



Update on Hospital Clinical Services Plan Summary Report of Community Engagement and Feedback on the February 17, 2009 CSP Steering Committee Report

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Our Shared Vision

**‘One Acute Care Network’
Improved and equitable patient access
to an integrated hospital system
that provides the highest quality of care
across the Central East LHIN**

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Update on Report of the Steering Committee, CELHIN Hospital Clinical Services Planning Project

- **Community Engagement and Feedback**
 - March 9, 2009 Stakeholders Meeting
 - Information / discussion Sessions (35+)
 - CELHIN Hospital Boards, CECCAC Board
 - CELHIN Board to Board (Scarborough, Durham, North East)
 - Consumer Groups
 - Physician Groups
 - Planning Partners: CELHIN Networks, Task Groups, Collaboratives
 - Municipal and Regional Councils and Emergency Medical Services
 - Provincial MPPs and Federal MPs
 - Meetings with various Branches of the Ministry of Health and Long Term Care
 - On-line Survey
- **Current Hospital /CELHIN CSP Planning Activities**
 - Medical Leadership Recommendations
 - Clinical Leadership Structure Planning
 - Hospital / Clinical Activity in Five Clinical Specialities
- **Proposed Next Steps**

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Community Engagement and Feedback

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March 9th Stakeholders Meeting

Participants (>100):

- Members of the CSP Steering Cttee and Clinical Advisory Groups
- Labour Unions – ONA, CUPE, OPSEU, SEIU
- Physicians – OMA
- Consumers members of the 2 CELHIN Collaboratives,
- CELHIN Networks (Seniors, eHealth, Mental Health)

Questions for Discussion and Feedback

1. What does this vision mean to you?
2. What role do you play in achieving this vision?
3. Is anyone threatened by this vision?
4. You would know that this vision is successful when
 - Key measures of success include _____, and
 - _____ has been achieved?
5. Do you feel the CSP delivery models will improve care for the CELHIN residents?
6. What should be done to ensure that the general public understand the vision, and impact these models will have on their access to quality health care and an improved patient experience?

Questions for Discussion and Feedback

7. What should be done to ensure that the staff and physicians understand the vision?
8. How would these models improve the work environment for staff and physicians?
9. These models were evaluated against the CELHIN's Decision Making Framework criteria which includes: 9 criteria. What are the strengths, weaknesses, opportunities and threats of each of the proposed models?
10. Referring to the Intended Outcomes and Key Considerations for these service delivery models, have all elements been considered in moving forward with the implementation of these models?
11. In future planning for health system design, the public, staff and physicians can best be engaged by _____?
12. Clinical Leadership Structures have been proposed. Process for selection? Accountable to whom and for what?

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Feedback (summary of reoccurring themes)

- Greatest challenge is equitable patient access; geography, cultural and linguistic diversity, navigation through the system. Repatriation, gaps in service need work.
- ‘Shared care’ along the continuum of care to be enhanced (important to maintain and improve quality).
- All play role in advancing the plan and ongoing communication with the public on the meaning of the plan.
- Alternate vision statement might be “no matter where you enter the system, we will take care of you”.
- May be threatening to public (perceived loss of services) and providers (personal practice and changing practice referrals).
- Public need to be engaged in making change happen, patient experience not reflected directly.
- Accountable leadership is essential.

March 9th Stakeholders Meeting

Feedback (cont')

- Involve more people in planning; engage front line, multidisciplinary professionals.
- Be transparent.
- Seamless referral will happen only with eHealth and transportation enablers in place.
- Need LHIN-wide Health Human Resources Plan, physician compensation, stability of jobs for healthcare workers
- Don't change what is working and don't 're-invent the wheel'
- Test assumptions.
- Some outcome indicators identified.
- Build on existing successes and align with other LHINs.
- Address other clinical services in CELHIN.
- Absence of discussion/comments on cost or sustainability of health care system.

