



Engage

...from Fannie Vavoulis, Director of Communications

Happy Spring!

We have booked our next **Engage** sessions for May – dates are below:

Wednesday, May 24th at 11 a.m. – Chatham Campus, FMUA

Wednesday, May 24th at 1 p.m. – Sydenham Campus, Cafeteria

Both of these sessions will be available live via OTN. They will not be archived. We hope you will join us either in person or via OTN.

To view the session via webcast please visit www.webcast.otn.ca and click “Public” under LIVE events on the day of.

If you have any questions or comments, please feel free to contact me at fvavoulis@ckha.on.ca or ext. 6143.

- **Community Engagement**

Over the last month we have launched our Community Engagement plan. We have had “Meet and Greet” events in Wallaceburg, Blenheim and Chatham. The “Meet and Greet” events allow for the public to meet our Supervisor and new leadership team. We decided to go with this format for people to have one-on-one conversations about their concerns and ideas for CKHA. They have been well attended and the feedback we have received has been very positive. The community has been very welcoming at the events. We have heard from many that the assurance that both campuses and both ERs will remain open is welcomed. At these events we highlight all aspects of the transformation at CKHA through poster boards we have created. You can view the poster boards at <http://www.askckha.com/engage/>.

- **Recovery Plan Update**

The Recovery Plan continues to move forward. While KPMG has completed their work, our working groups are still meeting and moving things in the right direction. We have put the ideas to paper and are working on plans. These will be communicated in the near future. Living within our means and restoring financial health to our organization is crucially important to ensure we have funds to not only deliver needed service but also to buy equipment and keep our organization up to date. Regrettably, as we all know, the hospital has for too many years ran deficits which have left us without the needed funds to buy equipment, replace outdated facilities and keep up to date.

Currently the Recovery Plan is on target to achieve the \$10 million in savings needed over a 3 year period to remain fiscally stable. We plan to finish this fiscal year in a balanced position, which means while we still need to reduce expenditures; it allows us to focus on a 3 year plan versus a 2 year plan. We believe we will share the full plan by June 2017.

As mentioned earlier this month in the Wallaceburg Courier Press, there are close to 300 eligible retirements within the next three years at CKHA. As we go through the Recovery Plan we will take into account retirement numbers and our annual turnover rate of 4% which equates to approximately 50 employees a year. We understand this is a stressful time in the organization and want to ensure that we are working towards a Recovery Plan that will be respectful of our employees.

We have tremendous support from leaders within the organization and are on track to achieve our savings. The working groups are completing the final stages. Any changes that would affect our partners directly or the broader system will be shared with you. While the financial situation has been very challenging, we are optimistic we can achieve our goals while still providing high quality, safe care to you and your loved ones.

- **NRCC Survey**

Thank you to everyone who visited our NRCC Open Houses at the end of March. We received feedback from many about the survey results. We are now working within departments to prepare action plans. Over time we will be sending the survey out to small groups to ensure we are on target to improving the results.

- **Rural Health Advisory Committee**

We have talked about the need for healthcare for ALL of Chatham-Kent. Most of Chatham-Kent is considered rural. With this in mind, we are creating the Rural Health Advisory Committee. In previous issues of Engage we have outlined the committee. Currently we are in the process of interviewing candidates to be on the committee, which will represent our entire community. We hope to have the committee in place by the end of April.

- **Mental Health Review**

In February we did an extensive review of the Mental Health and Addictions Program at CKHA. As part of our transformation we are reviewing departments. The review team was comprised of experienced interdisciplinary members from different organizations including a Psychiatrist in Chief and Vice

President Education, Director of Mental Health & Emergency Services and management consultant. The review was to better understand the benefits and to identify:

1. Any possible limitations of the integration of CMHA, CKHA & Bluewater Health
2. Assess effectiveness of leadership structure
3. Determine the extent to which the culture remains one of fear, intimidation and retribution
4. Determine the impact of the culture on staff, physicians and leadership team within MHAP
5. Understand relationships between psychiatrists and MHAP and their relationship with key departments within CKHA
6. Recommend opportunities for improvement

Over 65 people were interviewed in a confidential manner, one on one. The recommendations have been outlined and Lori Marshall and Dr. Faruqi have met with the department to discuss the outcome of the review and next steps. There were 12 recommendations made. These include:

CMHA and CKHA Partnership:

