

WWLHIN*news*

WWLHIN BOARD HIGHLIGHTS – FEBRUARY MEETING

GUELPH, ON – The Waterloo Wellington Local Health Integration Network (WWLHIN) Board of Directors met on Thursday, February 25, 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 legal and financial matters.

Education Session

Glenn Holder, Chief Information Officer, WWLHIN provided an update on HEALTHeCONNECTIONS - Chronic Disease Management (CDM) program. The CDM program is focused on diabetes care and specifically on enhancing the patient's role in managing their condition through the use of an internet-based patient portal. Currently eight Family Health Teams in Waterloo Wellington are participating in the project, with 907 patients enrolled.

The CDM program brings together three information technology components, which enables information sharing between patients and their health care team. First, a patient portal, mydoctor.ca, allows registered patients to input their blood glucose readings and enables authorized health care providers to monitor patient progress and communicate more effectively with them. Secondly, the Clinical Management System (CMS) is the Electronic Medical Record (EMR) already in use by the Family Health Teams. For patients who are participating in the CDM project, a summary of their record is uploaded to mydoctor.ca and shared with the patient and the rest of the care team. The third component is ClinicalConnect, a provider portal service that queries information in real time from participating hospital systems and creates a unified patient record view. Family Health Teams are able to download patient information which is then incorporated into their EMR.

Guest speakers included Mr. Wayne Michalski, a patient who talked of the benefits of using mydoctor.ca. Ms. Marg Stevens of the North Wellington Hospital Corporation explained how the program is used by the health teams, and Ross Kirkconnell, Executive Director of the Guelph Family Health Team spoke of how the program can be used by physicians.

CEO Report

Sandra Hanmer, CEO, WWLHIN, reported on Cambridge Memorial Hospital's (CMH) capital expansion plans that were discussed at the CMH board meeting the previous evening. Hanmer reported that the hospital had the project architect at the meeting to present updated sketches that align with the hospital's service plan. She indicated that the WWLHIN is working closely with CMH to share a revised facilities development plan with the Ministry by early Spring.

Hanmer also reported on Freedom of Information requests received by the WWLHIN and other LHINs around sole-sourced contracts. While the WWLHIN did enter into sole-sourced contracts while completing its staff complement, a review has been done of WWLHIN's records which indicate that the WWLHIN meets all criteria.

Nominating Committee Report

Glenna Heggie, Chair of the Nominating Committee reported that in June 2010 there will be two vacancies on the board. As of Monday, March 1, advertisements for new members will be appearing in local papers, the WWLHIN website and the Public Appointment Secretariat. These advertisements will be available in both English and French.

Aging at Home – Year 3 Funding

Bruce Lauckner, Senior Director, System Design and Transformation, WWLHIN spoke about Aging at Home. In August, 2007, the WWLHIN was allocated \$37 million from the Ministry of Health and Long-Term Care's (MOHLTC) Aging At Home provincial initiative. Province wide, \$596 million, over three years, is being invested in the initiative. The strategy aims to support seniors in their desire to live independently, for as long as possible, in a home of their choice.

In the first year (2008 – 2009), the WWLHIN invested \$4.8 million in 20 initiatives and \$11.9million for 8 initiatives in year two (2009 -2010).

The Aging at Home strategy for Year 3 has shifted to align with two of the WWLHIN and MOHLTC priorities - improving access to emergency department (ED) care and decreasing alternate level of care (ALC) days. ALC refers to those people whose active treatment phase in hospital is complete and their health care professional has recommended a more appropriate care setting such as long-term care. All initiatives funded for Year 3 must demonstrate a direct impact on these two priorities.

In 2010 – 2011, there is \$20.9 million in Aging at Home funding planned for the WWLHIN. Of this amount, \$14.5 million has already been allocated by the board of directors for specific programs. In part due to the economic climate, the MOHLTC has reduced every LHINs' Year 3 Aging at Home funding by 25%, which represents a reduction of \$2.2 million for the WWLHIN. The funding amount uncommitted for Year 3 Aging at Home funding is \$4.1 million.

One component of the WWLHIN's overall strategy to address volume pressures in hospital EDs, and the high number of ALC patients in hospital beds, is transition beds. Transition beds are for ALC patients who are in hospital beds waiting for placement and care in more appropriate settings.

During the 2008 - 2009 fiscal year (April 1 – March 31), the WWLHIN provided funding to operate 40 transition beds across the WWLHIN. In 2009 – 2010, the WWLHIN increased the number of transition beds to 67, as well as implemented six palliative supportive care beds at St. Joseph's Health Centre, Guelph, while Hospice Wellington is building its new facility to provide inpatient beds.

This program is only one of a number of initiatives developed by the WWLHIN and local health service providers to decrease the per cent of ALC days by the end of 2011 to 9.46%, which is the provincial target. As of November 2009, the per cent of ALC days in the WWLHIN is 17%, which is a 10% reduction from a high of 27% a year earlier.

The transition bed program has been planned as a bridge strategy until the 332 new long-term care beds open in the WWLHIN by the end of 2012. Ninety-six beds will open in late fall 2010 at St. Joseph's Health Centre, Guelph, another 96 at Village of Riverside Glen (Oakwood Retirement Communities), Guelph in March 2011, a further 96 at Hilltop Manor (PeopleCare Inc.), Cambridge and 44 at Pinehaven Nursing Home in Waterloo by the end of 2012.

The WWLHIN Board of Directors approved Aging at Home, Year 3 funding to Pinehaven Nursing Home for \$36,500 in base funding for one additional bed as part of the overall 44 new bed complement. The board also approved \$4,104,348 in one-time funding from the Aging at Home program and \$2,985,705 in reallocations for the transition bed program for a total investment of \$7,090,053.

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 / February 25.

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