

Executive Report

April 16, 2008

Report from the OHA

Update on the *Physician Assistant Hospital Demonstration Project*

Since November 2006, the Ontario Hospital Association (OHA) has been coordinating the *Physician Assistant Hospital Demonstration Project* (PA demonstration project), part of the Ministry of Health and Long-Term Care's (MOHLTC) health human resources (HHR) strategy known as HealthForceOntario (HFO). The physician assistant (PA) was one of the new roles announced in May 2006. The MOHLTC is funding PA demonstration projects at over 20 Ontario hospital sites in a variety of clinical settings, including general internal medicine, surgery, emergency, orthopaedics and complex continuing care. Demonstration projects are also being undertaken at community health centres and physician offices across the province. These pilot initiatives will continue for a two-year period to effectively monitor, measure and evaluate the value of PA's in Ontario's hospitals.

The OHA's involvement in this project is due, in part, to recommendations outlined in its *Provincial HHR Strategy for Ontario Hospitals, 2005*, available at www.oha.com, under "Programs - Strategic Human Resources - Provincial Health Human Resources Strategy for Ontario Hospitals." The addition of alternate care providers is seen as a reasonable way to address the gaps in the supply and demand of health care professionals. The addition of PAs to the interprofessional health care team - who work under a physician's supervision at all times - will provide more flexibility in managing patient resources.

The deadline for recruitment for the hospital demonstration project was March 31, 2008. A total of 52 PA practitioners have been hired by 21 hospitals with help from HFO's marketing and recruitment agency, and the Centre for the Evaluation of Health Professionals Educated Abroad (CEHPEA - formerly IMG Ontario). The pilot ends in March 2010.

For further information, contact Maggie Fung at 416-205-1447 or mfung@oha.com.

New OHA Administrative Physician Compensation Survey Launched

Based on increasing demand from members, the OHA is pleased to announce the commencement of an annual *Administrative Physician Compensation Survey*. This survey was designed using member responses to an OHA feasibility study, and in conjunction with discussion and feedback from various stakeholders.

The new survey will examine the administrative component of hospital compensation practices with respect to select administrative physician positions. The survey will utilize a familiar web-based interface to collect data relating to stipends, time commitments, and common prerequisites for several benchmark positions. These benchmark positions will consist of positions at the levels of chief of staff, department chiefs and program directors in various specialty categories.

(continued on next page)

Report from the OHA (continued)

The final report, generated from the data collected, will be similar in format to the *Executive Salary Survey*, i.e. information will be presented regionally and by Local Health Integration Network (LHIN), hospital type, operating budget, number of beds and number of staff. Likewise, the results of this survey will also maintain the confidentiality of participant responses. Data collection is set to begin in late May 2008. It is anticipated that the final report will be available in August 2008.

The survey report will be available to participant hospitals on a cost-recovery basis. Access to the report may also be purchased by non-participant hospitals and other organizations. The OHA's regional, management, and executive salary survey reports are also available for purchase on the OHA website (www.oha.com), which detail compensation and benefit information for 198 benchmark jobs comprised of front-line, managerial and executive positions.

For further information, contact David McCoy at 416-205-1490 or dmcocoy@oha.com.

Academic Hospitals Launch Capital Equipment Group Purchasing Initiative

Ontario's 25 academic hospitals have launched a pilot initiative to jointly purchase capital equipment, such as diagnostic imaging machines. Ontario hospitals spend over \$300 million a year to purchase equipment, and while collaborative structures exist for buying medical and surgical supplies, the purchasing process for capital equipment is largely fragmented across hospitals. This initiative is a positive and significant step for hospitals and suppliers toward achieving increased efficiencies. The pilot phase will provide an opportunity to evaluate benefits and refine the process for long-term rollout across all hospitals in the province.

Over the course of a two-year pilot, participating hospitals will jointly purchase selected equipment through a consolidated process. The initiative is being coordinated by the Council of Academic Hospitals of Ontario (CAHO), which is working with several procurement organizations: Healthcare Material Management Services, Plexxus and St. Joseph's Health System Group Purchasing Organization.

For further information, contact Sanober Motiwala at 416-205-1435 or smotiwala@caho-hospitals.com.

April 2008 ALC Survey: Due April 25

The OHA is requesting that all hospitals complete a survey in April as part of a series of surveys related to the alternate-level-of-care (ALC) issue facing Ontario hospitals. The purpose is to collect timely information on the challenges posed by ALC patients to hospitals to provide the OHA with accurate evidence for ongoing discussions with the government on the need for urgent solutions, and to assess the impact of proposed solutions. The OHA will continue to share the aggregate data as it is collected with hospitals and LHINs.

Please note that the OHA is also monitoring the use of post-acute beds for ALC patients and encourages all complex continuing care, rehabilitation and mental health facilities to respond and provide information on the number of people waiting for alternate levels of care.

