

Report of the President & CEO to the Board of Directors

Date: May 2023

Strategic Direction - Strengthen the processes that drive a culture of patient safety and quality care

Arbitrator Upholds Hospital Mandatory COVID-19 Vaccination Policy as Reasonable

Arbitrator Robert Herman issued his decision in Lakeridge Health and CUPE, Local 6364. This centrally funded arbitration addresses the reasonableness of the hospital's mandatory vaccination policy for COVID-19, including the policy's consequence of termination of employment for failure to comply with its vaccination requirements. Ultimately, the arbitrator found that the hospital's policy was reasonable and further upheld the hospital's decision to terminate employees that did not comply with this policy.

While there have been several prior decisions addressing the reasonableness of employer policies requiring employees to be vaccinated against COVID-19, the Lakeridge decision marks the first decision addressing the policy in a hospital setting in Ontario.

Over the course of hearing this matter, the union amended its position. Initially the union alleged that the hospital's policy was unreasonable in placing unvaccinated employees on unpaid leaves of absence in October 2021 and unreasonable in subsequently terminating the employment of employees who remained unvaccinated. In its final submissions, the union took the position that the hospital could reasonably place unvaccinated employees on unpaid leaves of absence until June 2022, at which point the hospital ought to have returned those employees to active employment.

Arbitrator Herman dismissed the union's grievances, finding the hospital's policy to be reasonable in all respects, save for the timing of the terminations. In doing so, the arbitrator upheld the hospital's decision to terminate the employment of unvaccinated employees on culpable grounds for failure to adhere to the hospital's otherwise reasonable policy.



Strategic Direction – Uphold the principles of accountability and transparency

Accreditation 2023 Survey – April Report

- Accreditation Canada surveyors will be coming to WRH for the onsite survey November 26-December 1, 2023.

PHASES		Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	Jan 23	Feb 23	Mar 23	Apr 23	May 23	Jun 23	Jul 23	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23
Phase 1 Assessment Nov. - Mar.	Create Teams	✓			✓													
	Complete Surveys				✓													
	Conduct Mock Tracers						In progress											
	Assess ROPs						In progress											
	Assess Standards						In progress											
Phase 2 Preparation Apr.- Nov.	Create Action Plans									In progress								
	Complete Action Plans									In progress								
	Prepare Our Evidence									In progress								
	Prepare Education Plan									Not started								
	Educate Staff														Not started			
	Prepare for On-site														Not started			
Phase 3 On-site Survey Nov. 26 - Dec 1	On-site Survey - be assessed by Accreditation Canada surveyors																	

➤ PHASE 1 (Assessment) – 100% Complete

➤ PHASE 2 (Preparation) – In Progress

- In Phase 2, teams create action plans to address gaps/areas for improvement found in self-assessments.
- So far, all Required Organizational Practices (ROPs) teams have created Action Plans. Some ROP teams have already completed their Action Plans. ROPs are the “deal-breaker” standards (carrying the highest weighted score).
- Board members completed their Action Plans for Governance Standards & Governance survey results.
- **Next Steps:**
 - Board members should be working on the Actions Plans they created.
 - Standard teams will finish creating their Action Plans by May 12.



- The Survey Team is creating an Action Plan based on Survey results for the employee and professional staff surveys.
 - Corporate mock tracer training for all Leadership staff takes place April 24. After training, standards to focus on will be developed by Team Leads. And then all managers (OM/CPM/CPC) will conduct 1 mock tracer each. Why Training and conducting Mock Tracers?
 - a. To assess and validate our 2023 self-assessments (especially at frontline level)
 - b. To build capacity for the Tracer process as we move towards a continuous Accreditation Model, &
 - c. To help all staff become more comfortable and familiar with the Tracer & Mock Tracer Process
 - All teams are compiling evidence to be used for education in the fall for frontline staff and for uploading to Accreditation Canada for surveyors to review prior to assessing us on-site.
- ◇ **Want to know more?** Go to your Board Accreditation folder online or contact Sherri Franz (519-991-1856).

Strategic Direction - Maintain a responsive and sustainable corporate financial strategy

ONA Bill 124 Re-Opener arbitration decisions announced

A couple weeks ago the Stout Board of Arbitration released a decision addressing the reopener on the additional monetary outcomes for 2020/21 and 2021/22 for the Ontario Nurses' Association (ONA). The award contains the following additional monetary adjustments:

Wages

- April 1, 2020 - additional 0.75%
- April 1, 2021 – additional 1.00%

The Stout Board also awarded amendments to night and weekend premiums and certain health and welfare benefits.

