



Board Highlights

May 2019

Enriching life's journey together.

Wingham and District Hospital Foundation

The LWHA Board welcomed several representatives of the Wingham and District Hospital Foundation to present the largest single donation ever received in support of the Wingham and District Hospital. A total of \$1,906,120 was received from the Foundation. The donation is supporting construction costs related to the redevelopment, various OR and scope equipment, beds, lifts, bathtub, chairs, stress test machine and a transport ventilator. The board expressed their gratitude for this phenomenal level of community and Foundation support.

Audit Report – Seeback and Company

The LWHA Board also welcomed Paul Seeback to present the year end audit report. This is the first year for Seeback and Company as our corporate auditors. The Listowel Memorial Hospital finished the year with an operating surplus of \$358,211 and the Wingham and District Hospital a surplus of \$78,260. After accounting for depreciation on buildings and parking lots, Listowel had a deficit of \$95,690 and Wingham a deficit of \$412,481. Listowel spent \$1.9 million on new capital while Wingham spent \$4.7 million. There were no significant concerns or issues raised as a result of the audit.

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

My Chart

Health records, clinical informatics and registration will be working together to outline a process to provide patients access to My Chart upon request. My Chart is a patient portal that houses electronic health records. This will allow patients to see their records as they move through various healthcare organizations. Though this causes some angst amongst healthcare providers, it is important to remember that patients have always had the right and ability to access their full chart. This will be a more user friendly and timely method of access. We expect to go live over the summer.

Oncology

We are halfway into the four-day chemotherapy trial. As predicted, there is impact to nursing, lab, pharmacy and physician scheduling which we have been able to accommodate. It is allowing for better distribution of patient treatments. We are working on marketing strategies to ensure we are capturing patients who live in our catchment areas.

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Patient and Family Engagement Framework

In the spirit of integrated care and partnerships, we will be revamping our patient and family engagement framework in collaboration with both family health teams and One Care. We will be reviewing the provincial declaration of values and co-designing a framework with patient partners. A potential consideration is a shared patient and family advisory committee. Julie Drury, chair of the Ontario Minister's Patient and Family Advisory council has highlighted the importance of moving from patient surveys and token engagement, to seeking to understand patient experience and suggested opportunities to engage frontline staff in collecting in the moment feedback from our patients at discharge. This would allow for learning and practice change for staff, as well as organizational changes based on patient feedback trends.

Colonoscopy Quality Improvement

Cancer Care Ontario provides us with benchmarks for colonoscopy follow up for a positive fecal occult blood test. This follow up exam should occur in less than 56 days. We do not meet this target in Wingham. We are investigating the root cause of this and looking for opportunity in scheduling processes and follow up to improve timing.

Executive Safety Rounds

After completion of a trial, the Executive Safety Rounds are now fully scheduled for the next year. These rounds typically provide an opportunity for conversations that might otherwise not happen regarding policies, procedures, systems and processes that detract from patient safety and a positive work environment. An example of a positive outcome as a result of these rounds is an improvement to the air flow in the first floor team station in Listowel.

Cancer Care

Officials from the South West Regional Cancer Program are investigating how to best support follow up care for cancer survivors. The location of the Wingham oncology clinic makes it an ideal site to provide survivorship support. There is interest in utilizing the resources invested in a post radiation clinic that currently takes place in Wingham to serve a broader population of cancer survivors. There are a number of details that still need to be worked out before a survivorship clinic is in place.

Cultivating a workplace that nurtures individual and collective potential.

Construction Incident

On April 11, as the result of a construction-related project in Wingham, air balancing was being performed on a new Air Handling Unit. Related to inaccurate drawings, more air was forced through the ductwork than it was able to handle. This resulted in dust, dirt, and debris being emitted from vents, primarily in our MDRD, DI and Ultrasound areas. When the debris was analyzed, an asbestos agent (1% Chrysotile) was found in the ultrasound room. Further air analysis was completed to ensure that the working environments in each of these 3 areas were safe. An investigation took place and approximately 15 staff were supported to complete asbestos exposure reports to WSIB. The Industrial Hygienist who performed all of the analyses was invited to present the findings on May 2. On May 3 a debrief was held

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and resulted in 8 recommendations, primarily themed in communication, assigned leadership, and application of the Incident Management System for incidents outside of emergency response. Cherie Dolmage was recognized for her efforts to support staff through this difficult situation and ensure improvements to prevent any future incidents.

