

Technology	<ul style="list-style-type: none"> • Dedicated project planning should be conducted well in advance of project kick-off (e.g. six months) • Training of project team members is critical to success • Access to current super users during training is beneficial to facilitate knowledge transfer to staff • Internal resources should be expanded to ensure that team members assigned to projects can be backfilled • Roles and responsibilities for project team members need to be clearly defined, communicated and understood • The local project manager should report to the project sponsor (e.g. CEO) and not functional managers (e.g. CFO) • Managers of impacted areas should be included in the transformation team • Formal project management skills and experience are essential to success. If project management responsibility is assigned to an internal resource, the organization should make an investment in training such as a project management workshop as well as sufficient supporting tools (e.g. project management software)
Integration, Collaboration, and Care Coordination	<ul style="list-style-type: none"> • Dedicated integration facilitators can be extremely beneficial to integrations by providing support for management • Joint learning opportunities should be pursued during the integration stage to ensure consistent knowledge and understanding as well as provide opportunities for team building • A single comprehensive communications strategy supported and shared by all parties will ensure consistency in messaging as well as avoid any gaps • Solutions should focus on improving access across communities, which is the ultimate goal of the integration process • Aspects of the integration process, including the development of organizational models and communication strategies needs to recognize the importance of local decision making • Given the reliance on the community for fundraising and volunteer services it is important to minimize the impact on these key constituents • There is a need to support staff during transition, including specifically focusing on retaining and leverage skills, supporting equity in compensation and offering training and development • The presence of multiple parties requires a clear definition of each party's role and responsibilities • To the extent that savings are realized, the sustainability of the organization would be enhanced through investments in education • Explicit commitments from leadership are essential to successful transition efforts
Clinical Improvements and Standards	<ul style="list-style-type: none"> • Early consultation with employees and union representatives is helpful in reducing resistance to change
Health Human Resources (LEAN)	<ul style="list-style-type: none"> • Identify a small number of strategic priorities and cascade these through the organization • Develop capabilities for improvement across the organization, focused on root cause problem solving and A3 thinking • Ensure structured accountability, support and dedicated resources for improvement initiatives, including the creation of a transformation office, development of an improvement toolkit and approach and a definition of governance and roles • Develop management-level capabilities and standard systems for managing improvement across the organization, including standard tools (performance boards, huddles) • Identify specific improvement initiatives based on selected value streams

Project Name	Community Health Integration Services
Scope	<p>The Community Health Services Integration set out to develop and implement a cluster-based service delivery model with the integration of community health and hospital services within the Northeast Cluster of the Central East LHIN. The area focused on for this initiative was:</p> <ul style="list-style-type: none"> • Haliburton County/City of Kawartha Lakes; and • Northumberland County <p>The components of the initiative for Haliburton County and the City of Kawartha Lakes CHS included:</p> <ul style="list-style-type: none"> • Legal advice for labour harmonization and transitioning the pharmacy provider • Facilitation for the integration planning process • Project management • Information technology and communications • System process improvements • Shared training, education and standards • Literature Review on rural health hub models • Pilot projects
Key Deliverables	<p>Based upon the information shared the following outcomes have been achieved:</p> <ul style="list-style-type: none"> • Improved client access to high-quality services • Created an environment of readiness for future health system transformation • Made the best use of the public's investment
Status and Performance	<ul style="list-style-type: none"> • Anticipated completed date by March 31st, 2014

