



NHH introduces hospitalist program

“Local GPs have provided exceptional care to our patients for many years and they continue to support key services in the hospital. We are grateful for this and hope that their commitment can be further sustained with the additional support of the new hospitalists.” Robert Biron, President and CEO

The Board of Directors of Northumberland Hills Hospital (NHH) recently approved the introduction of a new hospitalist program in order to address challenges in declining General Practitioner (GP)¹ coverage for patients admitted to hospital. Hospitalists are physicians who are dedicated to provide hospital care to inpatients not covered by GPs.

NHH has experienced a steady increase in the number of GPs

relinquishing their hospital privileges over the past three years. As a result, fewer GPs remain on hospital staff to carry the workload. The decline in GPs providing hospital work is a trend experienced in many Ontario communities across the province and not something unique to west Northumberland. As many Ontario hospitals facing the same challenge have determined, the solution is to introduce a hospitalist program.

Though hospital operating funds are not intended to be directed to pay for physician medical services, NHH has reallocated approximately \$270,000 of its operating budget to provide additional remuneration over and above the expected OHIP fee-for-service billings in order to recruit and retain hospitalists. Recruitment for the hospitalists is now under way, with an aim to have the program fully operational by the new year.

“The local GPs who continue to provide hospital services are becoming increasingly stretched as they struggle to meet the demands of community and hospital work,” said Dr. David Broderick, NHH’s Chief of Staff. “The remaining GPs on hospital staff are becoming burnt out and there’s less capacity and willingness to take on more orphan patients². As a result, some patients must wait longer in the Emergency Department to be admitted for inpatient care, because it takes longer for the hospital to find a GP willing to care for an orphan patient. This is not sustainable and a new approach is required for the long-term viability of the hospital.”

Robert Biron, NHH President and CEO further emphasized, “NHH must do what is necessary to ensure patients get the care they need. This new direction was a last resort, but it has become a necessary one given our circumstances.

¹ General Practitioners are also referred to as Family Physicians.

² An orphan patient is a patient who is admitted to hospital and: (1) does not have a GP; (2) has a GP who does not provide hospital services; or, (3) is from another community.

Regional health service planning

Across the province, Local Health Integration Networks (LHINs) are working with their local stakeholders on the development of their third Integrated Health Service Plans or IHSPs. Here in the Central East LHIN, the 2013-16 IHSP will once again serve as the local road map guiding the activities and accountabilities of local health service providers leading to better health, better care and better value-for-money for the residents and health service providers in the Central East region.

At their Open Board Meeting on September 26th, the Board of the Central East LHIN reviewed proposed Strategic Aims for the 2013-16 IHSP. With an overall theme of “Community First – Help Central East LHIN residents spend more time in their homes and their communities”, four aims, building on the planning, integration and system investments made during the current 2010-13 IHSP, have been put forward:

- Reduce the demand for long-term care so that seniors spend 320,000 more days at home in their communities by 2016.
- Continue to improve the vascular health of residents so they spend 25,000 more days at home in their communities by 2016.
- Strengthen the system of supports for people with mental health and addictions issues so they spend 15,000 more days at home in their communities by 2016.
- Increase the number of palliative patients who die at home by choice and spend 12,000 more days in their communities by 2016.

As they head towards November 30th and the submission of the final 2013-16 IHSP to the Ministry of Health and Long-Term Care, the Central East LHIN is inviting community input to find out whether these aims are relevant to our stakeholders, their families and their communities.

For more information and to access the 2013-16 survey, visit the Central East LHIN website – www.centraleastlhin.on.ca – and click on the “IHSP – Integrated Health Service Plan” button before November 16th.



Adult with chronic health conditions? Caregiver? Local health professional? See below!

Progress continues on many fronts on the Northumberland PATH project announced at NHH in June.

Short for “Partners Advancing Transitions in Healthcare,” PATH is the idea of an independent policy think tank called **The Change Foundation** focused on improving health care experiences for people as they move in, out of, and across Ontario’s health care system.

Northumberland won a competitive bid to secure \$3 million in research funding from The Change Foundation for an innovative project that is now unfolding right here in our community (for more see www.changefoundation.com).

In a related initiative, The Change Foundation is taking a snapshot of how adults with chronic health conditions and family and friend caregivers are experiencing health care transitions in Northumberland today. Health care professionals are another part of the picture, and The Change Foundation is capturing their experiences with patients and caregivers as they move through the health care system.

Two surveys are under way now through mid-November. Patients and caregivers in our area may be invited to participate in a random phone survey while local health professionals (physicians, nurses, other regulated health professionals, care coordinators, personal support workers, etc.) have the opportunity to complete an online survey accessible at:

www.ipsosresearch.com/NorthumberlandServiceProviderSurvey.

Both surveys take between 15 and 20 minutes to complete and information provided will be kept confidential.

Insights from these surveys will help to inform the Northumberland PATH project by enriching understanding of how patients with chronic health conditions and caregivers in our region are experiencing transitions between health service providers. The survey responses will also feed into the care redesign work that will be undertaken in 2013-2014. A snapshot will be taken once again by The Change Foundation – in 2014 – after the Northumberland PATH project wraps up, to measure progress.

More details on the Northumberland PATH project will follow in future *In Touch* newsletters. Questions? Contact Jennifer Gillard at jgillard@nhh.ca or 905-377-7757.

Upcoming Foundation Events

November 3rd - Gala N°12
The Chanel-Inspired Event of the Year.

Gala tickets are on sale now, as are tickets for the related doctors raffle! Visit www.nhhgala.ca for details or call Adrienne Barrie in the Foundation office at 905-372-6811, ext. 3068.



Want to be the first to get updates on hospital news?
Sign up for our e-newsletter at nhh.ca - it's free, and it's delivered straight to your email in-box on the day of release!