

BOARD MEETING HIGHLIGHTS

May 26, 2009

The following are highlights of the Open Board Meeting of the Erie St. Clair Local Health Integration Network (ESC LHIN):

Agenda Item Highlight

Small Community Hospital Emergency Department Study

The Board of Directors past a motion to not proceed with receiving recommendations on the Small Community Hospital Emergency Department Study from staff in June. The decision was reached after the Board determined it would prefer to wait until after the provincial Rural and Northern Health Care Panel completed its work before receiving recommendations from staff.

The Board of Directors further directed staff to continue their work by completing their scheduled activities, consolidating information gathered and reporting on progress on the Small Community Hospital Emergency Department Study. The Board heard that in addition to public consultations and community presentations, 48 stakeholder consultations have also been completed ranging from Emergency Medical Services (EMS) and Fire Departments to unions and clergy.

The ESC LHIN will provide the information it has gathered to-date to assist in the provincial panel's development of recommendations on how to coordinate the delivery of health care services to northern and rural communities. The provincial panel's recommendations are expected this fall.

Information on the Small Community Hospital Emergency Department Study is available online at www.eriestclairhin.on.ca under the Current Initiatives menu.

**Health Force
Ontario
Marketing and
Recruitment
Agency (HFO)**

The LHIN Partnership Coordinator for HFOMRA, Laurie Nash, educated the LHIN Board of Directors in a presentation about the role of the firm as the Ministry of Health and Long-Term Care strategy and support arm for health human resources recruitment across the province.

Nash spoke to the lengthy and detailed process required to recruit physicians to our community including the key elements that make the difference in a successful campaign. Of these, spousal employment support was emphasized as being a challenge in Erie St. Clair, where often highly professional positions are required to place a physician and their family; a challenge that is intensified by the current economy and unemployment rates of the region.

According to the current Underserved Area Program data, Erie St. Clair suffers from a severe physician shortage that includes the need for 124 family physicians and 169 specialists as identified by local stakeholders. Nash noted that, while the region has had a number of new physicians join our community, retirement and attrition rates work against HFOMRA and other local recruiter's efforts.

The region was highlighted as having competitive advantages for recruitment, including the locations of both University of Western Ontario and the new University of Windsor medical schools whose focus is strong in the area of rural medicine, low real estate pricing, and proximity to the United States.

**Ministry-LHIN
Accountability
Agreements
(M-LAA)
Targets**

A report on MLAA targets was received by the Board of Directors that captured the shared local successes in Erie St. Clair for the fiscal year of 2008/09.

Erie St. Clair and its health service providers achieved the best performance in the province meeting 91% of their targets (10 out of 11 indicators). This included the best wait times for Cataract Surgeries province-wide and second best for Alternate Level of Care Days and the Wait Times for placement to Long-Term Care.



Brad Keeler, Senior Director of Performance, Contracts and Allocations, delivered the report and emphasized the system effort of local physicians, nurses and administrators of health service providers that made this success possible.

While the success is cause to celebrate, Keeler acknowledged that there is still a great deal of work to be done in the areas of improving the time it takes to place our seniors in Long-Term Care homes and improving access to primary care. Additionally, 2009/10 targets will be changed to promote continual improvement and better access for patients.

Wait Times for Emergency Departments will be included in the M-LAA for 2009/10.

A copy of the MLAA is available online at www.eriestclairhin.on.ca under the Reports and Publications menu.

Palliative Care Team Evaluation

An update was provided on the evaluation of the Palliative Care Team. The team was launched as a pilot initiative under the Aging at Home Strategy and, as Ralph Ganter, Senior Director of Planning and Integration described, was designed to bridge the gap between hospital/hospice services and home care.

The evaluation found that the team has had a positive impact in the community. Highlights of the findings were:

- Improved quality of palliative care
- Increased trust/confidence in home care
- Reduced potential for crisis
- Enhanced support for caregivers
- Improved family caregiver capacity to provide care at home
- Increased client and caregiver satisfaction

To date, 75 clients received service from the Palliative Care Team with 74% of clients receiving care within 7 days and an estimated 19 hospital admissions avoided.



Information on the Aging at Home Strategy is available online at www.eriestclairhin.on.ca under the Current Initiatives menu.

Next Meeting: Tuesday, June 23, 2009
1:00 p.m.
The Erie St. Clair LHIN
180 Riverview Dr.
Chatham, ON

For more information on Board Highlights or about the Erie St. Clair LHIN please contact Zoja Holman, Senior Community Engagement Consultant, 1-866-231-5446 x 225.



Ontario

Erie St. Clair Local Health
Integration Network
Réseau local d'intégration
des services de santé
d'Érié St. Clair