Kindly complete the survey no later than 4:00 pm on **Friday, April 25, 2008**, using the most recent available information to answer the questions. Your input is critical to helping the OHA monitor the ALC issue.

For further information, contact Andrea Wong at 416-205-1444 or awong@oha.com.



Official Hotels for OHA HealthAchieve2008

Mark your calendars for OHA HealthAchieve2008, taking place on November 3, 4 and 5 at the Metro Toronto Convention Centre (MTCC). Book your accommodations early to ensure your choice of hotel. When making hotel reservations, be sure to identify yourself as a delegate attending OHA HealthAchieve2008 to qualify for the special hotel rates. This year's official hotels include the InterContinental Toronto Centre, The Fairmont Royal York, Hilton Toronto, Renaissance Toronto Downtown and Holiday Inn on King.

Visit www.ohahealthachieve.com for more information or call 416-205-1361.

Report on Health Care

Hospital Partnership Benefits Patients through Cutting-edge Diagnostic Technology

State-of-the-art x-ray equipment and a new partnership with Toronto East General Hospital (TEGH) are providing Providence Healthcare (Providence) the diagnostic tools to improve care for its patients and residents. The official opening of a new diagnostic services suite on April 1, 2008 was the culmination of two-and-a-half years of planning.

The spacious new suite features the latest digital diagnostic equipment, which produces instant, high-resolution images that can be viewed on a Providence physician's desktop computer within minutes to speed up diagnosis and treatment. The new technology, coupled with the TEGH partnership, has also reduced the turnaround time for radiologists' reports from three or four business days down to one. TEGH has the same digital radiography system, and an agreement was made to have its radiologists read x-rays from Providence, where there are no radiologists on staff.

Switching to digital x-rays has enabled Providence to join the Toronto East Network Picture Archiving and Communication System (TEN PACS) group, which offers a digital imaging repository where patients' images and reports can be archived and retrieved. If a Providence patient has to be transferred to TEGH for acute care, their x-rays and reports are readily available and do not have to be duplicated.

Health Centre Receives National Accreditation Status

The Sioux Lookout Meno Ya Win Health Centre (Health Centre) received accreditation status with a report from the Canadian Council on Health Services Accreditation (CCHSA). All client programs and services across the seven sites that encompass the Health Centre were evaluated by two surveyors from the CCHSA. This was the Health Centre's second accreditation survey, which surpassed its 2004 survey results with only seven recommendations identified out of a total of 383 quality improvement criteria and 21 required organizational patient safety practices that the organization's programs and services were measured against.

The Health Centre was also recognized for three leading practices in the areas of language and cultural support in systems delivery, outreach communications including health prevention/promotion initiatives, and utilization of interpreter services to enhance quality of care to First Nations clients who comprise up to 75% of its patient population.

Baycrest Creates Centre for Brain Fitness

On April 7, 2008, the Ontario government announced that it is investing \$10 million dollars to create the "Centre for Brain Fitness" at Baycrest. The province's investment matches the \$10 million of secured and pledged commitments from private donors. Baycrest's foundation will launch a major campaign to raise additional funding for the new centre.

Baycrest will partner with the Toronto-based MaRS Venture Group to develop and market scientifically-proven products for the clinic, workplace and home environments. Products in development over the next 10 years will include:

- Cognitive assessment software (in a portable computer tablet) that allows clinicians to easily and efficiently measure memory and processing in people who have had a stroke, may have Alzheimer's or other memory challenges;
- Brain fitness products to help healthy aging adults (ages 45-75) maintain their cognitive functions, plus an additional product suite for caregivers to provide cognitive rehabilitation to people with mild cognitive impairment and dementia who live in long-term care homes and retirement homes;
- An executive training program for corporations wishing to help their aging employees improve cognitive functions to remain productive; and
- An internet-based outreach program to support people caring for loved ones with mild to medium cognitive impairment.

Executive Announcements

Paul Mailloux, Chief Executive Officer (CEO) of the Haldimand War Memorial Hospital retired on March 31, 2008. **John Clarke**, Chief Operating Officer assumed the role of CEO effective March 10, 2008.

St. Joseph's Healthcare Hamilton (SJHH) and Toronto's University Health Network (UHN) announced a first-of-its kind health care collaboration on April 15, 2008, with the appointment of a shared Vice President of Human Resources and

Organizational Development. **Emma Pavlov**, currently Senior Vice President, Human Resources and Organizational Development at UHN, will be joining SJHH on April 21, 2008.

Report from Queen's Park

Funding Boost for Ontario Hospitals

The MOHLTC recently released additional information about the funding available to hospitals for the 2008-09 fiscal year.

