

Monthly CEO Report January 2012

General

December was another busy month for the health system. The holiday period presents a significant challenge to our staff and physicians. They deserve to have some time with their family and friends over the holidays. However as we provide them with this opportunity this creates reduced capacity in our services which can increase the demand on those that are required to work. In addition, it is a time of year when many people are in need of support from the health system. Our senior leaders, staff and physicians made a particular effort to increase the staffing at our two larger emergency departments to reduce the probability of excessive wait times in the respective departments. While there were occasions when the wait times went beyond what we would have liked them to, their efforts did result overall in better service levels compared to last year.

Strategic/business plan update

The strategic initiatives updates at our Executive Leadership Team (ELT) in December included the following. The Board will receive updates on these strategic initiatives as part of the board reporting schedule.

- ELT was updated on the results of our provincial surveillance program as detailed in the Annual Infection Control Surveillance Report which was presented by the Chief Public Health Officer, Dr. Heather Morrison, and her staff;
- ELT was updated on the work related to our mental health and addictions strategy by the Director of Mental Health and Addictions, Margaret Kennedy and our Program Medical Director, Dr. Dada; and
- ELT was updated on the work being conducted on transition management, work focused on how we can improve the movement of individuals between our various services, by our Utilization Management Coordinator, Heather Diamond.

We continue to work with the Department to get direction on the priorities for the next strategic plan for the health system.

Last month I reported on the work of our Advisory Committee on Organizational Development. We recognize that our managers and leaders are a very important part of our success and are key in leading the work laid out in our strategic plan. A new tool that we have implemented that will assist them in their work is the Manager Resource Center. The Manager Resource Center (www.healthpei.ca/mrc) brings together information that previously had been in several

different locations or was difficult to find. This web site will provide easy access to the information and tools they need to be effective and efficient in their roles. This Center is a work in progress and will develop and expand as new tools and resources are identified and developed.

Our work around process re-engineering, generally using Lean/6 Sigma tools, continues to progress. We were pleased to learn that the QEH Emergency Department Lean project was selected by Accreditation Canada for presentation at their Quality Conference that will be held on February 2-3, 2012 at the Four Points by Sheraton hotel in Mississauga, Ontario. This is a great recognition of the work of this team and the progress we are making in introducing this methodology into our health services.

Public, patient and staff engagement processes and results

Physicians play a key role in directing our health services across our organization. We are meeting regularly with representatives from the Medical Society. The medical staff by-laws created two key bodies that provide physicians with effective input and leadership in the health system. In December I participated in a meeting between the Board of Health PEI and the President's Council of our medical staff. This was the first meeting with the President's Council. It should provide an effective mechanism for the various medical staff across Health PEI to advocate their concerns to the Board. I also participated in a meeting with the Board Chair and the Provincial Medical Advisory Committee. We had an opportunity to review the strategic direction of Health PEI and the important role this Committee has in directing physician practice and accountability.

Financial

As you know we have been asked to consider ways to reduce our forecast expenditures for the current year to assist Government in meeting their projected financial target. I sent a note out to our Directors, Managers and physician leaders to provide guidelines in terms of areas to look into to reduce their forecast expenditures. You received a copy of this memo when it was sent. I expect that the current and projected fiscal position of the province, which is being impacted by the current and projected funding to the Province by the Federal Government, will be a significant focus of all of us in Health PEI over the coming year.

Government announcements

The main announcements impacting on Health during this period was the statement by the Premier concerning the decision of government on providing abortions on PEI and a broad statement around the provinces current financial position and that government departments were being asked to reduce their budgets by 3%.

Health PEI communications activity

The questions raised by the media covered many aspects of our operations. This was another busy month. I will not try and summarize this information but I will highlight some of the activity that might be of interest. However please ask questions you might have on this information.

The Fraser Institute issued their wait times report which placed PEI and the bottom in terms of performance. We had a number of interviews on the report. Our main message was that the methodology used in the report does not ensure accurate analysis from our perspective. And regardless, we had already initiated action to deal with the wait times with the expansion of the use of the PCH OR s and the commitment to the development of the day surgery area at the QEH. Interesting enough, we received a call from a reporter last week where they provided information which further questioned the methodology and the fact that doctors were being rewarded to participate as they had the opportunity to win a \$2,000 prize. The reporter was of the opinion that this raised further questions as to the validity of the report. This is an example of the challenges we have in messaging to the public.

It was also great to see the unsolicited coverage of the Harbourside collaborative primary care site. After the initial story there was significant interest by the local media. This coverage provided us an opportunity to demonstrate the progress we are making in establishing our collaborative primary care model across the province.

Our “Talking Health” article in [The Guardian](#) for December focused on the Drug Information System.

Our next edition of “The Health Beat”, our internal newsletter should be out in the next week or so. The topics are noted in the attached summary of the story lines.

CEO Activities

It is important that I have the opportunity to engage in discussions with our many staff, physicians and external partners. During December, in addition to the meetings noted above, these discussions included:

- attending the Prince County Hospital and Queen Elizabeth Hospital Foundation Christmas receptions;
- attending the annual medical student Christmas reception co-sponsored by the Medical Society of PEI and Health PEI;

I am also on the Board of the Canadian Patient Safety Institute and attended the regular meeting in December. This is a great opportunity to be engaged in discussions around leading practices in improving the quality and safety of health services and to talk to leaders in this field from across the country on a regular basis. The primary focus at this meeting was a discussion

around improving physician engagement in patient safety. I am also the Secretary to the Board and consequently participated in the Annual General meeting that was held concurrently.

Other Matters of Interest

There have been some interesting discussions in Nova Scotia, New Brunswick and Ontario on the significant fiscal challenges the jurisdictions are facing and how this is impacting on the funding for their health systems. These concerns were heightened when the Federal Government ended the expected negotiations with respect to the renewal of the Health Accord by committing to 6% until the 2016/17 fiscal year and increases tied to nominal GDP in subsequent years with a minimum guarantee of 3%. All this to reiterate that the fiscal realities faced by jurisdictions across the country will have an impact on the continued evolution of our health systems.

Please ask any questions you might have that I did not cover in my report.

Attachments