

### Enriching life's journey together.

# **Board Education and Discussion**

- A representative from HIROC, our insurance provider, offered the Board insight into our liability insurance coverages.
- The Board spent time discussing the unusual situation where we expect close to breakeven financial results for 2023/24 and are currently predicting significant deficits at each hospital in 2024/25. The timing of Bill 124 re-imbursements, one time funding for Bill 124 and no funding announcement for 2024/25 are the primary reasons. No budget submissions to Ontario Health were required for 2024/25.
- The Board approved a proposed extension to the Hospital Services Accountability Agreements with Ontario Health for the 2024/25 fiscal year.
- New board members are being recruited for the next Board appointment in June 2024.

# **Reality of Small**

For decades, small hospitals in Ontario made due with a barebones approach to staffing. This resulted in being reliant on the availability and goodwill of colleagues to work in the event of a staff shortage or crisis.

At LWHA, recent changes to nursing staffing models have resulted in float positions that build some redundancy into the staffing schedules and often result in "an extra set of hands" being immediately available to assist with workload, go on a patient transfer or cover a short notice absence or lunch break. We were fortunate to receive some funding that partially covers the cost of this expanded staffing model.

Despite the best efforts of a large group of dedicated people, it is sometimes difficult to overcome the reality of being small. That is the situation we are currently facing with the number of maternity leaves in our obstetrical department. We simply can't backfill on a temporary basis when  $\frac{3}{4}$  of our staff are on maternity leave.

Smaller departments such as laboratory and registration have also had to undertake extreme measures to ensure sufficient staff are available to maintain operations.

There has always been a fine balance between ensuring we have sufficient staff available to safely and consistently provide the care required and the financial and budgetary reality that all hospitals face. There have been a number of targeted and temporary provincial programs that have benefited hospitals recently. We will be watching the results of the provincial budget carefully to see which of these programs will continue to be supported.

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

# **CT Project WDH**

The RFP for the CT Implementation at WDH has closed and the team has shortlisted to three models and two suppliers - GE (2 units) and Siemens (1). Site visits to look at equipment will occur in Boston (GE) and Kincardine (Siemens). We plan to have a decision made by April 10<sup>th</sup> and then have site visits to further assess the construction required. We expect to have purchase orders issued by June 2024 with project completion June 2025.

# Security – Operations Quality QIP 2023-2024

Security is now working full 12 hours shifts in both sites seven days a week. We have received very positive feedback. All renovations and improvement actions from the July 5/August 2<sup>nd</sup> violence incidents at both hospitals have now been completed.

# General Surgeon Recruitment

Dr. Mike Saba, a potential general surgeon recruit arrived on March 11 for a locum. The surgical departments, chiefs of staff and physicians came together to develop a small patient and procedure roster that offered exposure to our programs and teams during his week long visit. This came together very quickly, and our teams had to move fast to put a plan in place. This visit went incredibly well.

# **Expanding Wingham Surgical Services**

Last year we had identified a goal of expanding the Wingham Site's surgical program to include Urology and Ear, Nose and Throat (ENT) procedures. We are excited to announce that one of our visiting Urologist's, Dr. Bukala, will now be offering cystoscopes in the Wingham OR.

Dr. McKenna is currently a visiting ENT Specialist that has been seeing patients in clinic in the Ambulatory Care Department at the Wingham Site. Dr. McKenna's first days in the Wingham OR were in February and he was very impressed and grateful for everything that went into making this a successful transition.

# A workplace that nurtures individual and collective potential.

### Supervisors

The supervisor roles in Diagnostic Imaging and Lab have had very good feedback from our colleagues within the hospital. There is a general feeling of improved and timely communication both within and outside the departments.

### **Psychological Health and Safety**

As of March 15<sup>th</sup> approximately 60% of staff have completed the Well-Being at Work program which is the core element of the psychology health and safety training. In addition, 60% have also completed elective courses on Navigating Stress at Work and Continuing to Care at Work.

### **Masking Mandates**

Several regional hospitals have ended mandatory masking requirements in clinical areas in response to reduced cold and flu activity. The LWHA Infection Prevention and Control Quality Team is evaluating our specific scenario and we anticipate removing mandatory masking. Masking will remain highly recommended, and masks will continue to be available for staff, physicians, patients and visitors.

### Health and Safety / Emergency Response

As of March 1<sup>st</sup>, 174 staff have completed MORB (Management of Resistant Behaviour) provided by Vigilant Security Services. Initial feedback suggested staff were looking for more hands-on learning related to the application of Pinel restraints. Vigilant Security has enhanced their training sessions and 100% of staff who completed the survey have indicated they are prepared to apply their learnings from the program within their role. The transition in de-escalation training has been a valuable change as we continue to ensure our staff are prepared with de-escalation strategies and restraint application should they be presented with escalated behaviours.

Our Health and Safety Officer is currently coordinating a Mock Code White Exercise (violent or aggressive person) with our staff and the Security firm to ensure there is an opportunity for staff to apply learnings from the training and for security to be present to practice how their response to the situation is supportive to staff.

### Recruitment

LWHA participated in the F.E. Madill High School career and job fair on March 27<sup>th</sup>. The event is coordinated by the school's guidance counsellor in an effort to help connect students with jobs once they graduate or connect students and expose students to career opportunities that they could return to following completion of their post-secondary education.