Health and Safety Supervisor Competency

Day 1 of Health and Safety Supervisor Competency training for managers in compliance with the Occupational Health and Safety Act was provided in April. The training team was Nikki Lobsinger, Danielle Bean and Cherie Dolmage.

All Staff Skills Days

All Staff Skills Days are planned for June 10/11 in Wingham and 17/18 in Listowel. There are 8 x 4 hour training sessions with the primary focus on safety hazards and controls in the workplace. We have the fortune of having a Keynote speaker from Public Services Health and Safety Association at each of the 8 sessions followed by 4x40 minute training sessions. The training session topics are: Personal Protective Equipment (use, donning, doffing etc.); Evacuated training; Ergonomics on the unit or in an office; and the use of Fire Extinguishers. These sessions will be interactive and engaging to support learning and retention.

Lab Technologist Recruitment

Recruitment of Medical Laboratory Technologists (MLT) remains a challenge for LWHA and across all 12 sites within the Inter Hospital Laboratory Partnership (IHLP). LWHA has been successful in the recruitment of a full time MLT across site starting in July and a temporary MLT full time to cover the remainder of a maternity leave starting in May.

LiUNA (formerly Ontario Federation of Healthcare Workers (OFHCW) - (WDH)

Bargaining is planned for July 18 and 19th.

Recruitment Activities

Efforts continue to recruit a new surgeon and Executive Assistant.

Volunteers

Events were held at both sites to acknowledge the contributions of volunteers to the work of the hospitals. Our recreational therapist, A.J. Beasley, organized the annual dinner in Listowel for volunteers which was catered by Listowel Nutrition and Food Services staff. The Wingham and District Hospital Auxiliary enjoyed lunch courtesy of the hospital at the Wingham Legion in conjunction with their spring rummage sale.

Scheduling

There has been some changes to the Wingham emergency nursing schedule to improve continuity and scheduling practices. We will be implementing this change in September and supporting staff to choose lines in a new master schedule.

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

Renovations and Improvements

Planning continues for the laboratory renovation at the Listowel site. LWHA will be managing the project and tenders will be sent out shortly for HVAC and demolition.

Medical Device Reprocessing Department have moved into their new space on Monday May 6th. During that week testing and verification of equipment was completed allowing a full restart of the OR on Monday May 13th.

Post Anesthesia Care Unit (PACU)/Day Surgery (DS) work commenced on May 13th with a projected completion of fall 2019.

South West LHIN Hospital Services Accountability Agreement

We continue to struggle to meet the LHIN targets in our accountability agreement for the number of inpatients that are designated as alternative level of care. The performance target for the Listowel H-SAA ALC Rate is ≤ 13.97 with the Q4 result at 22.65%. This is a challenging rate to impact. It is impacted by the number of nursing home beds available and patient choice. In addition, patients who have been identified as eligible for Home First (discharge home with support) have been unable to be discharged related to the lack of community home care resources.

Additional capacity is available within our rehab inpatient beds in Wingham. The performance was 60.2% for Q3 with a target of 90%. We continue to work on marketing this program and work with our existing physicians in order to accommodate those patients with no family physician. We continue to work with area facilities in order to accept rehabilitation patients. In Q4 our rehabilitation patient days have increased over Q3 and we continue to be committed to this program and increased patient days.

Compensation and Benefits

Following a Request for Proposal through the SW LHIN Benefits group, we are transitioning the employee Health and Welfare Benefits effective July 1, 2019. Health, dental, travel and semi-private benefits will be transitioning from Manulife to Green Shield Canada. Accidental Death and Dismemberment (AD&D) coverage will be transitioning from Chubb to SSQ Financial. We anticipate a smooth transition to the new providers. Life and LTD will remain with Manulife.

New Purchasing Rules

New provincial rules are in place for purchasing that effect hospitals. These measures apply to goods and services consulting and non-consulting valued at \$25,000 or higher. New or contract extensions are not to exceed two years. All BPS organizations are to use Vendor of Record arrangements.

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Annual Budget Allocations

Listowel and Wingham hospitals will be setting each receive a 1% increase to their global funding allocation for 2019/20. This is consistent with our budgeted assumptions.

