

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

## ***Board Education and Discussion***

Nancy Atone, from the Southwest Ontario Aboriginal Health Access Centre provided the Board with some insight into the sordid history of residential schools and Indian Hospitals in Canada. Guidance was shared on how hospitals and health care providers can support Indigenous health care approaches within the 'modern' health care system. This includes smudging, traditional teas, herbs and food.

As a nation, Canada has a long journey to overcome the systemic destruction of the traditional practices, values, cultures, languages and understanding of Indigenous people in Canada.

CEO Recruitment work continues on schedule. Interviews are expected in May.

The Board reviewed and provided feedback on:

- Quality Report
- Quality and Patient Engagement Framework
- 2023/24 Quality Improvement Plan Report
- Risk Report
- Integrated Risk Management Framework


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

### **CT Project WDH**

The CT Project team is currently undergoing a final review of the 2 suppliers identified in the Request For Proposals. Site visits were completed in early April and final decisions are being made. The team was very impressed by the professionalism shown at one of the two supplier visits. The decision to choose an equipment supplier was completed the week of April 15<sup>th</sup>. Site assessment and negotiations with the construction contractor will now take place. An announcement of the successful vendor will occur once contracts are finalized.

### **Medavie Mobile Mental Health Team**

A private company, Medavie, was awarded funding for mobile mental health teams in our region. Huron and Perth CNEs met with Medavie in early April. We still lack a clear understanding of what services they plan to provide and how that will link with the care that we are currently providing across the region. Concerns were shared that a needs assessment was completed for Huron and Perth with no consultation of local hospitals, staff, physicians,



patients, or regional programs. We encouraged Medavie to connect with the regional crisis program before any further planning takes place.

### **OneChart Phase 2**

The OneChart Phase 2 project, to expand the patients' Electronic Health Record, has three major projects kicking off this April: Patient Education, Dragon Medical One (physician voice to text) and Camera Capture.

The Anesthesia Module is currently underway and Listowel is planning implementation in April, while Wingham will go-live in May.

### **Surgeon – Dr. Mike Saba**

We are thrilled to welcome Dr. Mike Saba, general surgeon, who will be joining us by the end of May. This is exciting news for our surgical program.

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

### **National Laboratory Week**

April 15-19 was National Medical Laboratory Week and we are very thankful for our dedicated Medical Lab Assistants (MLA) and Medical Lab Technologists (MLT). We continue to work through ongoing shortages (as do most other hospitals) in our MLT group and are encouraged to see that additional colleges are planning to offer this type of course in the future including a program at Conestoga.

### **Obstetrical Services (OBS) - Listowel Site**

Planning is underway for both the temporary suspension of OBS service and reopening. At this time, the OB team plans to host an outpatient clinic two days per week during the suspension. This will help to ensure that our patients continue to experience outpatient support for their pre and post natal care.

OB Nursing Education refreshers will be a focus this summer. Education will be coordinated on site for RNs and RPNs whose roles support the OB program. Given our two remaining staff are still relatively new to OB, it is a priority for us to help support them to maintain their OB skills. We have been able to secure two off-site opportunities, one in Walkerton and one in Kitchener, where these staff will have paid time to support their learning.

### **Nursing Scheduling Update**

Many people are working hard to prepare and finalize our summer schedules. Part of this work

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is reviewing all vacation requests and organizing coverage. Once this is complete, the schedules will be drafted, finalized, and posted in May.

### **Clinical Nurse Extern Funding Update**

On March 28, 2024, the Ministry announced that the Clinical Nurse Extern Program has been made a permanent program. We have yet to receive any details related to allocations or reporting requirements and have been advised that in the interim, hospitals should continue to operate their program using the previous year's utilization. This is great news, and we are looking forward to integrating this program into permanent clinical services planning.

### **Practice Ready Ontario**

We were disappointed to learn that we were not successful in matching with any physicians following the first round of interviews for the Practice Ready Ontario Program. This initiative aims to streamline the entry into practice for internationally trained family physicians. There remains some hope as there are physicians in the program still looking to match with communities along with a second intake round expected this fall.

### **Level Up North Perth**

Level Up is a group of close to 20 North Perth residents concerned about the future of health care in the community. They are especially focused on improving access to primary care. Their efforts are focused on recruitment, additional primary care availability, recruitment incentives and political advocacy. The complexities of health care recruitment for rural hospitals become evident when hospital, physician, municipal, foundation, family health team and recruitment committee efforts intersect at a single point.

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

### **Fisher Clinic Expansion**

Board approval was received to move forward with Melloul-Blamey as the General Contractor. The total budget is expected to be \$10.3M. They are expecting the project to take 58 weeks and can begin within 20 days of being awarded.

### **Budget Options and Opportunities**

We have a budget document that outlines our cost of operating the hospitals' current programs with existing staffing models. The Ministry of Health and Ontario Health have not requested a budget submission for 2024/25. Benchmarking our organization against peer

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hospitals has not occurred since before the pandemic. There are also new expectations for some service areas based on changes to standards and patient populations. In the absence of provincial guidance or announcements of hospital funding levels, we will be spending some time reviewing our current budget documents with a focus on identifying options and opportunities that may exist within the organization.

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

#### **CT Downtime and Support**

We are thankful for our ongoing partnership with both Walkerton and Fergus hospitals to support each other in times of CT downtime. Due to staffing shortages in Fergus we continue to cover their CT support for Palmerston on a regular basis.

#### **Regional Oncology Services – Optimizing Partnerships to Support Patient Safety**

The London Regional Cancer Program (LRCP) in partnership with the regional cancer programs are starting a person-centered care community of practice (PCC CoP). The purpose of the PCC CoP will be to create an environment for knowledge-sharing, relationship building and solution generating that benefits the Southwest region's ability to optimize quality of care and experience for patients across the cancer continuum. The Wingham Oncology Program will have nursing and leadership participation as well as a patient partner who has been part of the Wingham oncology program and will be able to provide valuable insight.

#### **Ontario Health West**

Ontario Health West requested to meet with us recently to begin what they hope will be quarterly meetings with Hospitals. Since the demise of the LHINs, we have not had regular, local engagement with Ontario Health. We were able to express our support for Ministry initiatives such as the Clinical Nurse Extern Program while informing Ontario Health of other pressures in the system such as the extreme shortages of Medical Laboratory Technologists in Canada.

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

Since inception, the Huron Perth and Area Ontario Health Team (HPA OHT) as had a suggested financial contribution of 0.1% of global funding be contributed by each participating organization. We have made contributions in each year since inception of the OHT. The annual contribution for our two hospital is \$35,290. They have recently created an Impact and Investment Framework that they expect to utilize in making expenditure decisions.