#### **Clinical Nurse Extern Program**

The clinical nurse extern program continues to be an extremely valuable recruitment strategy for LWHA and support to local student nurses. When the program was launched in April 2023, 12 clinical nurse externs were hired between Listowel and Wingham. Since introducing the new program only two externs have chosen alternate opportunities. To date 5 have transitioned into RN or RPN positions within the Alliance with an additional 2 that will be transitioning to nursing positions this spring. We have an additional 7 new clinical nurse externs joining LWHA between February and May. Ten of our externs have also been able to complete at least one of their nursing

placements at LWHA in the fall 2023 or winter 2024 term. The provincial budget appears to have extended the funding for this program indefinitely.

### **Obstetrical Services - Listowel Site**

Following the last Board meeting, communication was sent out to all staff, physicians and our local partners regarding the upcoming temporary closure. Physicians are meeting with their patient's individually to discuss options and next steps for referrals. Meetings with Norfolk General Hospital are being held to gain an understanding of their "lessons learned" in reopening their OB program after a temporary closure.

# **Practice Ready Ontario**

A number of staff and physicians have been supporting the selection process for the Practice Ready Ontario Program. This initiative aims to streamline the entry into practice for internationally trained family physicians. Interviews or conversations are generally followed by clinic and hospital tours. Some individuals also wish to see specific facilities in the community such as gyms or schools.

It is a humbling experience to listen to the journey these physicians have undertaken both personally and professionally as they look to practice medicine in Canada. We remain hopeful that both of our communities will benefit from this program.

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

### **Fisher Clinic Expansion**

Contractor site visits were March 12<sup>th</sup>. We have extended the Fisher Clinic Expansion RFP's closure date to April 2nd at the request of the contractors. We expect that this extension will give us a more accurate cost estimates. Shovels in the ground could happen as early May 6<sup>th</sup> if we are able to get board approval to move ahead in early April.

### **Generator - WDH**

Site preparations have been completed and we are now waiting on the unit to arrive for installation. Expected completion of this September 2024.

# Bill S211 – Fighting Against Forced Labour and Child Labour in Supply Chains

Annual reporting is now required to show our due diligence and responsibility surrounding exploitive practices in supply chain and procurement processes.

### **BPS – Broader Public Sector Procurement Guidelines**

New guidelines are in place for posting competitive procurements with the threshold lowered to \$353,300. There are also additional requirements as a result of the Building Ontario Businesses Initiative Act, 2023 (BOBIA) that will require additional consideration of Ontario vendors.

### **Environmental Sustainability**

We created a working group to identify environmental sustainability ideas and actions items. This has been identified as an opportunity for our accreditation in 2025 and has also been on our radar as an initiative that we need to act on in our Operations Quality Group in 2024-2025.

### Bill 124

In March we received the Bill 124 funding – 83% of payments to staff were re-imbursed for LMH and 71% for WDH. Other smaller sites like WDH have also seen 70+% funding as well. We still do not have any explanation as to why however in the new year we are expecting a reconciliation will be requested by Ontario Health.

### Benefits

With the uncertainty of the assessment of value for Collaborative Benefits we have moved forward with a 2-year extension with our current benefit carriers under our existing contract with Greenshield, Manulife and Beneva. Should there be significant value in transition to Collaborate Benefits, our current benefit agreements allow for a 90-cancellation notice.

### **Electronic Scheduling System**

LWHA has formalized a contract with UKG to replace our electronic scheduling system which is coming to end-of-life December 2024. We have recently added an additional temporary cross-site Scheduler to the Human Resources team to support our existing Schedulers with the implementation to ensure we continue to meet staffing and scheduling needs.

# Meaningful partnerships to offer a seamless patient experience.

### Huron Perth Hospitals – Master Plan

Discussions have taken place with the Ministry of Health Capital Investment Branch, Director and Manager and Ontario Health West, Chief Regional Officer. There is openness for a regional, Huron Perth approach to hospital capital planning. The Assistant Deputy Minister has now committed to meet with Huron Perth Hospital Leadership to explore the possibility of broader capital planning from a health system perspective rather than individual site plans.

#### Wait Time Information System

We continue to work with our Ministry of Health and Novari Health partners to complete the Wait Time Information System project. Our current project timeline has been adjusted by approximately one month – estimated completion is May 9<sup>th</sup>, 2024. We are very fortunate to have a strong team internally to support this project as it's resulted in more work than we originally anticipated.

### Medavie Mobile Mental Health Team

Last summer, the Ministry of Health announced funding for mobile mental health teams and there was money awarded to a private company, Medavie. Many regions, including Huron and Perth, already have established mobile mental health teams. They're at the point of planning the launch and are looking to start with post-ED visit follow-up care. We know very little about the program or service and hope to learn more at an upcoming meeting.

### Auxiliary to the Listowel Memorial Hospital

The Auxiliary was extremely pleased to present a cheque for \$25,000 to support the purchase of a bariatric bed for the Listowel Memorial Hospital. They were also excited to show off the new merchandise available in the gift shop. We continue to appreciate their support.

### **Municipality of North Perth**

The immediate health care needs of the community remain a concern in North Perth. There is concern about the ability of the current hospital facility to serve the long term growth of the community.

Within the next 3 months we should have clarity on the net new resources available to the community through:

- Practice Ready Ontario
- Schulich Medical School residency
- Listowel Wingham and Area Family Health Team Mobile Primary Care Team Each of these initiatives has the potential to have a positive, impact on access to primary care in the community.

With respect to hospital capital, the Ministry of Health Capital process remains slow with significant uncertainty. Our multi-pronged approach continues to be a reasonable strategy. The Municipality remains concerned about the availability of suitable land should a new site be required.