



## **Board of Directors**

### **Highlights**

**October, 2023**

***Enriching life's journey together.***

### ***Board Education***

Nicole Duquette-Jutzi provided the Board with insight into the stages of a capital fundraising campaign. This is important information as the Wingham and District Hospital Foundation prepares for a capital campaign to support the CT Scan in Wingham.

Dr. Stephen VanderKlippe highlighted the key clinical uses of a CT Scan and its value to Wingham clinicians and patients. He also reminded the Board of the differences between CT and MRI.

***Quality care that is patient centred, timely, efficient, effective, equitable and safe.***

### **Quality Improvement – Recreation Therapy Schedule**

Recreation Therapy is a program available to inpatients at both sites. This therapy aims to utilize activity-based interventions as a tool to help people of all ability levels make the most of their lives – physically, mentally, emotionally and socially. The Wingham Site is trialing a patient led programming schedule where patients will be involved in designing a weekly "rec therapy" schedule. We anticipate that this level of patient engagement will help to make the programming more meaningful and fun for our patients. We will be collecting feedback on this quality improvement initiative with a plan to expand to the Listowel Site this winter.


### **COVID-19 Update**

As anticipated, hospitals throughout the south west and Ontario have transitioned to some level of masking in clinical areas. This transition at LWHA has gone well and we will continue to monitor COVID activity throughout the region.

COVID-19 vaccines along with flu shots will be available on-site for staff, physicians and patients.

### **Enhancing Nursing Documentation**

To support enhanced documentation practices the LWHA Clinical Nurse Leader (CNL) Quality Team will be monitoring nursing documentation practices in order to seek improvement opportunities. The team will start with periodically sharing an area of documentation that they have identified as requiring improvement with reminders and refreshers attached to the



communication. The first area of focus will be documentation of communication with physicians, patients, team members and families. Enhancing this documentation will help to stream line communication shift to shift, clarify care planning around discharge, and reducing confusion amongst families and staff.

### **Accreditation**

It's hard to believe that we are already starting to prepare for another Accreditation. Departmental teams are actively working on self-assessments with a target completion date of January 2024.

### **Emergency Department Staffing and Closures**

Staffing remains tight, however, significantly improved from our experience in the summer and through September. The area with the most unassigned shifts in the coming weeks is currently the LMH ER physician schedule. Drs. Barb Matthews and Rex Warren have covered a highly disproportionate number of vacant shifts the last several months. Their commitment to the community, ER and hospital has been exceptional, however, the workload they have historically assumed is not sustainable. The Emergency Department Locum Program, a provincial agency that fills vacant ER shifts, is not able to meet the provincial demand leaving local physicians to fill the gaps or face an ER closure.

The provincial extension of Temporary Locum Program funding to March 31<sup>st</sup> was welcomed. However, the funding will be lost if there is an ER closure as a result of a known physician shift vacancy between October 1, 2023 and March 31, 2024.

## ***A workplace that nurtures individual and collective potential.***

### **Manager of Support Services**

We have welcomed Stacey Bailey to the role of Manager of Support Services (Nutrition and Food Services (NFS), Environment Services (EVS) and Registration). Stacey started fully in October allowing time for Shelley Reinhardt and Steve Baxter to focus on the significant number of projects underway.

### **Health Human Resources (HHR) Update**

Staffing remains a challenge but we are slowly seeing some stabilization especially at the Wingham Site. We are currently seeing an increased amount of sick time as respiratory season has arrived and we are working through numerous vacancies a week. I want to thank our staff for continually going above and beyond to support our teams, patients and our communities.



### **Clinical Leadership Portfolio**

Lidia Czubak has joined the Clinical Leadership Team in the role of Professional Practice and Education Coordinator. Lidia has Clinical Educator Experience and we are excited to have her join the team. Nursing orientation remains an outstanding priority that Lidia will tackle in the coming weeks and months.

### **Surgeon Recruitment**

Dr. Zeeshan Rana has provided notice of his intention to resign his privileges at LWHA effective February 2, 2024. This unfortunate news has resulted in significant conversation about the needs of our surgical program. We have also engaged the surgical and medical leadership at the Huron Perth Healthcare Alliance due to their role as our secondary referral centre and historical support of our surgical program through itinerant surgeons.

We have a strong desire for a robust surgical program at both sites and will be actively and aggressively recruiting for at least one additional general surgeon. It has been recognized that having two general surgeons would provide more coverage and lead to a stronger surgical program across our two sites. Having a resident obstetrician/gynecologist would also support our obstetrical program and relieve some of the on call burden for a general surgeon providing C-section coverage.

### ***A sustainable and resilient environment that is here for future generations.***

#### **Project Update - LMH**


The HVAC Phase 1 project is 95% complete. We have now received the quote and issued the PO for the second phase of work which will include the 2<sup>nd</sup> Floor North Wing. Work is to start on the next phase on November 13<sup>th</sup>. Health Infrastructure Renewal Fund (HIRF special circumstance) in the amount \$2.591M have been approved for 2023-2024 to cover this portion. We submitted the request for the 3<sup>rd</sup> phase of the HVAC for 2024-25 HIRF in the amount of \$6.0M. This phase will complete the full project.

#### **Fisher Clinic Expansion**

The Construction Class C costing estimate with improvements has been completed. We are now moving on to the next stages which includes the planning for the demolition of the Karges house and financing of the project.

#### **Project Update - WDH**

The Generator Project in Wingham that is funded by HIRF \$'s from 2021-2023 is currently



having prep work completed. The unit has been ordered and is expected to be installed in August 2024. This unit will support the entire building and work concurrently with the existing generator.

