

COMMUNIQUÉ



COMMUNIQUE 4th Edition

May 1, 2013

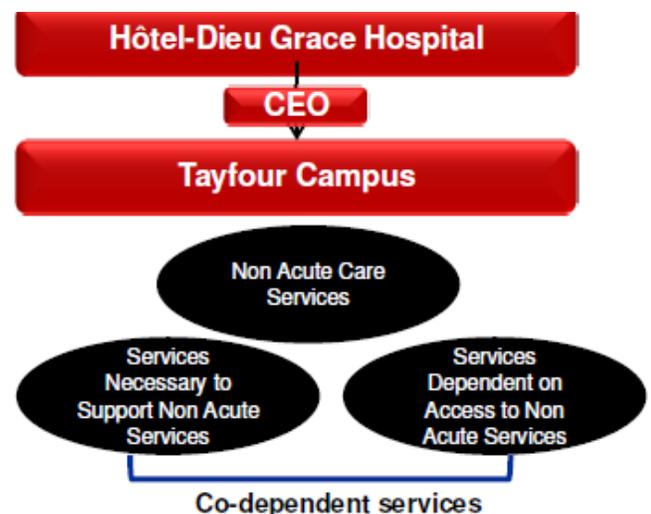
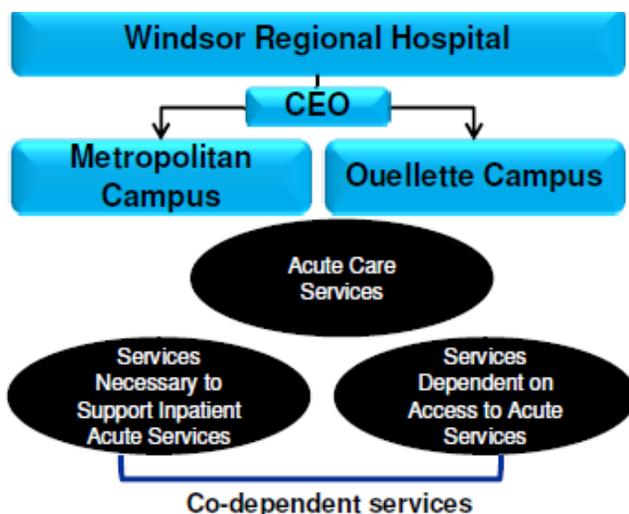
WRH and HDGH Agree on New Interim Operating Model for Realignment

The Steering Committee and Hospital Boards have adopted an “Interim Operating Model” pending the design and operation of the new state of the art acute care hospital. It must be emphasized that no date has been established for the implementation of the interim operating model.

The Interim Model that has now been adopted by the Steering Committee and Hospital Boards is:

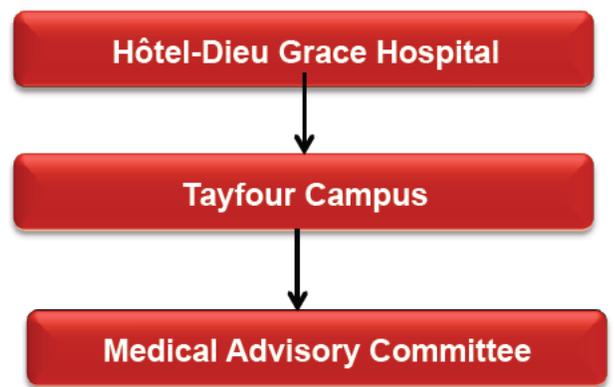
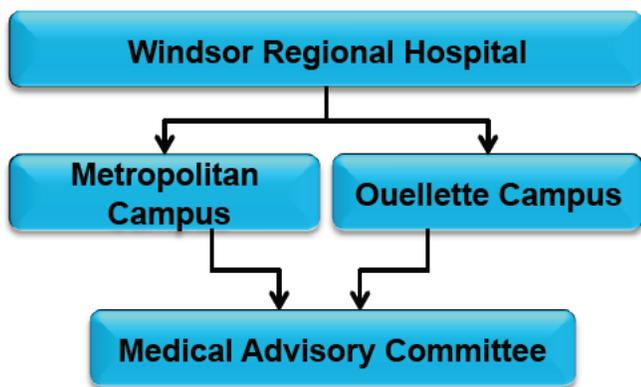
1. **All** programs and services currently located at the Metropolitan and Ouellette Site will be governed, managed and operated by Windsor Regional Hospital;
2. **All** programs and services currently located at the Tayfour Site and related to the programs and services on that site will be governed, managed and operated by Hotel Dieu Grace Hospital;

A date to transition to this Interim Operating Model has not been set.



Note: One exception to the preceding is the crisis program and the related inner city initiative will remain under Hotel Dieu Grace. Further consideration will be given to how mental health services are organized in order to ensure an integrated approach.

The adoption of the interim operating model also affects the clinical governance of programs and services. Therefore, the Windsor Regional Medical Advisory Committee will be expanded and will oversee medical care on both the Metropolitan campus and the Ouellette campus. A new Medical Advisory Committee will be established at the Tayfour Campus reporting to the Board of Hotel-Dieu Grace.