The MOHLTC media release and backgrounders outline information regarding the \$667.2 million in new funding for hospitals in 2008-09. The information is broken down by individual hospital and by LHIN. It includes funding allocations for small and isolated hospitals, Post Construction Operating Plan funding, wait times, and growth. The MOHLTC news release and backgrounders are attached to the April 14, 2008 *Tom Talks* - a link is provided in this week's *Executive Update* email.

Growth funding

Growth funding is targeted for Ontario's fastest growing communities to help address increasing demand for hospital services. The 2008 Ontario Budget announced a \$120 million investment over the next three years to help hospitals in areas experiencing high population and service usage growth meet anticipated demand. This amount includes \$30 million in 2008-09. LHINs will be determining the appropriate distribution and timing of this funding for their hospitals based on their respective local circumstances.

New or expanded services funding

This is the additional operating funding provided for service expansions following the completion of a

ministry approved capital project. The additional services being funded include:

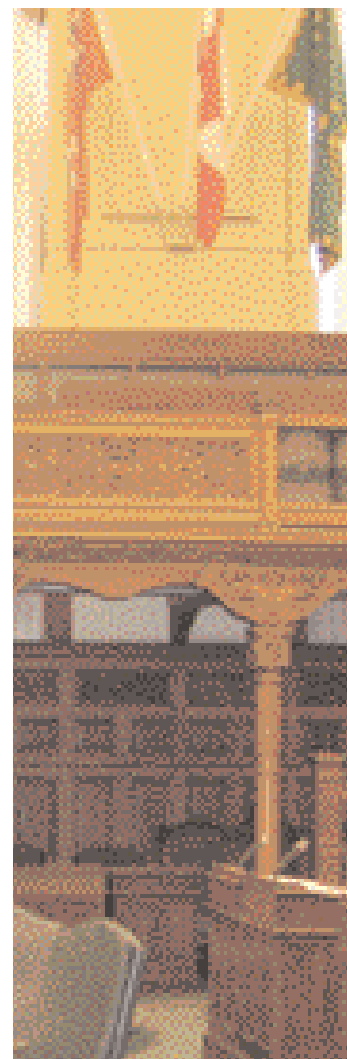
- Acute Medical/Surgical Inpatient Beds
- Acute Mental Health Inpatient Beds
- Intensive Care - Adult and Neonatal Beds
- Complex Continuing Care (CCC) Beds
- Rehabilitation Beds
- Emergency Visits
- Ambulatory Care Visits - Day/Night and Clinic

Wait Time Strategy funding

Ontario's Wait Time Strategy (WTS) is focused on reducing the waiting times for five select services including cancer surgery, cardiac procedures, cataract surgery, MRI/CT scans and hip and knee replacements. The funding included within this allocation is for hospitals to increase the number of surgical and diagnostic procedures performed as part of this strategy.

Small hospital funding

This funding is distributed to small hospitals in fiscal 2008-09 to ensure that service gaps are covered so that core services, such as emergency departments, are sustained.



OHA

Conferences

Ontario's Critical Care Strategy – Integration, Innovation and Collaboration

April 28, 2008
Toronto

On January 2006, Minister of Health and Long-Term Care George Smitherman, launched the *Critical Care Strategy*, which recognizes effective critical care delivery as a fundamental cornerstone in improving overall health system utilization and performance. A significant component of the strategy is its focus on gathering and reporting improved levels of information about Ontario's critical care patients and the resources required to care for them. This information is gradually being used to support providers in making the best decisions about caring for patients now and in the future.

This course is the second in a series that features commentary from leading critical care providers, patient safety advocates and health policy planners on these components of the strategy - presented in partnership with the MOHLTC's Critical Care Secretariat and Ontario's Critical Care LHIN Leaders. For further information, contact Shannon Byck at 416-205-1357 or sbyck@oha.com.

Going Green for the Health of It!

May 5, 2008
Toronto

This one-day conference is an opportunity to network with peers and hear from industry leaders as they discuss the successes, challenges and opportunities in "greening health care." Participants will learn about environmentally preferable purchasing and will hear practical advice on the importance of providing healthy foods in health care. A session on innovative green technologies will highlight "biomimicry," a science that studies nature and attempts to imitate its design to solve human problems. The afternoon sessions will cover best practice case studies from physicians and health care administrators from across North America. For further information, contact Kerry Vincent at 416-205-1306 or kvincent@oha.com.

Community Engagement in an Evolving Health Care Environment

May 15, 2008
Toronto

Its governance practices make Ontario the only democratic hospital sector left in Canada, and one that continues to receive strong support from government. As this structure demands a high degree of openness and accountability from hospitals, public debate can

emerge over complex issues. Hospital boards must take responsibility and make difficult decisions in the best interests of their community.