The impact of the amendments to night and weekend premiums are as follows:

Night Premium

Effective April 1, 2021: \$2.98/hour

Weekend Premium

Effective April 1, 2021: \$2.90/hour

Effective April 1, 2022: \$3.14/hour



The impact of the amendments to health and welfare benefits are as follows:

Physiotherapy, Chiropractic, and Massage Therapy

Effective April 1, 2023: \$450/annually

Mental Health Services by Psychologist, Registered Psychotherapist, or Social Worker (MSW)

Effective April 1, 2023: no annual limit on coverage

Last week the Gedalof Board of Arbitration released a decision addressing the re-opener on the additional monetary outcomes for 2022/23 for the Ontario Nurses' Association (ONA). The award contains the following monetary adjustments:

Wages

- April 1, 2022 – additional 2.00%
- April 1, 2022 – increase 8 Year Rate to match 25 Year Rate and delete 25 Year Step

The release of this award concludes the third and final year covered by monetary re-openers awarded in response to compensation limits imposed by Bill 124.

Strategic Direction - Create a dynamic workplace culture that establishes WRH as an employer of choice

WRH Workplace Wellness Program

The Workplace Wellness Program continues to be very popular with staff and plans are underway for some wonderful activities to welcome Spring.

In April, 117 staff and their family members attended the Waterpark Swim at Adventure Bay Water Park. For the “foodies” on staff, 52 people attended the Cheese and Charcuterie Workshop and 40 people learned how to make Bolognese sauce. There were also sleep meditation workshops and lessons on decluttering and organizing your home.

May activities include Ojibway Park interpretive tour, guided spring birding hike, intro to lawn bowling, and personal pizza making and virtual tour of Italy.

The June calendar will be posted shortly.

To access the Workplace Wellness Website: User Name: Wellness Password: Healthy2022



Strategic Direction - Redefine our collaboration with external partners to build a better healthcare ecosystem

Nurse and Police Team pilot program seeks to help reduce substance abuse

The Windsor Police Service and Windsor Regional Hospital are pleased to announce the launch of a new pilot program to help individuals struggling with substance abuse and addiction.

The **Nurse and Police Team (NPT)** will pair nursing professionals with frontline police officers to more effectively respond to non-emergency, substance abuse-related incidents. The officer-nurse teams will work together to provide proactive, holistic and non-judgmental care to individuals struggling with addiction, while also promoting community safety and wellbeing. The goal is to steer those with substance abuse and addiction issues away from the criminal justice system and hospital emergency rooms and towards more meaningful treatment options, resources and other social services.

The NPT pilot program will officially launch on May 12, 2023, with officer-nurse teams working on rotation on Fridays, Saturdays and Sundays between 11 a.m. and 11 p.m. The project will run for the next three months, at which time it will be evaluated for further continuation.

Strategic Direction - Continue the pursuit of NEW state-of-the-art acute care facilities

Project Update: The New Windsor/Essex Acute Care Hospital

The New Windsor/Essex Acute Care Hospital project has achieved a major planning milestone with the submission of its Stage 1.3 (formerly Stage 2) plan to the Ministry of Health.

The submission is the result of extensive collaboration with many partners within the hospital, the community and the province. It includes a functional program, a set of block diagrams, a campus plan and an updated cost estimate.

Expert hospital planners, in consultation with 40 User Groups representing all hospital programs and services, developed the submission over the past 16 months. The User Groups - made up of hospital leadership, staff, professional staff, volunteers and patient and community representatives – included members of the hospital's Patient and Family Advisory Committee, the Chief of the Essex-Windsor Emergency Medical Services and representatives from all First Nation communities represented by the London District Chiefs Council.



The submission is based on current and future project volumes and incorporates the [extensive community feedback received](#) throughout this planning stage.

Highlights of the Stage 1.3 submission include:

- capacity for 100% private rooms,
- shelled-in space for future growth,
- a simulation training centre and auditorium,
- Indigenous healing space,
- cafeteria with access to outdoor seating, and
- links to city-planned trails and bus service

The Ministry of Health Capital Branch will now review the submission, provide feedback and work with the hospital to ensure the final approved plan aligns with provincial expectations and standards for modern and efficient hospital care. We look forward to working with the Ministry of Health, responding quickly to any questions and addressing any challenges to proceed to the next stage of planning.

