

# Board of Directors Highlights January, 2022

# Enriching life's journey together.

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

# **System Capacity and Planning**

Acute care and ICU capacity in the south west has been very strained since the new year. Some hospitals have been operating at greater than 100% of their capacity with Listowel and Wingham experiencing some of the highest inpatient numbers in recent memory. Moving patients out of hospital to home (with care) and Long Term Care continues to be a challenge. Most recently, over 20 patients between the two sites have been waiting in hospital for movement to another care level.

# **Accreditation Canada**

Accreditation Canada recognized that the Listowel Wingham Hospitals Alliance has gone beyond the requirements of their program in demonstrating excellence in quality improvement by awarding Exemplary Accreditation status, the highest level.

The Accreditation process is intended to help organizations strengthen their quality improvement efforts by identifying what they are doing well and where improvements are needed. LWHA met 100% of the Required Organizational Practices and 98.1% of the 2,005 criteria evaluated. The Accreditors recommended that LWHA include patients and families in organizational decision making and program development more often and update some policies and procedures. This excellent result reflects the individual and collective efforts of everyone associated with LWHA.

# **Wingham Emergency Department**

Throughout the course of a year, the Wingham Emergency Department is staffed with a mixture of Wingham physicians and locum doctors. Wingham has not been part of the provincial Emergency Department Locum Program (EDLP) for a couple years and just received notification that they have been accepted back into the program. Listowel continues to rely on EDLP to cover a substantial number of ER shifts each month. The Wingham ER schedule had 4 shifts over the Christmas/New Years period that were at significant risk of not being filled. Increasing the hourly rate and dedicated physician support were the two keys to filling the shifts. We have a standardized process in place that we would use if there is a need to close one of our ERs.

South Bruce Grey Health Services has closed the Walkerton ER from 8:00pm to 8:00am due to a nursing shortage. We have not seen a material impact on ER volumes in Wingham as a result.

# Magnetic Resonance Imaging (MRI) Proposals

Just prior to the Christmas break, Ontario Health issued a call for proposals to operate MRI diagnostic imaging equipment in Ontario. They expect to approve 15 proposals in the province. There is currently only one MRI machine in southwestern Ontario north of highway 7 and west of highway 400, located in Owen Sound at Grey Bruce Health Services. The other machines serving southwestern Ontario are in Guelph, Kitchener, Cambridge, Stratford, Woodstock and London. The Wingham and District Hospital (WDH) is ideally located at the centre of the large geographic area within Southwestern that does not currently have a resident MRI unit.

The Ministry will fund the operating costs of the machine, while local funds would be required to purchase the machine, outfit or construct space and train staff.

Our proposal acknowledges that MRI is not typically utilized as an emergency medicine procedure and would be located in the Royal Oaks Health and Wellness facility.

#### **Health Human Resources**

Health human resources (HHR) remain a pressure point throughout the region. The human resources department and the clinical team continue to actively recruit new hires across the alliance. Each month LWHA holds corporate orientation and in January we had 3 nurses attend. Part of our nursing recruitment strategy is increasing nursing student placements as we have had great success in recruiting students after they complete their education. All 3 new hires had been previous students. LWHA is welcoming 8 nursing student placements this winter.

In preparation for the peak of the 5<sup>th</sup> wave of COVID our departmental teams decided to "up staff" our patient care areas for the month of January. Nursing staff were offered a variety of extra shifts and were able to note availability based on their schedules. These extra shifts offered operational flexibility and pre-scheduled coverage of sick calls. Thank you to all of the nursing staff who have picked up extra hours and shifts. It is because of their work ethic that we have continued to be able to staff all clinical areas throughout the alliance.

# **Health and Safety / Emergency Response:**

On December 15<sup>th</sup> the Chief Medical Officer issued a Provincial directive requiring health care workers providing direct care or interacting with a suspected, probable or confirmed COVID-19 patient to use a fit-tested N95 respirator, eye protection, gown and gloves.

As there is a Provincial strategy to fit test as many workers as possible to the 1870+ N95 respirator due to a significant provincial supply, efforts have been taken to update mask fit testing for LWHA staff. As at January 17<sup>th</sup> there are a total of 150 staff who have been successfully fitted to the 1870+.

As health care workers transition to the 1870+ respirator, this will preserve supply of the other

models for workers not able to utilize the 1870+.

# **COVID-related initiatives and practices:**

There have been recent updates to the guidance provided by the Ministry of Health regarding healthcare workers and COVID-19, both for exposure and positive cases. Each situation is evaluated on a case by case basis to determine if work isolation should be considered. Work isolation is considered based on operational needs following a negative PCR test should an employee live with a person who is symptomatic or has tested positive for COVID-19.

If an employee is reporting to work under work isolation, the following measures will be in effect.

Work self-isolation includes:

- PCR and rapid antigen testing
- Adhere to universal masking recommendations
- Wear eye protection consistently
- Perform meticulous hand hygiene
- Maintain 2 metres/ 6 feet from others except when providing direct care
- Take breaks alone, do not remove your mask within 2 metres/ 6 feet of others

From December 30, 2021 to January 18, 2022 there have been a total of 20 positive staff members, 9 staff required to isolate at home, and 9 staff considered for work isolation. As of January 18<sup>th</sup>, there are 2 additional staff members under investigation.

