

Town Hall Meeting-Budget 2010/2011
November 23, 2009

Since I was appointed President and CEO in 2007 we have focused on collectively creating a vision.

A vision that would not settle at being just the best hospital in Windsor. But the best hospital in the province, the nation and across North America.

Some people snickered. Some people said why Windsor?

But in large part most of you agreed and asked

Why not Windsor?

Why not Windsor Regional Hospital?

If the Mayo Clinic can do it in Rochester Minnesota with a population of 40,000 people why can't we do it?

Together we created the vision of Outstanding Care – No Exceptions.

On our journey to achieve this vision we have been leaders in the province and across Canada by being open, accountable and transparent.

Transparency has been in the form of publicly disclosing our patient safety indicators not only internally but externally.

If you recall a couple years ago our handwashing rates were 40%.

As a result of a focused internal and public campaign our rates are the highest in Canada.

This also has led to one of the lowest - if not the lowest central line infection rate - in the world.

That was recognized last week as the best of the best international leading practice for the world to adopt.

We also set a key strategic direction of embedding patient safety and quality in the culture of the hospital.

We have done this by developing practices and procedures to identify, monitor, and address patient safety and quality indicators. This has resulted in advancing our clinical practices and moving towards our goal of not harming any patients.

This too has been identified as an international leading practice.

I can inform you that a turning point in our hospital culture has occurred within the last year.

Before we were recognized for leading practices. But mostly nonclinical. Not to say those are not important – because they are – but I can inform you in the past when I was talking to other healthcare providers I almost had to draw them a map to where our hospital was located.

That has changed.

People not only know where we are located they search us out and want to talk to us about what we are doing both nonclinically and clinically.

Another strategic direction we live by is to enhance our status as an employer of choice.

We are accomplishing this daily by more than just the wages and benefits we provide people. We are accomplishing this by the working environment we are creating.

We have provided many workplace initiatives that not only have been recognized internationally but also make Windsor Regional Hospital a place people want to work.

Another strategic direction we created was to build and sustain financial health.

We are doing that. Two years ago I stood before you to indicate that healthcare funding was making up 50% of the provincial tax revenues. That provincial tax revenues were not growing and funding levels were only 2% a year for the next two years and we better collectively do something about it or otherwise someone would take us over and slash and burn patient services and jobs.

As a result we took a step back from the organization and instead of slashing and burning we relooked at historical budgets and funding. Using the Zero Based Budgeting process we made some tough decisions and changes but have come through them stronger than ever.

The reductions in the NICU beds to historical funded levels resulted in not only receiving funding to open up six more beds it has put on the road to opening 24 and eventually becoming a full level 3 NICU – something we could not do in 25 years of trying.

The next one is the creation of the Utilization Teams. The teams have been working truly as a team to address lengths of stay, admission rates and discharge planning issues.

At a time when our emergency room volumes are at their highest ever, canceling surgeries is now a word we have removed from our vocabulary. In addition, having vacant medical beds benefits everyone and reduces our cost per weighted case – an indicator that has always plagued us and is used by the ministry and IHI to indicate financial efficiency.

A third item flowing from the Zero Based Budgeting process was the non-union reorganization. The end result was a more streamlined, functional and efficient organizational chart.

It resulted in a wage freeze for non union staff and a 5% reduction in non-union staff that included two vice president positions.

It is time to end the fiction, lies and exaggeration that some like to spread and have a real debate.

Only 7% of our staff is non-union. 93% are members of bargaining units.

The total annual salary and benefits for all non-union staff is approximately \$15 million.

The total annual salary and benefits for unionized staff is approximately \$150 million.

All non union staff have had their wage and benefits frozen since April 2009.

My salary was set in 2007 and has not been increased since then. In addition, my old position was one of the two vice president positions that were eliminated. Yes I am paid well.

However, using the same comparison system we use for all our non-union and union positions I am not paid as high as a CEO of a hospital of a similar size across Ontario is paid. At least \$100,000 less. I am not complaining or will you hear me complain about it. However, my salary has never been a secret and has always been announced annually in public disclosures on the Internet and in the media.

I find it interesting that those who question salaries of our staff do not disclose their own and show how their own salary has grown during tough economic times and during times they settle agreements for their members at zero percent.

People in glass houses should not throw stones.

I can inform you that we have ensured that 90% or more of you in this room are paid equal to or more than employees at similarly situated hospitals.

This takes me to the most recent issues we are addressing. These issues are not new.

I wish we were wrong in what we saw coming two years ago.