This conference will gather together trustees, hospital and health care leaders, and trusted experts in governance to discuss the importance of community engagement in the province's ever-changing health care system. Featured speakers include Anne Corbett, Senior Partner, Borden Ladner Gervais LLP; Guy Giorno, Partner, Fasken Martineau; Ruthe-Anne Conyngham, Past Chair, OHA and Past Chair, St. Joseph's Health Centre, London; Dr. Gillian Kernaghan, Vice President, Medical and Professional Affairs, St. Joseph's Health Care, London; Sandra Hammer, CEO, Waterloo Wellington LHIN; Robert Devitt, President and CEO, TEGH; Maria Hudspith, Director, Community Engagement, Vancouver Coastal Health Authority; and Elizabeth Dowdeswell, Former President and CEO, Nuclear Waste Management Organization. For further information, contact Josie Mazzola at 416-205-1356 or jmazzola@oha.com.

Moving Forward – Rural/Northern Hospital Strategy

May 21, 2008
Toronto

The OHA is pleased with the government's election commitment to improve life for rural and northern Ontario residents by developing a rural/northern hospital strategy. Last year, representatives from many small hospitals participated in the development of the Joint Policy and Planning Committee's (JPPC) *Core Services Report*, released in June 2007, which served as a productive precursor to the development of the government's rural/northern strategy.

The goal of the forum is to bring small and northern hospitals together to discuss how to build on the third phase of the report to ensure that it is meaningful and useful for small hospitals, and to look at ways of shaping the government's rural/northern hospital strategy. For further information, contact Shannon Byck at 416-205-1357 or sbyck@oha.com.

Consent to Treatment

May 26, 2008
Toronto

Health care organizations and providers need to understand the law of consent and how it impacts their practices and procedures in

(continued on next page)

OHA Conferences (continued)

many different settings and situations. In addition to setting out Ontario law relating to consent, the *Health Care Consent Act* provides the authority for the Consent and Capacity Board to hold hearings under the *Mental Health Act*, the *Health Care Consent Act*, the *Personal Health Information Protection Act*, the *Substitute Decisions Act* and the *Mandatory Blood Testing Act*.

This conference will focus on the general principles of consent and related recent developments and will also examine consent in specific contexts such as dealings with pediatric, geriatric and psychiatric patients. This conference will also address the role of the public guardian and trustee and that of the Consent and Capacity Board. Finally, panel discussions and presentations will look at complex cases, end-of-life issues and difficult discharge cases. For further information, contact Kerry Vincent at 416-205-1306 or kvincent@oha.com.

Quality Improvement 101 & Applying QI to Move Forward with HSMR June 5 & 6, 2008 Toronto

The OHA, in partnership with the Ontario Health Quality Council (OHQC) and the Canadian Institute for Health Information (CIHI), is pleased to present this two-day conference.

Day one will provide participants with a basic introduction to quality improvement (QI) skills. QI refers to the systematic use of tools developed over the past sixty years within the field. This includes understanding of how systems operate, measuring and monitoring quality over time, and implementing change. Delegates will learn how to set up a QI team, identify targets and measures for improvement; implement small tests of change with the Plan-Do-Study-Act (PDSA) cycles, basic system analysis skills such as process mapping and redesign, and how to use simple data collection tools for monitoring quality. It is strongly

recommended that attendees are part of an existing or new QI team. Multiple representatives of the same QI team are encouraged to attend.

On the second day, participants will gain an in-depth understanding of Hospital Standardized Mortality Ratio (HSMR), including the current challenges in analyzing and identifying opportunities for process improvement. HSMR is an important measure that can help support quality of care and patient safety improvement initiatives in hospitals. Through group work and the application of QI principles, participants will look at how to identify root causes of hospital mortality and priorities for improvement, and will learn more about conducting chart audits. Participants will also have the opportunity to design simple data collection tools for chart abstraction and ongoing monitoring, select indicators and targets for improvement, and test and implement ideas for reducing HSMR using PDSA cycles. For further information, contact Sara Simone at 416-205-1314 ssimone@oha.com.

New Skills, New World - The Future of Health Care October 2 & 3, 2008 Stratford

Mark your calendars for the OHA's Region 5 annual meeting and educational conference. This year's theme will focus on hospitals of the future and will address topics such as health human resources, e-Health, Ontario's aging population, patient safety issues, The *Public Hospitals Act* and local health care governance. Keynote closing speaker Nick Bontis, Associate Professor of Strategic Management, McMaster University and Director, Institute for Intellectual Capital Research will discuss "Leader-shift: Thriving in 2020." For further information, contact Joanne Grzywina at 416-205-1341 or 1-800-598-8002, ext. 1341 or jgrzywina@oha.com.



200 Front Street West, Ste. 2800
Toronto, ON M5V 3L1
Tel: 416 205 1300
Fax: 416 205 1360
www.oha.com

Executive Report

The Executive Report is a weekly publication of the OHA

Editor:
Tamarah Harel
416 205 1346
tharel@oha.com