# Cultivating a workplace that nurtures individual and collective potential.

# **Leadership Portfolios**

The recent vacancy in the Vice President of Diagnostic and Support Services role resulted in a shuffling of responsibilities and portfolios. The VP Diagnostic and Support Services position will not be replaced.

- Sheri DiGiovanni will be assuming leadership accountability for Laboratory with support from Shawna Nelemens while the corporate risk work will return to Ainsley Morrison. Sheri's position will now report to Barbara Major-McEwan
- Heidi Dupuis is assuming responsibility for Health Information Management (health records) at both sites
- Shelley Reinhardt will provide leadership direction to Nutrition and Food Services,
  Projects, Capital Planning and Purchasing. A new purchaser will be hired.
- The Manager of Facilities position (Steve Baxter) will also report to Barbara Major-McEwan

As an organization, it is encouraging to be able to offer additional leadership responsibilities

and opportunities to a number of our current staff.

### Acknowledgement

Across LWHA, it is evident that our staff and physicians have been both personally and professionally impacted by the ongoing pandemic. Despite being weary, we have witnessed our people repeatedly step up and respond to the demands. We all remain hopeful that this is the last significant wave of the pandemic.

#### **Clinical Informatics**

Participating sites in the region are preparing for next steps in the clinical documentation project. Phase 2 of this project is scheduled to start this fall and will include projects impacting patient education, document scanning, electronic documentation for nurses and physicians and device integration.

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

# **Fisher Clinic**

Draft drawings outlining a proposed addition to the Fisher Family Primary Care Centre in Listowel will be review with physicians and Family Health Team representatives before the end of the month.

# **Listowel Memorial Hospital Pre-Capital Proposal**

A Pre-Capital proposal was submitted to Ontario health for Listowel. The Listowel Memorial Hospital facility has two distinct building assemblies. The newest portion of the building, completed in 2008, contains emergency, operating room, ambulatory care, diagnostic imaging, medical device reprocessing and boiler plant. The remainder of the building, which houses all inpatient facilities, support services, laboratory, some outpatient activity and administrative services was constructed in the early 1960s or before. Minor upgrades and maintenance of the older portion of the building have allowed the facility to serve its primary function. However, this portion of the building does not meet current building code, infection control, fire code, safety, security, CSA Standard or accessibility requirements. More importantly, these facilities do not meet the requirements for patient care needs due to a lack of space, privacy and infection control standards. The proposal plans to address these deficiencies.

# Scheduling:

Staff impacted by the cancelation of non-emergent procedures related to Directive 2 have been redeployed to support inpatient and other areas of the hospitals as needed. Human Resources and Managers reviewed the current staffing situation and increased staffing levels above the regular compliment in some areas as a strategy to manage increased census, work

load and staff absenteeism. Staff continue to demonstrate their dedication and commitment by working additional hours as we continue to respond to the pandemic. Due to our current staffing pressures, we have heard and responded to staff's request to increase the current lieu bank maximums to March 2022.

#### Recruitment:

To minimize exposure and reduce traffic within the organization we have resumed virtual interviews and corporate orientation at this time.

# **Operating Budgets**

The 21/22 Operating results have both improved over the past month with Listowel running a surplus of \$198,441 and Wingham a deficit of \$161,590. The main contributors to the surplus at Listowel are the Testing Centre revenue that was not budgeted and the 1% additional funding from the ministry. Year to date the recoveries revenue is less than budgeted (\$289,701). At this point based on trends and assuming COVID expenses reimbursed to March 2022 a small year-end deficit is forecasted. The main contributors to the deficit in Wingham are less Episodes of Care and oncology volumes along with increased employee sick, orientation, maternity benefits and increased data processing fees. The financial forecast to March 2022 of a smaller deficit than budgeted is based on trends to Q3 and with COVID expenses reimbursed to March 2022. Both operating budgets will continue to be monitored.

# Cultivating partnerships to offer a seamless patient experience.

# South West Regional Response Committee & Hospital Operations and Capacity Committee

The pandemic response structure in the South West has changed several times since the beginning of the pandemic. Currently, the hospitals meet as a group once per week to standardize both organizational and system approaches to the pandemic response. A broader group including representatives from home care, long term care, hospitals and public health also meet weekly to coordinate across sectors of the health system.

#### **Long Term Care**

A letter was recently sent to Rod Phillip, Ontario Minister of Long Term Care, in support of the improvement and expansion of the Listowel Caressant Care facility. The proposal would see the redevelopment of the existing 52 beds and the addition of 44 new beds to create a 96 bed facility. We were able to facilitate a call between Caressant Care and North Perth leadership that seems to have resulted in progress on this initiative.

# **Huron Perth and Area Ontario Health Team (HPOHT)**

• Standardize Infection Prevention and Control approach across members of the HPOHT

- Collaboration agreement expected to be available for review in January.
- Discussing decreased membership engagement in HPOHT activities (likely pandemic related).
- Working through funding, budget, salary structures
- Considering online appointment booking for primary care
- Discussed benefits of a formal physician association.

# **Regional Access and Flow**

We continue to work with our regional partners to support patient access and flow. Patient census at both sites remains stable. Many sites in our region have been at or above capacity and have relied on our teams for support and assistance.