

### Report of the President & CEO to the Board of Directors

**Date:** March 2020



# Strategic Direction - Strengthen the culture of patient safety and quality care

### <u>Changes to Home and Community Care Services (a.k.a. CCAC services)</u> <u>Coming – Eventually transferring to Ontario Health Teams (OHT)</u>

Ontario is changing home and community care services to enable the introduction of integrated and innovative models of care.

Page 1 of 13



The Ontario government has stated that since its initial introduction, the *Home Care and Community Services Act*, 1994 and the delivery model it supports have not kept pace with a number of changing dynamics, including:

- An aging population;
- Changing client expectations on the different types of care;
- Increasing opportunities for care at home; and
- Innovation in technology and delivery options.

At the same time, the government stated the act has created long-standing barriers that have restricted innovation in the delivery of home and community care, including:

- **Rigid care coordination:** Decisions about patient care are often made away from frontline care;
- **Siloed care:** Patients often interact with home care separately from primary and hospital care, which often includes multiple assessments leading to delays in care; and
- **Restrictive care plans:** Patients have care plans with a set number of hours or visits with service maximums that can curtail care.

In response, Ontario is introducing the *Connecting People to Home and Community Care Act* and posting proposed new regulations under the *Connecting Care Act*, 2019 to bring an outdated system into the 21<sup>st</sup> century.

#### **Current Framework**

Requires all care coordination functions (intake, assessing and determining eligibility, care planning, service

### **Proposed Framework**

Adaptable care coordination functions that can be embedded in frontline care within Ontario Health Teams, promoting integration between sectors,





#### **Current Framework**

allocation and case management) to be performed by an approved agency.

Places restrictions on changing care plans without formal re-assessments, limiting the ability to make changes to care plans that meet patient needs.

Reinforces a per hour/visit based approach to delivery of care.

Places restrictions on amount of services, reducing capacity to care for certain clients.

Provides limited clarity/oversight to enable new settings and methods of delivering care.

At the same time, the new framework will maintain many elements, including the following:

#### **Proposed Framework**

reducing duplication and ensuring care is more responsive to patient needs.

Flexibility in care planning requirements to support more responsive care delivery based on patient outcomes.

More flexibility for innovative models of care by supporting care to be provided virtually and removing the emphasis on visit-based care.

No service maximums, enabling provision of care to be based on identified needs and resources.

An oversight model for residential congregate services, which would support patients with needs too high to be met at home - but do not require the intensive level of care provided by a hospital or long-term care home.





- Definition of home and community care services and eligibility criteria.
- Ability to fund Indigenous organizations directly through the *Ministry of Health and Long-Term Care Act*. This will maintain the nation to nation relationship between the parties.
- Ability for approved organizations to deliver home care indirectly through contracts.
- Provisions regarding funding clients and families for self-directed care.
- Restrictions on client co-payments for services, to preserve the existing approach where only community services can have co-payments.
- Restrictions limiting the delivery of community services to non-profit corporations.
- Requirements for a complaints process.
- Right to appeal certain decisions to the Health Services Appeal and Review Board.
- Inclusion of home care in the jurisdiction of the Patient Ombudsman.
- The Bill of Rights for home and community care would continue in regulation, updated to reflect the realities of modern home and community care.

### If passed, the new legislation will:

- Make it easier for people to access home and community care in hospital, primary care or community settings. Hospitals and primary care settings and others will be able to arrange home care directly for patients, instead of referring people to a separate home care organization. Doing so will reduce administration and transitions for patients.
- Help people connect with their care providers through secure video conferencing and remote monitoring devices. People with chronic conditions will be monitored at home, with a nurse checking in as needed.



Page 4 of 13

- Nurses or therapists can use video conferencing to work with a personal support worker in the home to provide more specialized care.
- **Provide more choice** for people with high care needs to get care in new community settings. People will be discharged from hospital into a transitional care setting to gain strength and functionality to return home.
- **Keep people healthier at home** by empowering care teams to work together. Enabling frontline care providers to make more decisions about care, integrating home care into primary care and acute care, and breaking barriers to access to information will create teams that work together to support patients.