No one could have seen it getting this bad but we saw it getting worse and we proactively addressed it. Therefore we are in a better position to address the changes that are still to come.

Everyone in this room either has a friend or family member that has lost their job or at a minimum have lost wages, overtime or benefits. Some has lost their homes, declared bankruptcy or had to leave the city to find employment. We cannot allow what happened to the manufacturing industry to happen to healthcare.

Our goal is simple.

Protect patient services and hospital jobs.

The figures are simple.

The province has a \$25 billion dollar deficit.

That is expenses for the province are higher than the revenues they bring in – in the form of taxes by \$25 billion dollars.

Tax revenues continue to drop. The province bailed out the auto industry with payments of \$6 billion this year.

Healthcare makes up 50% of the expenses of the province.

Salaries and benefits make up 65% of our costs – this is identical to every hospital in the province.

As a result – in order for the province to balance its budget something has to give.

At Windsor Regional Hospital if wages and benefits – our biggest cost go up by 2% and our revenues from the province stay at zero or close to zero we have to find \$4 million in savings.

To find \$4 million we will have to look seriously at reducing patient services and hospital jobs.

We do not want to have to reduce patient services or hospital jobs.

Giving Peter a raise to reduce services and as a result layoff Paul does not make sense.

I do not want to be the guy telling everyone six months from now – see I told you so.

What is really bothering me is to hear from even a minority of staff that they do not really care because of their seniority we would never make enough reductions to impact them directly.

Some staff are saying give me my 2% raise and who cares what happens to patient services or my fellow staff member's job or family.

That is a sad commentary.

I invite you to read my mail. I get letters from people we have to lay off from time to time to balance the budget.

People are writing saying they cannot make their mortgage payments or even feed their kids. Maybe if you read one of these letters you would think differently.

I am also disappointed of some people being jealous – again not everyone - of what other people make in wages and benefits. If you want someone else's job then go to school get the necessary education and apply for the job. Otherwise, please stop complaining and being jealous. Do something about it.

If you want to become a nurse go back to school like some have done. If you want to become a Supervisor, Manager or Vice President please look into the education and experience required and apply.

There are currently two Vice President positions open. I have had one internal candidate. Not a long line of internal candidates yet there are some that complain about how they could do the work required of these positions.

For everyone's sake please stop complaining about someone's salary and how you work harder than anyone else in the hospital

Or

That your job is more important than anyone else's

Or

That a hospital cannot run without you and we can just terminate all the managers. It takes all of us to operate a hospital and provide care to patients. Talking like this makes you look very foolish and very petty.

Also if you think the grass is greener outside of the hospital in another institution or private sector please apply. Coming to work at a place you hate is terrible for yourself, your coworkers and also for the patients we take care of.

Hospitals in the Detroit area have been under a pay freeze since 2007. Some of the best hospitals in North America that are located in Detroit have not only frozen wages but also reduced or eliminated pension contributions.

They have done so to preserve hospital jobs. They have agreed that they do not want to see their fellow employee without a job.

Also talking publicly in the halls of this hospital about a suggested pay freeze when the almost two out of ten people in this community are without a job is shameful.

Please be respectful of those we care for.

2 out 10 of them are without a job and many of them would gladly accept a job at Windsor Regional Hospital.

I would ask that if you come across a fellow employee that is participating in this inappropriate behaviour please tell them to stop and that it reflects poorly on them, the hospital and all the other staff.

I am very proud of the majority of employees that are standing up and saying I am proud to work at Windsor regional hospital and I want to protect patient services and hospital jobs – not just my own job.

As we plan for 2010-2011 even as recognized by our local union leaders we are in better position than most hospitals.

The proactive work we have collectively done to this point is the reason why.

Working as team and recognizing the economic challenges our patients, families and friends are suffering from is how we are going to continue to confront these challenges.

As a hospital we cannot unilaterally prevent any wage and benefit increases that have already been awarded or negotiated. In addition, we will continue to negotiate in good faith up to an including proceeding to arbitration under the rules that govern that process.

However, as stated previously, our goal is to preserve patient services and hospital jobs and to be transparent with our staff and community.

Let us continue to develop the reputation we have earned as proactive leaders for the rest of the province to admire.

I can take a few questions. However, when we send out the printed version and video version of this town hall I will send a link for

You to send me an email as we have done in the past. That seems to work well. The difference this time is we are not accepting anonymous questions. I have noticed that some of the most rude and inappropriate email are from those who want to stay anonymous. Again this benefits no one.

Questions ?