Moving to this Interim Operating Model even before moving to one site makes it possible to:

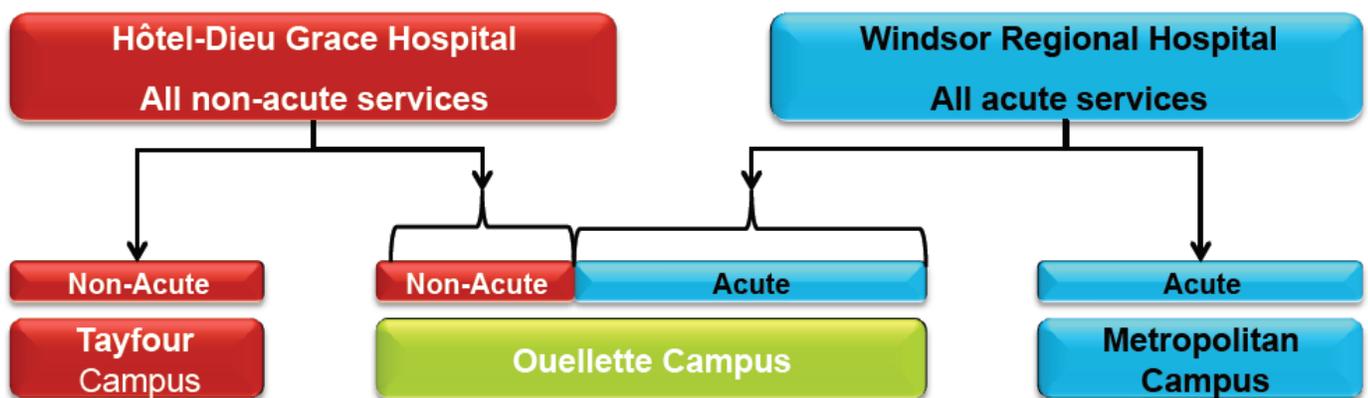
- ✓ Optimize capacity across both sites
- ✓ Re-balance activity across both sites
- ✓ Explore operating efficiencies with a higher critical mass of activity
- ✓ Explore opportunities for improved operating efficiency through economies of scale in administrative and support services
- ✓ Improve coordination and consistency in service delivery
- ✓ Facilitate best practices and models of care and standardization of both clinical and non-clinical processes and practices that have been shown to optimize the efficiency of acute care services
- ✓ Adopt a consistent city-wide approach to patient quality and safety
- ✓ Qualify for increased cancer funding
- ✓ Establish a single professional (medical/dental/midwives) staff structure per hospital corporation
- ✓ A single unified professional staff, unified medical departments and a single Medical Advisory Committee (MAC) that will facilitate improved inter-site access to clinical consultation and clinical technologies
- ✓ Allow for administration and professional staff to make day-to-day operational decisions and Boards to govern with a vision to the future
- ✓ Commence the detailed planning required before the eventual move to a new single acute care site

How did we get here?

Originally, the Working Groups tasked with examining how to realign services between the two hospitals were looking at a “co-location” of both Hotel Dieu Grace Hospital and Windsor Regional Hospital on the current HDGH Ouellette site.

Under this model, WRH would have been responsible for all acute care services on this site, and HDGH would have been responsible for non-acute services until the opening of the new acute care hospital.

The following diagram shows what it would have looked like if the original plan was followed.



The intent here was to mirror the eventual long term plan, whereby Hotel-Dieu Grace Hospital would manage and operate an urgent care centre, some ambulatory services and day surgery at the Ouellette site (“non-acute”) when the new acute care hospital is operational.

However, after careful examination, it was decided that this “co-location” model creates complications and challenges regarding coordination and communication and was not in the best interest of patients, nor would it be operationally feasible. In addition, it would not allow either hospital to make the necessary improvements for the benefit of our community pending the operation of the new acute care hospital.

What happens next?

Each of the seven Working Groups will now use this Interim Operating Model as their basis to make detailed recommendations to the Steering Committee on what needs to be addressed to fully implement this Interim Model.

Again, no date has been established yet for the realignment of program and services under the “interim model.”

All Working Groups (Programs and Services; Professional Staff; Human Resources; Finance; Information Technology; Management Services and Communications) will continue to meet on a weekly basis to discuss strategies towards implementing this interim model.

The goals of the working groups continue to be to review all aspects of operations in their respective areas and to ensure:

- ✓ Safe quality care for our patients in a safe working environment for our employees and professional staff collectively referring to as “staff”;
- ✓ No disruption for patients and staff;
- ✓ Adequate support for our staff; and an
- ✓ Equitable consultative and transparent process.

Once again, questions can be asked on either hospital website or www.windsorhospitals.ca website.

All questions that are posed via one of the Hospital websites or the new www.windsorhospitals.ca site will be posted with answers for all to see. Questions of similar nature may be combined with others to avoid repetition.

As previously communicated, this is “Phase 1”, with the specific objective of due diligence by each of the working groups. “Phase 2” will move forward when the “interim operating model” is implemented and the respective leadership teams have assumed their responsibilities and begin planning for the future of clinical operations and facilities at both acute care sites.

Again, we want to thank all of you for your patience during this process and continuing “business as usual” providing outstanding care and compassion to our patients and families.

Thank you

Ken and David