In addition, the province has added the small rural and northern transformation fund the hospital's base budget. There are specific criteria and expectations attached to this funding. The good news is that it is now part of our annual funding allocations rather than receivable based on project proposals and applications. Listowel has been allocated \$412,000 and Wingham \$364,000. Historically, this funding has been spent on hospital information system improvements and strategic initiatives such as MORE OB.

Health Infrastructure Renewal Fund (HIRF) notional draft allocations are LMH \$189,934 and WDH \$234,254. In addition, we are submitting for Exceptional Circumstances Project Grant for the HVAC update planned with the Lab Renovations in Listowel

Cultivating partnerships to offer a seamless patient experience.

Cybersecurity

Following a review of regional cyberrisk/cybersecurity by Deloitte, regional hospitals are assessing their options to address cybersecurity in hospitals.

Mentallyfit

Kendra Fisher from mentallyfit spoke about her story and struggle with mental health in Listowel for nurse's week. Six other organizations signed in via OTN including both the North Perth and North Huron family health teams. Kendra has been working to secure funding and support to make changes in the community that will support people with mental illness on their journey to recovery. She has a meeting scheduled with the MOHLTC to discuss opportunities regarding her community action plan. We will be moving forward to explore opportunity to create a mentallyfit space/waiting area within the hospitals as a first step towards supporting this action plan.

Lucknow Neighborhood of care initiative

The current home care provision in North Perth and North Huron is inadequate to support the volume of patients requiring both personal and medical support to be discharged home. From 2017-2019 only 52% of referrals from LMH and WDH were admitted into Home and Community Care (HACC). Current concerns with quality of care and continuity has led to lack of primary care confidence in HACC, and a reluctance to discharge patients home, thereby increasing ALC rates and conservable bed days. Wait lists in the community for home care affects the ability of HACC coordinators to arrange support. There is a lack of continuity of care as many providers may be contracted to take care of one patient, with potential for quality/safety concerns and increasing readmissions. The current provincial guidelines and legislation precludes the hospital from directly procuring nursing services when HACC is unable to effectively support discharge.

In partnership with home and community care providers as well as the North Huron Family Health team, and front line staff/physicians, we will develop a process to make arrangements directly for nursing

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services to provide care to adult patients with a range of personal and medical care requirements being discharged to the Lucknow area. SW-LHIN Home and Community Care is working to provide us with data and potential funding supplement. This project is well aligned with the principles of Bill 74 in that it will support integrated, patient focused quality care. This project is predicted to support the quadruple aim:

Patient experience: Earlier discharge, reduced assessments/storytelling, warm handoffs, and consistency in a single and small care team will improve patient experience.

Provider experience: Implementing a system of home care that performs consistently will improve provider trust in the system.

Population Health: Earlier discharge home and consistent registered nursing assessments will decrease risk of health and functional decline and nosocomial infections.

Reduced Cost: Reduction in conservable bed days, ALC and readmissions will reduce hospital and system costs

The People's Health Care Act

It has been fascinating to witness the reaction from various health care providers of the proposed restructuring of the Ontario Health Care System. Across the province, some new alliances and partnerships are being contemplated along with corporate amalgamations. Locally, we are still committed to further discussions between the boards of the Listowel Wingham Hospitals Alliance, North Huron Family Health Team and North Perth Family Health Team.

A self assessment for an Ontario Health Team is being submitted by over 50 health care providers in Huron and Perth. The Listowel Wingham Hospitals Alliance, along with the NHFHT and NPFHT participated in the self assessment exercise. One of the strengths of this proposal is the fact that so many health care providers in the two counties are committed to working together. This could also be seen as a weakness since governance and decision-making structures need to be developed that represent the needs of 50 organizations. The fact that there are that many organizations providing services to a relatively small population, speaks to the need for a coordinated approach to patient care and transitions.

The Deputy Minister of Health has described the current situation in Ontario as a "lower rules environment" and has indicated there is an openness to consider opportunities to utilize the funding envelope for patient purposes. We continue to explore opportunities with local home and community care providers to improve local access to home and community care.

Municipal Engagement - North Perth

Discussions recently with the municipal leadership in North Perth focused on areas where the hospital and municipality can work together to ensure a vibrant, healthy community. Mayor Todd Kasenberg is particularly interested in mental health, affordable housing, youth retention and labour force reliability. Improvements to pedestrian safety and parking for health care services were also discussed.