All Sources of Feedback (representing about 780 persons)

Correspondence / Records from Meetings / Discussions	Quantity
CELHIN Boards, Hospital Administration, Foundations, Community Health Agencies	14
Letters/ emails from Residents in Communities of Ajax, Haliburton, and Scarborough	79 (some with multiple signatures)
Physicians	21
Allied Health Care Providers	2
Emergency Services	1
CELHIN Planning Partners <ul style="list-style-type: none"> • Primary Care Working Group (1) • French Language Services Collaborative (1) • Stakeholder Engagement Event – 6 tables (March 9) • Labor (3 events) 	Represents 100 – 150 persons
Government Meetings, Letters (Federal, Municipal, Regional)	13
CELHIN Website - On-line survey	14
Industry (Ontario Power Generation)	1

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Opinion of Vision: 'One Acute Care Network'

Source (Total Responses)	Generally Supportive	Mixed or Neutral	Generally Opposed	Need More Information	Additional Comments By:
Boards, Hospitals (10)	CECCAC, CMH, HHHS, NHH, PRHC, TSH, WMHC, LHC, RVHS, B2B (NE)				CECCAC RVHS TSH
Community (2)			Friends of Ajax Pickering Hospital		Haliburton
Physicians (1)		District 11 Chapter, OMA			
Planning Partners (2)	Primary Care Working Group FLS Collaborative	March 9 Stakeholders			
Government (1)					Uxbridge
On-line Survey (14)	12		2		

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Response on Cardiac Services Recommendations

Source (Total Responses)	Generally Supportive	Mixed or Neutral	Generally Opposed	Need More Information	Additional Comments By:
Boards, Hospitals (3)	HHHS, RVHS, TSH, PRHC				
Community (0)					
Physicians (1)					Peterborough
Planning Partners (2)	Primary Care Working Group	March 9 th Event		March 9 th Event	
Government (1)					MOH Apr 27
On-line Survey (12)	7	5			

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Response on Maternal Child Youth Recommendations

Source (Total Responses)	Generally Supportive	Mixed or Neutral	Generally Opposed	Need More Information	Additional Comments By:
Boards, Hospitals (4)	LHC-PP Foundation, RVHS, TSH	Summary of HHHS stakeholder input	HHHS		
Community (79)	Minden resident (1)		Haliburton (77)	Ajax (1)	
Physicians (6)	Scarborough		Haliburton Oshawa	Bowmanville Oshawa	Ajax
Nursing, EMS (3)	Nursing Staff at HHHS		Midwifery Program, McMaster		EMS
Planning Partners (2)	Primary Care Working Gp	March 9 th Stakeholders			
Government (5)		Ajax Council	Dysart Council and Councillor, Green Party Candidate in Haliburton	Haliburton County	
On-line Survey (12)	6	3	3		

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Response on Mental Health & Addiction Recommendations

Source (Total Responses)	Generally Supportive	Mixed or Neutral	Generally Opposed	Need More Information	Additional Comments By:
Boards, Hospitals (4)	HHHS RVHS WMHC	TSH			
Community (1)				Ajax	
Physicians (2)	Lindsay Grandview				
Planning Partners (1)	Primary Care Working Group				
Government (0)					
On-line Survey (10)	4	2	3	1	

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Response on Thoracic Services Recommendations

Source (Total Responses)	Generally Supportive	Mixed or Neutral	Generally Opposed	Need More Information	Additional Comments By:
Boards, Hospitals (2)	RVHS		TSH		
Community (1)		Ajax			
Physicians (6)			TSH - Location not cited District 11 Chapter, OMA		NHH Bridgenorth LHC-Oshawa
Allied Health (1)			Peterborough		
Planning Partners (2)	CELHIN Primary Care Working Group	March 9 th Event			
Government (0)					
On-line Survey (11)	6	2	3		

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Response on Vascular Services Recommendations

Source (Total Responses)	Generally Supportive	Mixed or Neutral	Generally Opposed	Need More Information	Additional Comments By:
Boards, Hospitals (2)	RVHS TSH				
Community (0)					
Physicians (2)		PRHC surgeon			LHC – O physician
Planning Partners (2)	Primary Care Working Group	March 9 th Event			
Government (0)					
On-line Survey (11)	7	4			

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Key Themes and Opportunities Identified

- **Themes**

- General Support for ‘One Acute Care Network’
 - Need indication of ‘integration’ intent by hospital boards
- Clinicians working towards resolution of issues/concerns and anxious to implement recommendations
- Patient transportation and eHealth key enablers
- Ongoing consultation process required

