PRESENTATION TO THE CORPORATION OF THE TOWN OF ESPANOLA

April 12, 2011











ERHHC Vision, Mission & Values

VISION

A leader in health care and gateway to services.

MISSION

To provide excellent health care programs and services to all we serve.

VALUES

Our values apply to every human being with whom we interact.

Patients First
Caring and Compassion
Respect and Dignity
Effective Communications

Integrity
Quality Improvement
Contribution of All





Espanola Regional Hospital and Health Centre

- located 80km west of Sudbury
- serves catchment area of approx.14,000 people
- second largest employer in Espanola (next to Domtar)
 - 215 employees
- multi-use health campus (one-stop-shop) provides continuum of care;
 - primary
 - acute

- ambulatory
- long-term
- Recognized as model for integration
 - already benefited both operationally & financially through integration/coordination of services
- Espanola is underserviced for family physicians
 (require 6 FTE GPs currently 3 vacant)



History

- ERHHC incorporated as EGH in 1948
- originally situated on Sheppard Street
 - was a Red Cross Station prior to being incorporated as a hospital
- moved to a new building on Tudhope Street in 1954
- later developed a new hospital (present site) on McKinnon Drive in 1988
- 32-bed nursing home (south wing) added in 2004
- The Family Health Team (FHT) opened in 2006-07
- EGH underwent name change to better reflect broader range of services offered on site as part of 2006-2009 Strategic Plan

EGH is now known as;

Espanola Regional Hospital and Health Centre





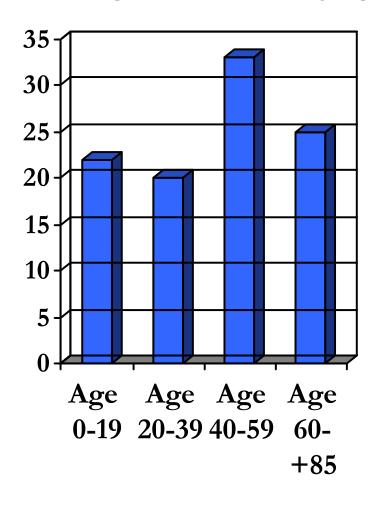
Patient Demographics Snap Shot

 Geographic area served by EGH is extensive

(includes ~55km radius centred out of the Town of Espanola)

 Variety of demographic characteristics that impact health status

Percentage of Population by Age







Population Served by EGH

Population (Source: Stats Canada 2006):

Community Name	Population
Township of Nairn & Hyman	500
Town of Espanola	5,300
Township of Baldwin	600
Township of Sables-Spanish Rivers	3,300
2 Aboriginal First Nations Communities	~3,000
Unorganized Territory	~1,000
Total	13,700**

**Not included in total number above is the large number of cottagers with seasonal dwellings in the area that utilize ERHHC during peak tourist seasons.

Hospital Service Catchment Area



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Demographic Characteristics

Variety of demographic characteristics (<u>relative to provincial average</u>) impact health status and ED usage such as:

Higher rate of:

- unemployment/
- single parent families
- smoking
- deaths (injuries, poisoning, suicide)
- teenage pregnancy (lower birth weight)
- Morbidity/mortality (with reduced yrs of life from cancers, respiratory illnesses, cardiovascular disease, accidents/suicide)
- obesity and binge drinking

Higher proportion of:

- seniors
- Aboriginals

Lower levels of:

- education
- income



The past physician shortage in Espanola has exacerbated the above as patients affected by these issues are ones in greatest need for medical services and end up accessing care through ERHHC's ED.