1. The CMHA and MHAP integrated model needs to be reviewed and evaluated with respect to:
 - a. The effectiveness of the leadership structure and the actual benefit to CKHA
 - b. Role clarity and delineation of responsibilities of staff and leadership
 - c. Benefit to patients and to the organization
 - d. Sustainability and value to CKHA, the LHIN and the community
2. Critical to review the MOU between CMHA and CKHA to understand the expectations of each of the partner agencies and how the addition of Bluewater Health has been addressed by the MOU
3. In addition, written communication and an annual workshop with finance, quality and risk management teams at CKHA and CMHA managers to address issues would be beneficial
4. Moving outpatient staff to the CMHA site should be evaluated to ensure there are clear goals for making this move and involving staff in the process
5. Continue to expand the involvement of patient and family advisors in the MHAP

Leadership:

6. It would be critical to accurately determine the leadership and administrative needs of both the integrated and non-integrated programs and then determine what is the most effective leadership structure
7. Leadership workshops for existing leaders as well as mentoring and coaching to develop future leaders should be considered
8. Outpatient clerical staff require role clarification as well as performance appraisals to deal with performance issues

Risk:

9. Lack of adherence to CKHA Policies by select individuals needs to be reviewed
10. Consider creating a process for making urgent appointments with psychiatrists more readily available

11. The interdisciplinary mental health team supporting the ED must be evaluated to ensure appropriate scopes of practice, provincial benchmarking/standards of care are met and risks are mitigated.

Culture:

12. Lack of adherence to CKHA Policies by select individuals needs to be addressed

Next steps include a change to the integrated leadership model reviewed and streamline the roles, conduct a search for new director and Chief/Program Director, mandate for new leadership to work lead MHAP program, internal and external stakeholders and Patient/families to identify, implement and evaluate change initiatives to create evidence informed program and individual performance to be managed appropriately.

- **Leadership Update**

As announced on April 12th there has been a change to Leadership in the Mental Health and Addictions Program. Chatham-Kent Health Alliance, The Canadian Mental Health Association Lambton-Kent, and Bluewater Health, have collectively agreed to redesign the current partnership, of Integrated Mental Health and Addictions Services, in an effort to strengthen the local focus of mental health service delivery.

CKHA and CMHA Lambton-Kent will proceed to recruit an Integrated Director, working exclusively in Chatham-Kent, and Paula Reaume-Zimmer will continue in her position as VP of Mental Health and Addictions at Bluewater Health and CMHA Lambton-Kent.

As regional partners, we remain committed to working together and actively collaborating to best serve our patients. Until a successful incumbent is in place, to support our ongoing relationships and work in progress, Paula will continue to provide leadership to the Mental Health and Addictions Program at CKHA and CMHA Lambton-Kent.

- **Dysphagia and Fees Service Ribbon Cutting**

On April 7th we celebrated a new milestone in the delivery of high quality care with the official launch of enhanced dysphagia and swallowing assessment services at the Chatham Campus. Offered on a weekly basis in Ambulatory Care, these multi-disciplinary clinics ensure local patients have access to advanced assessment and treatment of swallowing difficulties using state-of-the-art equipment – a Flexible Endoscopic Evaluation of Swallowing (FEES). CKHA leadership, staff, physicians and patients gathered to recognize this important event with a ribbon-cutting ceremony.

Following a clinical swallowing assessment with a Speech Language Pathologist, both inpatients and outpatients who require further examination are referred to CKHA's dysphagia clinic. The FEES assessment delivers a reliable technique that involves passing a flexible endoscope through the nose to obtain a superior view of the upper digestive tract, while various foods and liquids are given to the patient to swallow. A FEES evaluation has many advantages, such as no exposure to radiation, and the opportunity to test sensation and assess the vocal cords. It also has the ability to record and review exams and compare progress from previous exams, a tool particularly helpful with our stroke patients.

These multi-disciplinary clinics offer patients at CKHA best possible care by providing a consultation with a Head and Neck Surgeon who sub-specializes in voice and swallowing and a Speech Language Pathologist who collaboratively generate a treatment plan tailored for each patient. This can include certain strategies to use while swallowing, diet modification and surgical procedures. The overarching goal of treatment is to improve patients' quality of life, avoid hospitalization from aspiration pneumonia for patients in the community and help with earlier discharge home from hospital for inpatients with dysphagia.

Designed with portability in mind, the equipment can be transferred among different units to perform evaluations at the bedside – a future goal that the organization hopes to achieve to expand the delivery of safe, high quality care. Congratulations to everyone involved in providing this service to our patients and community.

Thank you for taking the time to read **Engage**. Again, if you have any questions or feedback, I'm happy to hear from you!

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