

WWLHIN*news*

WWLHIN BOARD HIGHLIGHTS – JANUARY MEETING

GUELPH, ON – The Waterloo Wellington Local Health Integration Network (WWLHIN) Board of Directors met on Wednesday, January 27, 2010. Following are highlights from that meeting.

Report from Closed Session

Kathy Durst, Chair, WWLHIN Board of Directors, reported that during the Closed Session of the meeting, the Board members discussed a legal matter.

Education Session

Dr. Linda Lee, Family Physician, The Centre for Family Medicine (CFFM), Kitchener, provided an update on the primary care memory clinic established in 2006. The clinic at CFFM was established to provide faster diagnosis and treatment of people with dementia, streamline referrals and offer a holistic approach to care and support.

Dr. George Heckman, Geriatric Lead, WWLHIN, informed the Board members that the clinic has led to improved outcomes for patients and reduced visits by these patients to local hospitals.

Lee developed an accredited training program for this model of care in 2008, in partnership with the Ontario College of Family Physicians and with funding from the WWLHIN and the Ministry of Health and Long-Term Care (MOHLTC). The five-day training program was kicked off in October 2008 with three family health teams (FHT) participating, including Upper Grand (Fergus) and New Vision (Kitchener), along with Langs Farm Village Community Health Centre (Cambridge). The next training program is scheduled for February 2010 with 3 FHTs participating, including Two Rivers (Cambridge) and Minto-Mapleton.

Chair Report

Durst indicated that presentations to the 20 municipal councils within the WWLHIN are underway. To date, five have been completed. She noted the agenda items focus on governance renewal, the Integrated Health Service Plan 2010 - 2013, and the Rural Health Care Review. This round of presentations will be completed by the end of March 2010.

CEO Report

Sandra Hanmer, CEO, WWLHIN, updated the Board on the development of the Hospital-Service Accountability Agreements (H-SAA). In consideration of the unprecedented economic environment currently facing the province, LHINs and hospitals, a one year extension of the current H-SAA agreement (2008 - 2010) has been agreed upon for the 2010 - 2011 fiscal year. Hanmer noted that hospitals and LHINs continue to work closely on planning scenarios based on 0%, 1% and 2% funding allocations.

She reported that the WWLHIN, the eight hospitals in Waterloo Wellington, and the Waterloo Wellington Community Care Access Centre (WWCCAC) have been meeting regularly and are working collaboratively through the hospital budget planning process to focus on minimizing impacts on service.

Hanmer informed the Board that the WWLHIN received stabilization funding increase for registered practical nurse (RPN) positions currently in long-term care homes.

Finance and Audit Committee Report

Don Ross, Chair, Finance and Audit Committee, reported that the Finance and Audit Committee reviewed the Audit Plan for 2010 and confirmed that the WWLHIN's share of funding for the provincial Community Care Information Management projects is \$340,230.

Governance Committee Report

Mary D'Alton, Chair, Governance Committee, indicated that with the appointment of two new Board members, the membership of the three Board standing committees was reviewed. The new committee membership for the Finance & Audit Committee, Governance Committee and the Nominations Committee was finalized.

Rural Health Care Review

In January 2009, a Rural Health Working Group was formed as a sub group of the WWLHIN's Clinical Optimization Steering Committee. The Working Group focus was to review the current health challenges faced by rural residents within the WWLHIN and identify strategies and opportunities to support the planning and delivery of sustainable health services and programs for those residents.

Dr. Chris Rowley, Chief of Staff at North Wellington Health Care Corporation (Palmerston District Hospital and Louise Marshall Hospital) Chaired the Rural Health Working Group. Membership included doctors and staff from local hospitals, long-term care homes, family health teams and other health service providers, along with community representatives.

Jim Whaley, Rural Health Consultant, worked with the group to develop the report and recommendations. The Working Group completed data analysis to gain an understanding of the health care issues in the local rural areas and received extensive feedback from local residents and health care providers through public information sessions and meetings.

Whaley presented the draft report to the WWLHIN Board, which includes nine recommendations.

The recommendations are:

- the WWLHIN endorse and use the proposed framework for rural health services developed by the Working Group, which includes the following four components: comprehensive primary health care, community supports and home-based care, hospital-based acute and emergency care, and integrated rural health care networks
- a community health care survey be conducted in the municipality of Southgate to determine unmet health needs and service gaps
- a detailed review of community support services be completed to ensure there is a needs-based distribution of these services for rural residents, with a specific focus on rural seniors

- the WWCCAC review its rural service delivery model to ensure there is needs-based access to CCAC professional services
- the WWLHIN, in consultation with urban hospitals and specialists, further define and designate regional programs based on existing best practice models and other criteria including their responsibility to serve rural areas within the WWLHIN
- develop protocols for specialty areas to support family physicians providing care in rural hospital emergency departments
- a component of the eHealth strategy for the WWLHIN focus on enhancing telemedicine and telehomecare services for rural residents
- the development of current and future building projects need to maximize opportunities for service integration / coordination between acute, primary, long term care and community health services
- the WWLHIN facilitate the establishment of a rural health network.

The WWLHIN Board endorsed the report and directed staff to implement the nine recommendations in the Rural Health Care Review Report. ★

In addition, the Board approved a recommendation by the WWLHIN staff that directs staff to work with Groves Memorial Hospital and North Wellington Health Care on the implementation of a comprehensive primary care model for services across the three sites.

Diagnostic Imaging Repository

Glenn Holder, Chief Information Officer, WWLHIN, informed the Board of Directors of a voluntary integration to create a central image and report repository between hospitals in the WWLHIN and the Hamilton Niagara Haldimand Brant LHIN.

The project will connect the existing Picture Archiving and Communication Systems (PACS) used by hospital diagnostic imaging departments, which will enable doctors and clinicians in different physical locations to access the same information simultaneously. The PACS system is a computer based program or network dedicated to the storage, retrieval, distribution and presentation of images from diagnostic equipment (x-rays, MRI, CT, etc.). Previously, the images were produced on film for doctors and radiologists to read and diagnose a patient's illness. These images, through the PACS system, are now stored on a computer program and can be downloaded onto discs.

Through this joint effort, hospitals in four LHINs, WW, Hamilton Niagara Haldimand Brant, Erie St. Clair and South West, will be connected. This project also supports the provincial direction to connect all Ontario hospitals by the end of 2011.

Holder noted that the implementation of a shared diagnostic imaging repository will enhance patient care in Waterloo Wellington.

The WWLHIN Board of Directors supported the voluntary integrations proposed by the hospitals.

QUICK FACTS

The Waterloo Wellington Local Health Integration Network is responsible for planning, integrating, coordinating and providing funding to 79 health service providers including hospitals, long-term care homes, community support services, community health centres, the Community Care Access Centre and community mental health and addictions agencies in Waterloo Region, Wellington County and South Grey. The WWLHIN operates an annual health care budget of close to \$858 million.

LEARN MORE

The full reports, briefing notes, and presentations related to the Board agenda items are posted to the WWLHIN website at www.wwlhin.on.ca, click on About Our LHIN / Board of Directors – Meeting Minutes / January 27.

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★ - The presentation on the Rural Health Care Review at the WWLHIN Board meeting is available for viewing on the WWLHIN website at www.wwlhin.on.ca, click on Rural Health Care Review, Final Report.

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