Strategic Plan 2010-2013 – At a Glance

Become a Facility of Choice for Physicians and Health Care Professionals

Create positive experiences for students, locums and all visiting professionals

Marketing & promotion of the *northern* lifestyle and benefits of community family practice

Improve physician recruitment incentives by utilizing and leveraging economic development resources

Provide mentoring and supports for new physicians and other health professionals

Develop a Healthy Culture that Supports Staff

Promote a healthy workplace and support wellness activities for staff

Create opportunities for staff social interaction and recreational participation

Celebrate organizational successes and recognize individual accomplishments

Provide staff mentoring and opportunities for professional collaboration

Support talent management and leadership development

Increase Financial Stability through Revenue Generation Opportunities and Cost-efficiencies

Increase revenue generation opportunities in non-acute programs/services

Support business opportunities for complementary health services

Partner with other service providers to explore and identify economies of scale in service delivery

Enhance and Promote a Culture of Quality Improvement and Patient Safety

Continue to promote our 'Patient First' principle including staff education about patient safety indicators

Increase public awareness and reporting about ERHHC patient safety & quality indicators

Research and implement best-practices for quality improvement

Meet our legislative requirements under *The Excellent Care for All* Act (Bill 46)





Strategic Plan 2010-2013 – At a Glance (2)

Enhance Programs/Services to Improve Patient Access to Care at the Right Place and Right Time

Continue to strengthen linkages with the Family Health Team

Continue to pursue Emergency Department (ED) redevelopment project

Pursue non-physician alternatives for ED coverage (e.g. Physician Assistants)

Continue to strengthen and expand the Telemedicine program

Undertake data analyses to assess the need and viability of introducing new services or repatriating services

Help facilitate solutions to alleviate the burden of travel for seniors requiring care in other communities

Strengthen our Integrated Care Model

Maximize linkages and collaborative opportunities with other key health care partners

With community partners, promote the development of a Seniors *Centre of Excellence* model (incl. seniors' day care) as part of ERHHC's integrated campus

Collaborate with our regional hospital partners on best practices in service delivery

Strengthen Community Involvement and Increase Community Awareness

Develop and provide ongoing messaging about ERHHC future plans and provide more community updates in local media (e.g. achievements, success stories)

Enhance ERHHC's website as a communication tool

Ensure ERHHC is visible in the community by participating in local events

Develop new opportunities for volunteer involvements in ERHHC

Strengthen board member development and succession planning





Services Provided at ERRHC Health Campus

- 24 hour emergency department
- 15 acute care beds
- 30 Eldcap beds (nursing home)
- 32 long-term care beds
- 2 chronic care beds
- 30-unit seniors apartment (independent living)
- 19-unit seniors assisted living apts.
- Family Health Team
- CCAC area office
- specialist clinics
 - Cardiology Dr. Baigrie
 - Geriatrics Dr. Clarke
 - Internal Medicine Dr. Sandre
 - Urology Dr. D'Aloisio
 - OB/GYN Dr. Vijay
 - Respirology Dr. Sherkin/Glazer

- day surgery (Dr. Gay)
- telemedicine
- audiology
- cardiac rehabilitation
- cardiac lab
 - Stress Test
 - Echocardiogram
 - ECG
- radiology/DI
- Ultrasound
- Sleep Lab
- Hospital Auxiliary
- EGH Foundation





Challenges and Opportunities

- Physician Recruitment and Retention
- Increased volume and acuity in Emergency Department
- ED Expansion
- LTC Beds (wait list of 57 and growing)
- LTC Deficit
- Cost to provide community based services (e.g. Lab)
- New Regulations/Standards from Long-Term Care Homes Act (incl. RAI-MDS – new funding formula)
- Alternate Level of Care
- Uncertainty of Operational Funding





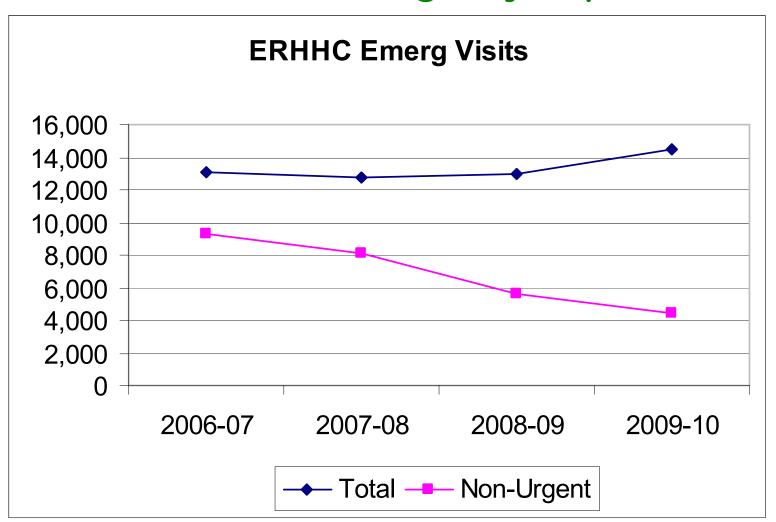
Challenges and Opportunities (2)