Project Name	EMR (Electronic Medical Record) implementation and pharmacy automation
Scope	<ul style="list-style-type: none"> • All of the Champlain Small Hospitals have advanced well with their EMR adoption, with over two-thirds of them ready to implement clinical documentation. This sets the stage for electronic sharing of patient information with both regional and community partners. • Capital investment in pharmacy automation, such as unit dose delivery and local drug packaging technology in small hospitals will improve efficiency, patient safety and enable pharmacists to focus more on clinical service and less on dispensing of medications. It also provides the infrastructure needed to support a regional model for pharmacy services. • Each hospital has an equal allocation to support their individual requirement for continued implementation of electronic medical records and/or purchase of capital equipment needed for pharmacy automation.
Key Deliverables	<p>Key deliverables for this project:</p> <ul style="list-style-type: none"> • Demonstrated movement on Health Information Management System Model (Stage 3 and beyond) • Common clinical pathways and adoption of best practices • Optimize shareable patient data among partners • Increased efficiency and quality of clinical documentation • A demonstration of models of shared integration in technology to support quality service delivery
Status and Performance	<ul style="list-style-type: none"> • The hospitals are continuing progress toward the development of their information systems and continue to advance on the HIM Scale. • The hospitals are also progressing with the necessary investments in pharmacy automation infrastructure so that they are ready for the eventual implementation of a regional pharmacy model. • The EMR implementation component of information system development has 2/3 of the hospitals ready to implement clinical documentation. • There is good collaboration and cooperation among the hospitals to maximize purchasing efficiency and sharing of lessons learned with information system implementation.

Project Name	Regional Pharmacy Feasibility
Scope	<p>The goal of the initiative was to conduct a feasibility study to determine the opportunities for a regional pharmacy approach to delivery and coverage of pharmacy services and then develop an implementation plan based on the study's findings.</p> <p>The study examine the aspects of a regional delivery model including:</p> <ul style="list-style-type: none"> • The identification of human resources • Preferred drug distribution model • Mediation management • Capital and technical requirements for the model <p>Additionally, the study will provide recommendations for the regionalization of hospital pharmacy departments including</p> <ul style="list-style-type: none"> • Unit dose distribution • Bedside medication verification • 24 hour pharmacy coverage <p>The project team included the Health Innovations Group and a team of hospital members including Champlain, Almonte and Carlton Place, Kemptville, Arnprior, Renfrew Vic, Deep River, Glengarry, and St. Francis.</p>
Key Deliverables	<p>Quantified Benefits</p> <ul style="list-style-type: none"> • The increased control of the medication supply chain (avoidance of waste) will provide incremental operating savings of approximately \$100,000 to \$200,000. • Inventory savings will provide one time savings of \$12,000. <p>Qualitative Benefits</p> <ul style="list-style-type: none"> • There should be a reduction in medication errors because of enhanced patient safety features of automation and bar coded medication foundational to future bedside applications • Increased bedside time for nursing staff with reduced nursing time on controlled drug count and preparing IV medications
Status and Performance	<ul style="list-style-type: none"> • The second phase of the feasibility study was completed as planned and included the development of a Champlain specific model of regional pharmacy service delivery and a multi-year implementation plan with detailed project milestones and outcome measures.

Project Name	Patient Order Sets
Scope	<ul style="list-style-type: none"> Small hospitals are beginning to roll out three standard order sets, adapted specifically for their unique care environments (congestive heart failure, COPD and stroke) based on Ontario's Quality Based Procedures best practice (as set in the Ministry's clinical handbooks.) These clinical tools will help support best practice care in small and rural hospitals.
Key Deliverables	<p>Key deliverables for this project:</p> <ul style="list-style-type: none"> Demonstrated improvement in performance targets for quality based procedures The integrated adoption of standardized orders sets based on clinical mapping and evidence based best practices Embedded best practices and safety guidelines (Flexibility of content adapt to rural service delivery) Demonstrated strategies for physician and clinician engagement to standardize and improve care
Status and Performance	<ul style="list-style-type: none"> The development of the template for the initial order set took more time than anticipated. Development of the clinical templates continues guided by the provincial QBP handbooks, consultation with regional networks and supported by clinical consultation from regional partners such as the Eastern Ontario Regional Laboratory Service. The order sets are being implemented in alignment with the information systems in each hospital. Patient outcome data will be followed as the implementation proceeds but there is insufficient data at this stage of implementation .

Project Name	Palliative Care Enhancement
Partners	Anson General Hospital, Blind River District Hospital , St. Joseph's General Hospital Elliot Lake, Espanola Regional Hospital , Services de sante de Chapleau Health Services
Scope	<ul style="list-style-type: none"> Additional resources to enhance care coordination for palliative care for local residents in Iroquois Falls, Blind River, Elliot Lake, Espanola, and Chapleau.
Key Deliverables	<ul style="list-style-type: none"> Enhance levels of palliative care provided.
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and projects complete.