- **Opportunities**

- Public: further education/information sharing, input
- Providers: further support by CELHIN as they move forward with integration planning
- For Both: debunk ‘myths’ and provide clear interpretation of misleading assumptions

Current Hospital / CELHIN Planning Activities

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Medical Leadership Group Recommendations

- Staff working with CELHIN eHealth Lead and Team:
 - LHIN-wide Credentialing :
 - RFI released for electronic Common Credentialing Tools
 - LHIN-wide On-Call and OR Scheduling:
 - Sourcing vendors with Meditech compatible software tools
 - All 9 hospitals upgrading to or initiating Meditech 6.0 – common platform
 - Aligning with CELHIN wide and Provincial Electronic Medical Record (EMR)

Clinical Leadership Structure Planning

- Staff working with CELHIN Medical Leadership Group Chair (Chiefs of Staff):
 - Developing
 - Framework for Leadership Structures
 - Criteria for selection of Leadership Structure Leads/Co-leads for each Clinical Specialty
 - Supporting
 - Hospital discussions / planning activities on recommendations

Hospital / Clinical Activity: Five Clinical Areas

- **Cardiac**

- PRHC / RVHS further development of business case for recommended option on PCI and related diagnostic services serving multi-centre care for cardiology,

- **Vascular**

- PRHC / TSH further development of business case for recommended option on consolidation of advanced services to two centres and diagnostic/interventional services to support multi centre care,

- **Thoracic**

- LHC / TSH / RVHS further development of 'shared care' model across the CELHIN, including diagnostic/interventional services

Hospital / Clinical Activity in Five Clinical Areas

- **Maternal Child and Youth**

- TSH / RVHS meeting regarding siting of Advanced Level 2 NICU and Paediatrics Care
- CELHIN surveyed province: no other hospital of this size has elective obstetric program
- HHHS requests opportunity to develop new model of care for obstetrics: Family Practitioner/Midwifery model
- RMH / PRHC developing MOU for shared paediatric care

- **Mental Health and Addiction**

- WMHC meeting with various hospitals and community agencies on recommendations
- Staff working with CELHIN Mental Health and Addiction Network Steering Cttee

Proposed Next Steps

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Advancing the 'One Acute Care Network'

- Provide report on feedback to all stakeholders
 - Include 'action plan' for each issue arising from response of stakeholders
 - Schedule face-to-face meetings with key stakeholders to address ongoing concerns
- Continue to work with hospitals on preparation of integration opportunities (Voluntary Integration Requirement and Process Guide, CELHIN PMO)
- Support initiatives that enable integration activities
 - Transportation projects (non-urgent and emergency services)
 - eHealth initiatives
 - Work with MOHLTC on new funding sources and existing funding allocations

Legend of Short Forms and Acronyms

B2B	CELHIN Board to HSP Boards
CECCAC	Central East Community Care Access Centre
CELHIN	Central East Local Health Integration Network
CMH	Campbellford Memorial Hospital
CSP	Clinical Services Planning
CUPE	Canadian Union of Public Employees
EMS	Emergency Medical Services (Municipal)
FLSC	CELHIN French Language Speaking Collaborative
HSP	Health Services Provider
LHC- O	Lakeridge Health Corporation – Oshawa Site
LHC - B	Lakeridge Health Corporation – Bowmanville Site
LHC - PP	Lakeridge Health Corporation – Port Perry Site
LHC - W	Lakeridge Health Corporation – Whitby Site
NHH	Northumberland Hills Hospital
OMA	Ontario Medical Association
ONA	Ontario Nurses Association
OPSEU	Ontario Public Services Employees Union

PCWG	CELHIN Primary Care Working Group
PRHC	Peterborough Regional Health Centre
RMH	Ross Memorial Hospital
RVHS – C	Rouge Valley Health System – Centenary Site
RVHS - AP	Rouge. Valley Health System – Ajax Pickering Site
SEIU	Service Employees International Union
TSH - Gen	The Scarborough Hospital General Site
TSG - Grace	The Scarborough Hospital Grace Site
WMHC	Whitby Mental Health Centre

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Welcome Questions? Comments? Feedback?

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