

Board Meeting Summary

Highlights from the Tuesday, May 12, 2009 Meeting

LHIN Collaborative (LHINC)

LHINC is a new provincial LHIN-led organization that is being formed to strengthen relationships between and among health service providers, associations and the LHINs, and to support system alignment. Active recruitment of the LHINC Leader and Council is taking place. The Council will include members of LHIN management and provincial associations within the LHIN mandate, as well as representation from public health and primary care.

Share Your Story, Shape Your Care

The summary report of the Share Your Story, Shape Your Care community engagement initiative is going to be released to the public and media in late May. Over 800 people participated online and by submitting paper copies, which is a great response. The information gathered through the project will be used to inform the North West LHIN's second *Integrated Health Services Plan* (IHSP), which will set the priorities for the health system in Northwestern Ontario from 2010-2013. Electronic and paper copies of the summary report will be distributed to stakeholders and participants, and will be posted on the LHIN website along with the full report.

2010-2013 Integrated Health Services Plan (IHSP) update

A draft of the North West LHIN's second IHSP is to be ready in late summer/early fall. The draft will be shared and discussed with stakeholders in the region for feedback before it is finalized.

Emergency Department/Alternate Level of Care (ED/ALC) Strategy

An update was given on the ED/ALC Strategy (emergency department demand; ED, wait times and improving bed utilization in the hospitals) across the North West LHIN. ED/ALC issue is a provincial priority and the North West LHIN has significant resources dedicated (time and funding), to address this issue.

Among the findings:

- Community hospitals in the LHIN have a higher number of visits, but more of the cases are for lower acuity health problems (those that could be dealt with in the community if services were available e.g. walk-in clinics).
- Smaller community hospitals provide primary care services
- Thunder Bay Regional Health Sciences Centre (TBRHSC) has the highest volume of ED visits in our region
- ED wait times for non-admitted patients fall within the expected standard time of ≤ 8 hours

- ED wait times for admitted patients is an area for improvement (e.g. The goal is to move admitted patients from the ED into a hospital bed in less than 8 hours)..
- Alternate Level of Care (ALC) days in acute care is a factor that contributes to longer waits in ED (access to an inpatient bed)
- TBRHSC had the highest percentage of ALC days in the NW LHIN
- The wait time to placement in long-term care is the highest in the province and the NW LHIN has a higher number of younger patients under 75 on the current long-term care waitlist
- The initial focus of the ED/ALC initiatives has been addressing the ALC pressures in Thunder Bay

Regional ED Study

The preliminary findings of the Regional Emergency Department Study were presented by the consultants, KPMG, to the Emergency Department Advisory Team and to a number of shareholders at a workshop to get their feedback for the final report. The study will provide some recommendations regarding existing emergency department services and possible future models to sustain ED services in the Northwest.

eHealth Update

By 2015 all Ontarians are to have an electronic health records (EHR). Many eHealth pilot projects will be taking place as the system prepares for the EHRs. The North West LHIN has refreshed its eHealth tactical plan to position itself to be ready to get involved early and reap the eHealth benefits earlier for our region. The North West LHIN is one of five LHINs that are early adopters of the Diabetes Strategy. We are working with the Ministry of Health and Long-Term Care on implementing the Diabetes Registry.

Performance Measurement Wait Times

According to results from the 4th quarter (January – March 2009), the North West LHIN has met Ministry-LHIN Accountability Agreement (MLAA) targets for cancer surgery, cataract surgery and knee replacement. CT scan wait times are very close to the MLAA target. The LHIN is outside of the MLAA target but within the performance corridor for hip replacement surgery. With respect to MRI wait times, the report shows that the LHIN is outperforming the provincial average, but is above the provincial target.

For system integration indicators, the results from the 2nd quarter shows the LHIN had met the target for the rate of ED visits and the hospitalization rates for ambulatory sensitive conditions. The LHIN did not meet the target, but was within the performance corridor for acute myocardial infarctions. The LHIN was outside of the performance corridor with respect to Alternate Level of Care (ALC). North West LHIN monitoring indicates current ALC levels are lower than what was captured in the 2nd quarter report.

Wait Time Strategy

Dr. Alan Hudson, Ontario's Lead of Access to Services and Wait Times, is coming to Thunder Bay June 22nd and 23rd to speak to the North West LHIN Board and to stakeholders, physicians and front-line hospital staff in the region about Emergency Department Wait Times and Alternate Level of Care, and how the North West LHIN is performing in relation to the rest of the province.

Voluntary Integration

The Board approved the voluntary integration of New Directions Counselling Centre in Kenora to the Canadian Mental Health Association (CMHA). The counselling centre will now operate as the Kenora Branch of the CMHA.

Chair's Report

- The last North West LHIN Board's Governance-to-Governance session was held May 11th in Terrace Bay. A summary of the sessions is to be prepared for the Board and participants of the sessions by tng.
- The provincial government is establishing a Rural and Northern Health Care panel. The LHIN will be monitoring the work of the panel. No LHIN reps will be on the panel.
- The Board has submitted its recommendation for two candidates to fill the vacancies on the North West LHIN Board. Further advertisements will be placed within the Kenora District relating to an additional board member vacancy.
- The Chair continues discussions with various health service provider Boards and Chairs and will be presenting at the upcoming Rainy River District Municipal Association meeting on May 20, 2009.
- The MOHLTC is finalizing details of the provincial Board Evaluation process for all LHIN Boards and Board Chairs. This process is to be complete by June 30, 2009 with reports being made directly to the Minister of Health and Long Term Care.

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