### **About Home and Community Care Support Services**

To ensure the ongoing stability of services while home and community care transitions into Ontario Health Teams, Local Health Integration Networks (LHINs) are being refocused into interim and transitional organizations with a singular mandate of delivering home and community care, as well as long-term care home placement. To reflect this focused mandate, they are being rebranded as Home and Community Care Support Services.

The province expects the transition to Home and Community Care Support Services to occur on April 1, 2020 and exist for the next few years as home and community care transitions into Ontario Health Teams and other points of care. It is anticipated that the non-home and community care functions of the LHINs will transfer to Ontario Health in the near future.

During the transition, patients and caregivers will continue to access home and community care services in the same way and use the same contacts. To help promote continued patient familiarity with these services, Home and Community Care Support Services will maintain the same regional identifiers as existing LHINs (e.g., Erie St. Clair, Central, Champlain and North Simcoe Muskoka). Each of the Home and Community Care Support Services organizations will be



Page 5 of 13

governed by a common set of cross-appointed board members with a streamlined leadership team.

### **COVID-19**

At the time of writing this report the number of COVID-19 cases in Canada is approximately 10 and 4 of them in Ontario. A very good website that provides updates on what is happening across Ontario, Canada and the world with respect to the COVID-19 can be found at:

https://www.ontario.ca/page/2019-novel-coronavirus-2019-ncov

A "real-time" map on the current status of the virus can be found at:

https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd 40299423467b48e9ecf6

A good website on some of the myths of COVID-19 can be found at

https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters

There are some that indicate the COVID19 will slow as warmer weather approaches. However, the concern is that it will reemerge in fall 2020. Some are actively working on a possible vaccine that may be available by the time it reemerges.

https://asia.nikkei.com/Spotlight/Caixin/Will-warm-weather-kill-new-coronavirus-Scientists-not-sure

Page 6 of 13



The Windsor Regional Hospital (WRH) team and its partners are all working together to be individually and collectively ready to address any issues presented related to the 2019 Novel Coronavirus.

## Strategic Direction – Champion accountability and transparency

#### Refresh Strategic Plan

Following Accreditation, we have started a refresh of our last strategic plan for the period 2021-2024.

Strategic planning is an organization's process of defining its strategy, or direction, and making decisions on allocating its resources to pursue this strategy.

Part of the Strategic Planning process is to examine our current Vision, Mission and Values. As all of us know, our Vision of providing "Outstanding Care...No Exceptions!" is what we live and breathe on a daily basis in everything we do. A **Vision** is an aspirational description of what an organization would like to achieve or accomplish in the mid-term or long-term future. It is intended to serve as a clear guide for choosing current and future courses of action.

Windsor Regional Hospital's Mission – "Deliver an Outstanding Patient Care experience driven by a passionate commitment to excellence" is meant to be accomplished daily. A **Mission** is a written declaration of an organization's core purpose and focus that normally remains unchanged over time. Properly crafted mission statements (1) serve as filters to separate what is important from what is not, (2) clearly state which markets will be served and how, and (3) communicate

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ACCREDITATION AGREMENT CANADA

Page 7 of 13

a sense of intended direction to the entire organization. A mission is different from a vision in that the former is the cause and the latter is the effect; a mission is something to be accomplished whereas a vision is something to be pursued for that accomplishment.

Our Corporate Values centre around an acronym CARE: C=Compassionate, A=Accountable, R=Respectful and E=Exceptional. Values are important and are lasting beliefs or ideals shared by a team about what is good or bad and desirable or undesirable. **Values** have major influence on a person's behaviour and attitude and serve as broad guidelines in all situations.

As part of the Windsor Regional Hospital Strategic Planning process, we did not only have a cross section of employees, volunteers and professional staff coming together to develop the plan, we also interacted with hundreds of patients and community members on what was important to them as to what should be Windsor Regional Hospital's direction and what decisions it should make on allocating its resources to pursue this strategy.

