



## CEO Report to the Board

**TO:** Board of Directors  
**FROM:** Lance Thurston, President and CEO  
**DATE:** October 25, 2017  
**SUBJECT:** General Issues Update

### ORIGIN/PURPOSE

This report is for information.

### Mental Health and Addiction Capacity Planning

A Schedule 1 facility is a public hospital or other health facility designated under the Mental Health Act to provide observation, care and treatment for patients experiencing mental health disorders. The Owen Sound Regional Hospital is one of six Schedule 1 facilities in the South West LHIN region. It serves the Grey Bruce sub-region. In addition, St. Joseph's Health Care operates a tertiary level mental health facility at its Parkwood campus in London.

GBHS' acute and outpatient mental health services are resourced to serve an adult population. GBHS maintains 7 adult psychiatric intensive care beds (known as the PICU), 16 general adult acute beds, and 16 psycho-geriatric beds at the Owen Sound Regional Hospital. There are no designated child and adolescent beds.

The lack of child and adolescent acute mental health services and severely limited access to outpatient psychiatric services have been long-standing gaps in the service offerings in Grey Bruce. In spite of this shortcoming, GBHS has strived to ensure the safety of child and adolescent patients presenting to the hospital while staff and physicians work with peer organizations to ensure the patients are transferred in a timely manner to appropriate care settings, typically London. This process is challenging due to the distance involved between Grey Bruce and London, and because London hospitals are also reeling from service demands that outstrip available resources.

Past attempts to create sufficient capacity at Grey Bruce Health Services have not succeeded for a variety of reasons. Numerous reports, requests and approaches, dating back to 2002, have been made to the LHIN and the Ministry seeking assistance in this area. Recent surge pressures and difficulties in transferring patients to other facilities for proper care only serve to underscore the need for a renewed effort to create local capacity. GBHS is again actively examining options to address this service gap, to determine what can be done in the immediate

to medium term to improve care for mental health and addiction patients in general, and in particular to ensure the safety of children and adolescents in crisis. We are working with the SWLHIN and our regional care partners to develop a long-term sustainable solution.

We are pursuing this work in conjunction with the SWLHIN-sponsored mental health and addiction capacity planning project that is now winding down after a year of solid work. That initiative is intended to:

- 1. Review Schedule 1 hospital mental health bed capacity and bed management practices;*
- 2. Develop standardized access and flow protocols for all Schedule 1 Hospitals, including surge protocols, care pathways, policies, and intake tools; and*
- 3. Develop a long-term capacity plan for the region and sub-regions with recommendations to optimize existing resources within the mental health and addictions system*

A final report from the project steering committee is expected by the end of the year.

## Mental Health and Addiction Program Integration in Grey Bruce

The merger of three adult mental health and addiction agencies serving Grey Bruce is proceeding on pace with the integration plan approved by the SWLHIN and adopted by all involved agencies. Canadian Mental Health Association Grey Bruce, HopeGreyBruce and G&B House have agreed in principle to merge, creating one community adult mental health agency. GBHS has agreed in principle to align its community mental health programs with the new agency and is an active participant in this process through membership on the Transition Council that has been established to guide the process. Martha Rogers, Harry Marshall, Paul Sinclair and Brenda Kearney are our representatives on the Council.

As part of this process, GBHS will migrate some of its community-based programs to the new community organization. Likewise, some programs currently performed by community agencies may be migrated to GBHS as part of this system realignment and integration process.

In addition, GBHS must establish a meaningful governance linkage with the new community organization. The GBHS Transition Council members, staff and the process facilitator are just beginning these discussions. There are a number of options to consider, each with pros and cons.

## Public Health Changes

The attached expert panel report regarding recommended changes to the Public Health system is important reading for all parties interested in health care in Ontario. The report is publicly available and the Minister has yet to take any follow-up action on the recommendations outlined in the report.

[http://www.health.gov.on.ca/en/common/ministry/publications/reports/public\\_health\\_panel\\_17/default.aspx](http://www.health.gov.on.ca/en/common/ministry/publications/reports/public_health_panel_17/default.aspx)

## Urgent Purchase of MDRD Equipment

Consistent with the Board's direction of June 28, 2017, immediate steps were taken to begin strengthening our medical device reprocessing capabilities, with key pieces of equipment being purchased on a priority basis in accordance with a risk-based plan of action developed by the department. Equipment and installation costs valued in excess of \$700,000 have been ordered and will be installed over the next few months. This will ensure that we continue to provide the sterilized tools needed for a variety of clinical settings across the organization, including the ORs, ERs, clinics, etc.

## South West LHIN Sub-Region Leadership and Integration Table Membership

The South West LHIN has appointed members to the sub-region integration tables, which are the cornerstone of the Government's Patients First agenda. Sub-region integration table members have been selected to represent the local LHIN-funded health system in their respective geographic areas. Patients, family members, caregivers, as well as provider representatives from all sectors are represented at these tables. Table membership will reflect the following perspectives:

- Addictions and mental health care
- Community support services
- French language services
- Hospital care
- Home and community care
- Indigenous voice
- Long-term care
- Patients/families/caregivers (two/three per sub-region table)
- Primary care
- Public health
- Non-health representatives with a regional view and social determinants of health perspective

Within each sub-region, a South West LHIN Sub-region Lead and a Sub-region Clinical Lead will work together to provide administrative and clinical leadership support.