Project Name	Laboratory Interface
Partners	Sault Area Hospital and Blind River District Health Centre
Scope	<ul style="list-style-type: none"> Thessalon Hospital (TH) and Matthew's Memorial Hospital (MMH) were transferred to the Blind River District Health Centre (BRDHC) from Sault Area Hospital (SAH). When integrated, a lab interface was required to build an electronic process to provide a more efficient and automated result for all lab tests. This project will focus on building and testing microbiology dictionaries and resolving issues with the third party provider. This will move the lab results from a manual process to an electronic one.
Key Deliverables	<ul style="list-style-type: none"> Build microbiology test dictionaries; Continue resolving issues with Life Lab results; Move the process from manual to electronic
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete.

Project Name	IT Investments in North East Hospitals
Partners	16 North East Hospitals
Scope	<p>IT Investments include:</p> <ul style="list-style-type: none"> • Purchase/Implement 'Point Click Care' • Implementation of wireless service • Physician IT integration • Disaster recovery/mitigation • IT integration (hospital and long term care home); IT Integration • Implementation of Patient Order Sets • Purchase/Implement Meditech EMR viewing of patient data • Purchase Meditech NPR training material • Local DI improvements of core equipment supporting the implementation of a regional Master Patient Index and IMPAX 6.5 • Router upgrade; PCS Implementation ; Glucometer Interface • Purchase and install On Demand Forms Software • Purchase and install firewalls, new computers, and PACS servers • Purchase and install EMR View Stations in Emergency Department • Purchase nursing order sets , 3 interfaces for lab analyzers, NORad PACS capital, nursing station printer, cabling for security monitoring system • Costs associated with NESA
Key Deliverables	<ul style="list-style-type: none"> • Necessary software/equipment purchased • Targeted IT infrastructure development met • Projects completed on time and on budget
Status and Performance	<ul style="list-style-type: none"> • All key deliverables achieved and project s complete.

Project Name	FADS Diagnostic Clinic
Partners	Blind River District Health Centre and Health Sciences North
Scope	<ul style="list-style-type: none"> The FADS Diagnostic Clinic was to increase the number of patients (up to 6 patients per month from the standard 2 patients) seen in an attempt to decrease the wait list which, as of October 2013, was over two years.
Key Deliverables	<ul style="list-style-type: none"> Increase the number of patients seen in the clinic to up to 6 per month
Status and Performance	<ul style="list-style-type: none"> The team was able to bring in 2 additional patients, bringing the total to 20 seen over a three month period. Project is ongoing.

Project Name	OTN in Emergency Department
Partners	Blind River District Health Centre and West Parry Sound Health Centre
Scope	<ul style="list-style-type: none"> Enhance videoconferencing capability in Emergency Department.
Key Deliverables	<ul style="list-style-type: none"> Purchase and install OTN equipment in Emergency Department.
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete.

Project Name	OTN Coordinator
Partners	Blind River District Health Centre
Scope	<ul style="list-style-type: none"> The OTN main suite had recently relocated to the Huron Shores Family Health Team building. As a result, more referrals have been received. The purpose is to provide more replacement time and support to ensure BRDHC continued enhancement of service to patients.
Key Deliverables	<ul style="list-style-type: none"> Ensure services are continued at 2.5 days per week ongoing Financially support the human resources needed to provide OTN services
Status and Performance	<ul style="list-style-type: none"> Key deliverables have been met thus far, multi year project

Project Name	Bereavement Training and Community Awareness Program
Partners	Blind River District Health Centre and St. Joseph's General Hospital Elliot Lake
Scope	<ul style="list-style-type: none"> • Program to provide bereavement training and community awareness for families in Elliot Lake and Blind River.
Key Deliverables	<ul style="list-style-type: none"> • Establish program • Track number of families served and satisfaction
Status and Performance	<ul style="list-style-type: none"> • Key deliverables have been met thus far, multi year project