In the meantime, work will continue in other areas of planning in order to meet the expedited timeline outlined in Infrastructure Ontario's November 2022 Market Update for "shovels in the ground" for the project in 2026.

Designing the future Ouellette Campus

One key area of focus now is the development of a Stage 1.3 submission for the Ouellette Campus, where Urgent Care and other Ambulatory Services will be offered after the new hospital opens.

Windsor Regional Hospital has recruited Parkin Architects Ltd. to work on a design that meets the government's request to "maximize the use of the Ouellette Campus" going forward. While parts of the campus were updated in 2001, much of the aging facility is more than 6 decades old. Significant renovations will be required to operate at the site as none of the space meets modern care standards.

Parkin Principal Mark Michasiw is approaching the project with an intimate knowledge of the challenges and opportunities that exist, having spent nearly two decades working on capital projects at the Ouellette Campus.

The Parkin team will work with related User Groups to develop safe and viable options to allow the hospital to continue offering services at the downtown location well into the future.



Developing a state-of-the-art framework for the future

The process to recruit an Information, Communication, Automation and Technology (ICAT) consultant is nearing completion. The successful ICAT team is expected to start work on the project by the end of May. The goal of this work is to establish a vision for the use of technology in the new hospital and a tactical strategy to ensure the building design supports a state-of-the-art hospital using advanced technology wherever possible to enhance the patient, staff and visitor experience in the new hospital.

New VP of Redevelopment Joins the Project Team

We are pleased to welcome Brandon Bailey, Vice President of Redevelopment, to the team. Bailey brings ten years of experience in hospital construction, design and engineering with him to the role and is excited to lead the team through the development of a new hospital and redevelopment at the Ouellette Campus.

After nearly a decade working with Stantec, the Planning Design and Conformance (PDC) team of architects and engineers involved in planning the New Windsor/Essex Acute Care Hospital, Bailey is already familiar with the project and many of the key players.

“A hospital is a very complex project that requires many specialties and a team approach,” says Bailey. “For the past decade, I have been working with all the various consultants and experts in this field, and I look forward to building upon those relationships as we work together to build this hospital.”

In his previous role, Bailey was part of the consultant leadership team working on some of the largest and most recent hospital projects in Ontario including the new South Niagara Hospital, Toronto Sick Kids capital project and Trillium Healthcare’s Mississauga and Queensway sites. Now, after accepting this position and relocating from the GTA, he is looking forward to getting to know the region, and diving in to the project.

Bailey says he is also aware of just how much the leadership team values and incorporates community input into the project. He says this aligns with his own values of inclusion and transparency and he looks forward to hearing from all hospital users throughout the planning process.

Bailey’s initial to-do-list includes the development of a Stage 1.3 submission for the Ouellette Campus, supporting the development of an ICAT strategy for the new build and engaging with city and county officials to ensure all requirements are met for development on the site.

As the volume and magnitude of work and decision making for the project increases, additional supports will be required to move the project forward, guide progress and quickly address challenges that arise. Bailey is also working with hospital leadership and the Project Management Office to assess current resources and identify gaps. A recommended future team structure and governance model for the project will be presented to the hospital Board of Directors in June.



A “Custom Built” Hospital Designed With And For The Community

When it comes to the patient experience in a new hospital – who better to ask than those who have been there. Throughout the development of the Stage 1.3 submission, 34 patient and community representatives have served as members of the User Groups, working closely with hospital leadership, staff, professional staff and expert consultants to ensure plans for the new hospital are patient-centred, innovative and responsive to the needs of the community. Their commitment to this complex process, willingness to ask questions and relentless advocacy for patients and families in the new hospital is commendable and it is evident throughout the Stage 1.3 submission.

Diane Marley, Patient Rep, Cancer Centre

“I enjoyed watching the whole thing come together and seeing improvements made over time, based on feedback given.”

Melissa Patrick, Patient Rep. Paediatric Care Unit

“Being a part of this process gives me a new appreciation for how this hospital will be custom built to suit the needs of patients in this region. It is not a one-size-fits-all plan and what the architects are designing is truly based on community, user and staff input.”

Eric Lamarre, Patient Rep, Neonatal Intensive Care Unit

“If we could help make it easier for one family we did our job and I think we did. We could see the influence we had when we shared our ideas. The consultants working on the project truly took the community’s feedback to heart and incorporated it into the plans”

Estimated Project Timeline