For the Grey Bruce sub-region, the clinical lead is Dr. Keith Dyke, a general practitioner from Southampton. The hospital sector is represented at the table by Paul Rosebush, CEO for South Bruce Grey Health Centre (operator of hospitals in Chesley, Walkerton, Kincardine and Durham). The mental health and addiction sector is represented by the CEO of the Canadian Mental Health Association Grey Bruce, Claude Anderson.

The integration tables are expected to drive important changes needed to improve: population health and wellness; patient experience and outcomes; as well as value for money.

## Education Outreach

GBHS plays a significant role in educating and training healthcare professionals across many disciplines. This is done through formal arrangements with post-secondary institutions. Nineteen (19) Affiliation Agreements with post-secondary education institutions are currently being utilized by GBHS. In the 2016/2017 fiscal year, GBHS placed 243 students (122 RPN's, 71 BScN's and 50 Allied Health). The respective institutions and associated placements for the period of January through August 2017 are listed below.

<b>Institution (# of placements)</b>	<b>Placements</b>
Georgian College (93)	<ul style="list-style-type: none"> <li>- RPN (60)</li> <li>- RPN to BScN (2)</li> <li>- Consolidation (21)</li> <li>- Bridge Program (7)</li> <li>- Pharmacy (2)</li> <li>- Mental Health (1)</li> </ul>
York University (8)	<ul style="list-style-type: none"> <li>- Consolidation (6)</li> <li>- Emergency (2)</li> </ul>
University of Western Ontario (8)	<ul style="list-style-type: none"> <li>- Consolidation (3)</li> <li>- OT (1)</li> <li>- PT (4)</li> </ul>
Nipissing University (14)	<ul style="list-style-type: none"> <li>- Consolidation (1)</li> <li>- OB/Women &amp; Child (4)</li> <li>- Surgery (3)</li> <li>- Med/Surg (2)</li> <li>- Mental Health (4)</li> </ul>
University of Toronto (2)	<ul style="list-style-type: none"> <li>- Nurse Practitioner (2)</li> </ul>
Trent University (2)	<ul style="list-style-type: none"> <li>- RPN to BScN (1)</li> <li>- Rehab (1)</li> </ul>
Brock University (1)	<ul style="list-style-type: none"> <li>- Consolidation (1)</li> </ul>
Humber College (1)	<ul style="list-style-type: none"> <li>- Consolidation (1)</li> </ul>
Conestoga College (1)	<ul style="list-style-type: none"> <li>- Consolidation (1)</li> </ul>
Ryerson University (2)	<ul style="list-style-type: none"> <li>- Diabetes Education (1)</li> <li>- Surgery (1)</li> </ul>
Queens University (1)	<ul style="list-style-type: none"> <li>- Surgery (1)</li> </ul>
Fanshawe College(2)	<ul style="list-style-type: none"> <li>- MRI Tech (2)</li> </ul>
Laurier University (1)	<ul style="list-style-type: none"> <li>- Social Service (1)</li> </ul>
St. Clair College (1)	<ul style="list-style-type: none"> <li>- Ultrasound (1)</li> </ul>
Laurentian (3)	<ul style="list-style-type: none"> <li>- Midwifery (2)</li> <li>- Social Work (1)</li> </ul>
Healthcare CAN/CHA Learning (1)	<ul style="list-style-type: none"> <li>- Health Information Management (1)</li> </ul>
St. Lawrence College (1)	<ul style="list-style-type: none"> <li>- Lab Tech (1)</li> </ul>

Mohawk/McMaster (1)	- Ultrasound (1)
Cambrian College (1)	- Ultrasound (1)

GBHS has Affiliation Agreements with six (6) Medical Programs in Ontario. These include:

- **UWO** – Schulich School of Medicine & Dentistry
- **Queens University** – School of Medicine
- **McMaster University** – Michael G. DeGroot School of Medicine
- **Northern Ontario School of Medicine**
- **University of Ottawa** – Faculty of Medicine
- **University of Toronto** – Faculty of Medicine

Through McMaster University, we support the Owen Sound Family Health Team family medicine residency training program. Annually, there are two (2) first year residents (PGY1) and two (2) second year residents (PGY2), who complete their two years of post-graduate residency in a number of different specialties within our hospital. Over the past 5 years, we have retained all nine (9) of these residents in some capacity, whether they have returned for locum work or obtained permanent positions in the hospital/community.

In addition to this, many of our physicians act as preceptors to a number of medical students, residents, observers, international students and international medical school graduates. Typically, many of our departments accept learners at different times throughout each fiscal year across all sites, however our six (6) main departments accepting learners are:

- Pediatrics
- Internal Medicine
- Family Medicine Urban & Rural
- General Surgery
- Obstetrics and Gynecology
- Emergency Medicine Urban & Rural

GBHS works in strong collaboration with the Rural Ontario Medical Program (ROMP), Schulich School of Medicine and Dentistry and McMaster School of Medicine. This allows learners to come to our area not only to explore what rural practice entails, but also to gain a sense of rural living and our community.

Across our five (5) small community hospitals, GBHS accepts around 70-75 rural learners per year; having anywhere from 10 – 20 learners monthly across all hospitals combined.

In Owen Sound, GBHS accepts around 90-100 learners per year, having anywhere from 10 – 20 learners monthly. Amongst learners across all six (6) hospitals over the past 3 years, over 30 physicians have returned for service within Grey & Bruce on a locum or permanent basis.