Many organizations stop here. However, the question is: 'How do we make sure what we do on a daily basis drives the achievement of our Vision?' As a result, we need to OPERATIONALIZE our Strategic Directions and Initiatives. This is NOT a make-work project. Many organizations are busy but do not have focus. The bottom line is if you are doing something that does not advance our Strategic Plan, you should stop doing it. This operationalization of the Strategic Plan creates focus on our day-to-day activities.

At the links below, are program specific Objectives we are all working on to operationalize our Strategic Plan. Please take some time to flip through the one for your Program and also spend time looking at others. You will notice we are all "rowing in the same direction". This is impressive. You will also see hard copies of these documents in your department.

https://www.wrh.on.ca/StrategicObjectives



Page 8 of 13

Stay tuned for more information.

# Strategic Direction - Develop a sustainable corporate financial strategy

### Thanks to Windsor/Essex supporting 3D Mammography

Earlier this fall, the community joined together with local Shoppers Drug Marts for one of the most successful fundraising efforts to support women's health initiatives here in Windsor/Essex. Donations to the 2019 LOVE YOU by Shoppers Drug Mart<sup>TM</sup> fall fundraising program to grow women's health surpassed \$64,505 to support the Windsor Regional Hospital Foundation's initiative to purchase a new 3D Digital Mammography Machine for their Breast Health Centre.



Foundation purchase a 3D Digital Mammography Machine for their Breast Health Centre. The Shoppers





"2019 LOVE YOU" campaign is a national effort yet locally based with patients, customers and employees donating directly to organizations in their community. Associates from local Shoppers stores and representatives from the WRHF are shown during a ceremonial cheque presentation at the Devonshire Mall on Wednesday, February 12, 2020. DAN JANISSE / WINDSOR STAR

### Strategic Direction - Create a vibrant workplace

### **Thumbs Up For The MCC's Cultural Competency Training**

Living in one of the most diverse communities in Canada has its benefits and challenges. In healthcare, cultural awareness is the key to identifying and eliminating barriers.



In February, about 50 WRH team members including everyone from volunteers to physicians joined the Multicultural Council of Windsor and Essex County (MCC) to learn more about communicating across cultures.

The workshop series focused on recognizing and understanding cultural differences and thinking of how we communicate with a diverse patient population. Thank you to MCC Director and Windsor City Councillor Fred Francis who led the important conversation.

Page 10 of 13



## Strategic Direction - Strategically engage with external partners

### **Our Teamwork Being Recognized**

This week, two Ontario hospitals joined members of the WRH Patient flow team to learn about WRH patient flow processes and improvements that have been made over the past few years. Many other hospitals in Ontario struggle with the same challenges Windsor Regional Hospital faced prior to our patient flow improvements.

The work of the Patient Flow teams / frontline staff is not only helping WRH patients but is also catching the eye of other organizations that are trying to improve their patient experience. Prior to our flow improvements, approximately 24 patients would be admitted but waiting at 7am in our emergency departments (Admit no Beds). Through the exceptional work of the team, WRH has been able to reduce this by 83%.

Well done WRH Team!

Page 11 of 13



### Strategic Direction - Continue the pursuit of new state—of-the-art acute care facilities

### **Donation to Urgent Care/Satellite ER Department**

On Saturday, February 22<sup>nd</sup>, representatives from Windsor Regional Hospital, the Windsor Regional Hospital Foundation, and the Ahmadiyya Muslim Jama'at announced the successful fundraising results of the 2019 Run for Windsor event, as well as the date of their 4<sup>th</sup> annual run.



Nasir Ahmed, left, National vice-president of the Ahmadiyya Elders Association, shakes hands with John Comisso, President of the Windsor Regional Hospital Foundation, as he receives a cheque for \$15,000 from the Ahmadiyya Muslim Jama'at's Run for Windsor on Feb. 22, 2020. DAX MELMER / WINDSOR STAR

Page 12 of 13



Run for Windsor, hosted by the Ahmadiyya Muslim Jama'at, annually raises vital funds for a future Urgent Care Centre for Windsor Regional Hospital.

Page 13 of 13