Substation Maintenance conducted in Wingham on October 2<sup>nd</sup> led to a known/expected power outage for the admin area (specifically). In future with the new generator all areas of the hospital will be supported. The substation maintenance also impacted our Oncology/Pharmacy area in a significant way which identified a required safety improvement in the pharmacy area. The needed improvement (UPS) is currently on order.

We have submitted a HIRF special circumstance request for Room 227 negative pressure upgrade. The request was submitted for \$500,000 and will include HVAC improvements to air exchange to provide a proper isolation inpatient room. Our current space utilizes a temporary window solution however it is not permanent, efficient or effective as a long-term care solution.

#### **IV Pumps**

The IV Pump Regional Project - currently no change in status. The contract is under review by legal, HIROC insurance and LHSC and St Joseph's risk management teams with the intent to finalize contract clauses.

#### **Bill 124**

September is the first month where all staff are now being paid at the new rates for 23-24. We have also completed the Ontario Nurses Association (ONA) retro for the current year. We are working with the Ontario Hospital Association (OHA) and Ministry of Health (MOH) on a survey due November 14<sup>th</sup> to outline the additional payments made to CUPE, LiUNA, SEIU and OPSEU (or equivalent) for retroactive Bill 124 impact. Our scheduled Non-Union (OPSEU equivalent) payments are October 27<sup>th</sup> for WDH and November 3<sup>rd</sup> for LMH.

#### **Pay 4 Results Funding - Expansion of an already successful float model**

We will be receiving \$150,000 per site as part of a provincial Pay 4 Results strategy. The goal of the program is to support the planning and implementation of local solutions to reduce Emergency Department (ED) Length of Stay (LOS), increase patient access to quality health services, and improve the patient's ED experience. Our plan is to use this funding and expand our successful nursing float model. This will help to provide pre-planned coverage for sick calls, patient transfers and other workload vacancies as well as providing extra support to staff, physicians and students.

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### **Listowel Memorial Hospital – Inpatient Refurbishment**

Matthew Rae, MPP has engaged with the Ministry of Health on our behalf regarding our Listowel Memorial Hospital capital proposal. The Ministry re-iterated that the proposal is complete and reasonable. There is very limited new capital money available for 2023/24 due to the Ministry's commitment to fund the financial impact of Bill 124. Matthew stressed to the Ministry that the hospital and municipality have a strong desire to understand whether we can realistically develop on our current site that is landlocked between municipal streets and a flood plain. The best outcome for us this fiscal year would be to receive funding to undertake a preliminary study of the long term suitability of the current hospital site.

### **OneChart**

We currently have a limited number of physicians experimenting with the use of AI (Artificial Intelligence) to scribe portions of their patient interactions. It has only been a few weeks since we committed to the expansion of OneChart and the AI tool is more advanced functionality than the current project plans for OneChart. We have started engaging with senior staff in London to better understand how they plan to keep the system current and functional in an everchanging IT landscape.

### ***Meaningful partnerships to offer a seamless patient experience.***

### **Code Brown Review – Wingham Oncology**


Every year we participate in code brown/hazardous material spill training for our Oncology department. This training took place in October and is provided by the regional educator from the London Regional Cancer Program. A variety of departments took part in the education and it served as a great opportunity to work through how we would safely clean up and contain an oncology spill.

### **Family Health Team Partnership – ED Visits**

The Listowel Wingham and Area Family Health Team (LWFHT) is working to gather a better understanding of the patients visiting our two EDs and the linkage between the FHT. Our decision support analyst will be working on gathering data that will help drive a better understanding of our patient population and potential ways that we can better support our communities.

### **Primary Care Shared Messaging**

The loss of local primary care physicians has created a lot of concern from many stakeholders including residents, Foundation, Hospital and Clinic. There is a collective effort to issue clear communication broadly in order to provide some clarity to our community along with some



guidance to assist with seeking care in the absence of a family physician.

### **Huron Perth and Area Ontario Health Team**

- Ministry of Health 'accelerating' OHT strategy
- Starting April 2024, each OHT will receive up to \$2.2 million over three years (\$750K per year).
- Twelve OHTs will be supported to advance rapidly towards maturity and be considered for designation under the Connecting Care Act, 2019. HPA OHT is not one of the initial 12 chosen.
- The twelve OHTs will share lessons learned to support continuous learning and readiness for the next phase of implementation for all OHTs, and will help inform the processes, guidance, and templates that other teams will follow.
- Starting in Q3 23/24, the ministry and Ontario Health plan to release guidance, resources, and supports for OHTs on key elements of The Path Forward, including primary care networks and governance (including on the OHT not-for-profit, back-office support through operational support providers).
- The ministry is developing an 'OHT Maturity Framework' that will help OHTs in their journey from the current state to a mature state.

### **Support for Residency Program**

As we learn more about the residency program, it becomes more evident that this is the best long term opportunity that we have to recruit new physicians to our community. There is plenty of evidence that medical residents have a high likelihood of choosing to practice in the community in which they trained. As an organization, we will continue to embrace this program and support its launch in any reasonable way possible.

### **Health System Challenges**

One of the unfortunate realities of the Ontario Health Care system is that not all sectors are treated equitably by the system. In meeting with colleagues from other sectors, it is clear that they are dealing with staffing, funding and regulatory challenges that far exceed what we have faced and continue to deal with in the acute hospital sector. Primary care, home and community care, mental health and addictions and long term care at times all feel secondary to hospitals.