- Employee Wellness
- LHIN/MOHLTC Relationship and Funding
- Evolving Stakeholder Relations (community and associations)
- Excellent Care for All Act New Quality/Patient Safety – focus on transparency through public reporting
- Implementation of NEON (Electronic Health Record)
- New Strategic Plan for 2010-2013



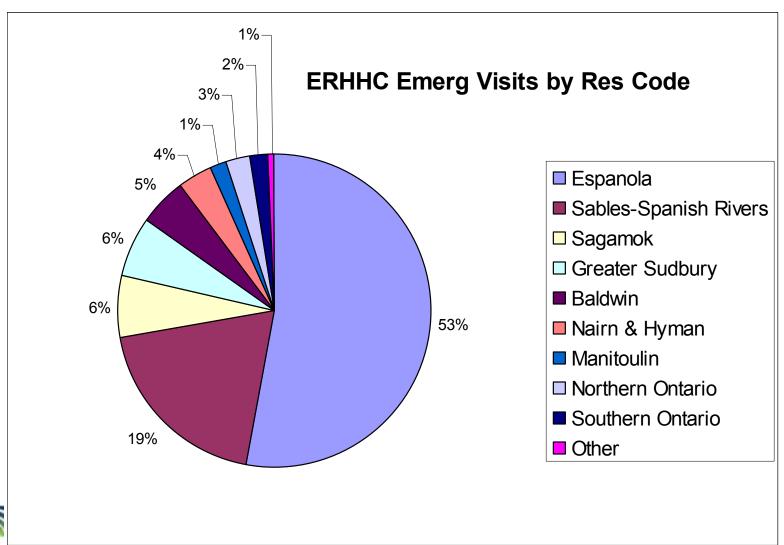
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Increased Use of Emergency Department



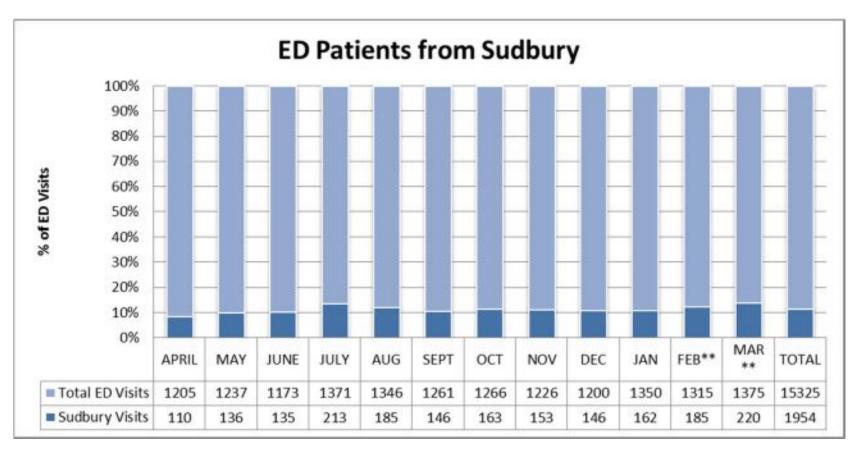


Emergency Visits by Res Code 2009-10





Patients From Sudbury









How Can the Municipality Help

- Continue to:
 - Advocate for healthcare improvements and funding
 - Communicate a positive image and culture of our community and health care facility
 - Support local Healthcare Recruitment
 - Be ambassadors for our community (outside of Espanola)
 - Promote healthy lifestyles and fitness



THANK YOU!

Questions?



