highlights**

Ainsley Morrison provided an update for each of the three indicators on the Quality Improvement Plan for 2018/2019.

Work continues to decrease the % of 30 day revisits to the Emergency department for Mental Health and Addictions to 11% at LMH and 8% at WDH. Current efforts include gathering data and identifying resources available through other health care providers.

An increase in the number of Workplace Violence Incidents in the RL reporting system has resulted in 6 incidents reported in April and May organization wide.

The Joy Meter has increased to 74% in June from 71% in May. The board of directors is very pleased with how much the Joy meter has risen in two months.

Maureen Hengeveld, Manager of Diagnostic Imaging, gave a presentation to the board regarding the DI departments at both hospitals. Included in her presentation was a patient story, which explained how a patient came to WDH for a chest xray while wearing a cotton shirt with buttons on it. When the xray was completed the technicians noticed that the buttons were very visible. The detail and resolution is so good on the new digital equipment that you could see every thread hole in each button.

Maureen also provided the program description, the operational plan highlights, , the work currently in progress, the data, dashboards and indicators, barriers to Quality Care Delivery, patient engagement and the successes over the past year which include:

- the CT scanner
- two new fluoroscopy units
- new digital radiography in Wingham with the ability to perform stitching exams. Stitching exams is the process of combining multiple medical images with overlapping fields to produce one image.

Maureen also provided an overview of what the 2018 / 2019 operational plan includes:

- Review of clerical / OBSP tasks using LEAN methodology
- Regional PACS implementation
- Increasing the number of Ultrasound vascular trained sonographers
- Improved education opportunities for staff
- Review of new mammography technology, how it will affect and is it necessary for our practice

Paul Seebach from Vodden, Bender and Seebach attended the meeting to introduce himself and get acquainted with the board. Vodden, Bender and Seebach will be the auditors for the Listowel Memorial Hospital and the Wingham and District Hospital for this fiscal year.

The board finished the evening with a BBQ and social time and will now break for the summer. Meetings will begin again in September.