

Questions & Answers

Bluewater Health Investigation – Dr. Kevin Smith Report

July 27, 2007

Why was this report written?

The report was written in response to a request from the Bluewater Health Board of Directors, physicians and the community of Sarnia-Lambton The Ontario government appointed Dr. Smith as an Investigator to review issues related to the management and governance at Bluewater Health. On July 10, 2007, the Report of the Investigation of Bluewater Health was submitted by Dr. Kevin Smith to the Ministry of Health and Long-Term Care (MOHLTC), Erie St. Clair Local Health Integration Network, Bluewater Health and posted on the web sites of the MOHLTC and Bluewater Health for the public to view.

Where can I find a copy of the report?

The report can be found on-line at www.health.gov.on.ca
www.bluewaterhealth.ca or as a link on the LHIN website at
www.eriestclairhin.on.ca

What are the report's key findings and recommendations?

The report was received by the Minister of Health on July 10, 2007, and its recommendations are now under review by the MOHLTC, Erie St. Clair Local Health Integration Network and Board of Directors of Bluewater Health.

In total, there are 41 recommendations, eight of which are directly or indirectly related to the Erie St. Clair LHIN. Within the eight recommendations where the LHIN is mentioned, two designate the LHIN as taking the lead role. In the remaining six recommendations, Bluewater Health and the monitor recommended in Dr. Smith's report will assume a leadership role and present plans to the LHIN for feedback, guidance and approval.

The following are the recommendations that require the LHIN to take the lead role:

Recommendation 16: *Through the LHIN leadership a process to define best practice based on available human resources with respect to the co-location of intensive care and cardiac care should occur within six months of this report.*

LHIN Action: In supporting this direction the Erie St. Clair LHIN Critical Care Lead will provide guidance to Bluewater Health in respect to best practices while observing the timelines indicated in the recommendation.

The LHIN will also work with Ontario's Critical Care Strategy and access the services of the provincial critical care Performance Improvement Coaching Team Program.

Recommendation 34: *A clinical review should be conducted, led by Palliative Care providers and the LHIN, to determine the appropriate services for the community, to finalize plans for regional consolidation and to ensure transparency re: funding and decision making. The relation between community and inpatient services must be clarified by this process.*

LHIN Action: The LHIN is involved in multi-party discussions to implement a plan for end of life services in Sarnia-Lambton. The LHIN sees itself as being a partner in this process in order to determine the appropriate services for the community.

The following are the recommendations that require an indirect LHIN role:

Recommendation 12: *An external Monitor should be appointed to follow the implementation of this review within reasonable timelines. This position will liaise with the MOHLTC, and the LHIN. The monitor will also produce quarterly progress reports to the community, LHIN and the MOHLTC.*

LHIN Action: The LHIN has begun discussions with the MOHLTC for a ministry appointed Monitor, and if approved, will support the hospital and Monitor in the development of a plan to effectively implement the recommendations.

Recommendation 17: *The redevelopment team should undertake both internal and external presentations to communicate the vision and plan for the new hospital. In so doing a number of key constituencies should be included (e.g. nursing leadership, medical leadership, the LHIN, community, donors, etc).*

LHIN Action: The LHIN supports the building of a new hospital in a timely manner, as the report suggests. The LHIN will participate as a stakeholder for consultation on the vision and plan for the new hospital.

Recommendation 22: *The Facilitator should support the Board, Management and Medical Staff in creating alignment and common understanding regarding their respective roles and accountabilities. The Facilitator should consider the following: (seven bullets in total – two applicable to the LHIN).*

- *Education regarding the MOHLTC, LHINs, HAPS etc.*
- *Clarification around the acquisition and use of Wait Times Funding.*

LHIN Action: The LHIN supports the recommendation of obtaining a facilitator and will provide information as needed for educational purposes.

Recommendation 26 (re - surgical program issues): *Further regional rationalization and integration should be examined by the Interim CEO, Surgical Program Lead and LHIN, along with other LHIN hospital partners.*

LHIN Action: The LHIN will support the interim CEO, Monitor and staff to review and analyze the surgical programs to look for appropriate integration opportunities and rationalization of services.

Recommendation 31: *Bluewater Health should seek external “coaching” on nursing issues from a hospital with strong ONA relations (e.g. St Joseph’s London). This should be done in collaboration with the LHIN, and with the proposed Monitor (see Recommendation 12 on Page 9).*

LHIN Action: The LHIN will assist by recommending external coaches for consideration.

Recommendation 40 (re - section J Efficiencies): *Working with the LHIN, Board and management to review opportunities discussed in this Section and develop an action plan with oversight by the Monitor (see Recommendation 12).*

LHIN Action: The LHIN will work with Bluewater Health to review potential savings as identified in previous peer reviews, other documents and Dr. Smith's report. The LHIN and Bluewater Health require more information and clarification as to the specifics of the cost savings before facilitating the implementation of this recommendation.

Will the recommendations of the report be implemented?

The LHIN and the ministry are discussing a detailed response to the report. The LHIN will support and assist with the implementation of the recommendations as required.

It will be the responsibility of the LHIN and the monitor to work together with Bluewater Health to support the implementation of the approved recommendations. It is the goal of the LHIN to see the recommendations move ahead in a timely manner.

What role will the LHIN play in the implementation of the recommendations?

The LHIN will work with the hospital and Monitor at a systems level to address the recommendations in Dr. Smith's report. As outlined above, the LHIN has a specific role relating to individual recommendations.

What role will the LHIN play in the hiring of an interim CEO?

The hiring of staff is an operational matter of the board of Bluewater Health and not within the scope of the LHIN.

What role will the LHIN play in the selection of a board Chair?

The selection of a board Chair is not within the scope of the LHIN and is a governance responsibility of Bluewater Health.

What role will the LHIN play in the selection of a Monitor?

The LHIN CEO has been in consultation with the MOHLTC regarding the placement and selection of a Monitor. The final decision regarding the selection of the Monitor remains with the MOHLTC.

Is Bluewater Health accountable to the LHIN?

Yes. Bluewater Health is one of 99 health service providers accountable to the LHIN for performance and funding. The LHIN is responsible for the planning, coordination and funding of health service providers across the Erie St. Clair LHIN, which includes the regions of Sarnia-Lambton, Chatham-Kent and Windsor-Essex.

What is the LHIN's role with the physicians?

Physicians are not directly accountable to the LHIN. However, hospitals are accountable to the LHIN for meeting their Hospital Accountability Agreements which outline funding and performance targets that often rely on the services provided by physicians. The LHIN is also responsible for monitoring the hospital's Wait Time performance, of which physicians play an integral role.

The LHIN is responsible for coordinating healthcare from a broader system perspective which includes collaborating with funded and non-funded partners, including physicians. The LHIN has identified health human resources as one of

its eight strategic directions, recognizing the invaluable services provided by physicians in maintaining the excellent publicly funded healthcare system available to all citizens of Ontario.

What is the LHIN's role with the community of Sarnia-Lambton?

The role of the LHIN is to work at a systems level to ensure that the people of Erie St. Clair receive quality, patient-focused healthcare. Within the community of Sarnia-Lambton the LHIN will work with stakeholders at a system level to help facilitate positive change.

The LHIN maintains a commitment to community engagement, an open door policy and values the input of all citizens. As part of the Hospital Accountability Agreement, it is the responsibility of Bluewater Health to communicate and engage the community effectively and transparently.

How can I keep up to date as to the progression of the implementation of the recommendations?

LHIN action updates will be posted periodically on the LHIN website at www.eriestclairhin.on.ca.