Project Name	Expansion to Cardiac Rehab Program
Partners	Blind River District Health Centre and Sault Area Hospital
Scope	<ul style="list-style-type: none"> • Cardiac Rehab Program at Sault Area Hospital expanded to ensure that patients from the district have access to service.
Key Deliverables	<ul style="list-style-type: none"> • Expand program to provide service to the entire Algoma District • Number of patients served
Status and Performance	<ul style="list-style-type: none"> • Key deliverables have been met thus far, multi year project

Project Name	Shared Decision support
Partners	Blind River District Health Centre, Espanola Regional Hospital, Manitoulin Health Centre
Scope	<ul style="list-style-type: none"> To support a Decision Support Analyst position shared between three hospitals: Manitoulin Health Center, Espanola Regional Hospital and Blind River Health Center. The Decision Support Analyst will provide the three small hospitals with the ability to ensure quality data, informed decision making, identification of economies of scale and more importantly identify improvements to the patient experience and outcomes.
Key Deliverables	<ul style="list-style-type: none"> Hire decision support analyst Enhance cross sector coordination and transitions of care Provide access to quality evidence based care in small communities Standardized care across all three hospitals
Status and Performance	<ul style="list-style-type: none"> Key deliverables have been met thus far, multi year project

Project Name	Expansion of Congregate Dining
Partners	Blind River District Health Centre
Scope	<ul style="list-style-type: none"> This funding increase would allow an expansion of dining services from four times for 20- 25 clients to 6 times per year. Health promotion, health education and social activities are provided at each congregate dining session as well as transportation to and from the event.
Key Deliverables	<ul style="list-style-type: none"> Expand congregate dining program to provide meals 6 times per year for 20-25 clients
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete

Project Name	Englehart Integrated Health Study
Partners	Englehart and District Hospital
Scope	<ul style="list-style-type: none"> Examination of a community hub model whereby the hospital would be the central access point to the full continuum of care. The feasibility of repurposing existing hospital resources would be examined, which would include a solution to the aging LTCH infrastructure.
Key Deliverables	<ul style="list-style-type: none"> Determine the feasibility of establishing a central point of access to coordinated care (FHT, Hospital, LTC, Retirement, Assisted Living, Mental Health, EMS/DSSAB, Cancer Care, Palliative Care, etc.)
Status and Performance	<ul style="list-style-type: none"> Study currently underway, multi year project

Project Name	Shared Behavioral Support Clinician
Partners	Espanola Regional Hospital, Blind River District Health Centre, Manitoulin Health Centre
Scope	<ul style="list-style-type: none"> BSO clinician for the LTC/Eldcap/hospital and community programs in Espanola and Manitoulin Island and hospital/community in Blind River.
Key Deliverables	<ul style="list-style-type: none"> Reduce patient transfers from LTC to acute or specialized unit for behaviors Delay need for more intensive services, reducing admissions and risk of ALC Reduce length of stay for persons in hospital who can be discharged to LTC with enhanced behavioral resources
Status and Performance	<ul style="list-style-type: none"> Key deliverables currently underway, multi-year project

Project Name	Care Transitions Coach
Partners	Espanola Regional Hospital and West Parry Sound Health Centre
Scope	<ul style="list-style-type: none"> Currently there are some challenges with the effective transition of clients from hospital to CCAC to CSS services. The Care Transitions Coach will be responsible to create an environment where care pathways can be developed, linkages to Primary Care established, and smooth transitions to LTC are established.
Key Deliverables	<ul style="list-style-type: none"> Improved coordination of care Improved connection with primary care and long term care Reduced emergency department admissions
Status and Performance	<ul style="list-style-type: none"> Project deferred until next fiscal, funding reallocated, multi-year project

Project Name	Non-Urgent Inter-Facility Patient Transportation Pilot Project
Partners	Espanola Regional Hospital, Manitoulin Health Centre, Health Sciences North
Scope	<ul style="list-style-type: none"> To test alternative models of non-EMS delivered non-urgent patient transportation in the North East for a 6 month trial period beginning in early 2013.
Key Deliverables	<ul style="list-style-type: none"> Delivery of regularly scheduled and dedicated non-urgent transportation alternatives in rural urban settings To inform the North East non-urgent transportation review that was completed in June 2014
Status and Performance	<ul style="list-style-type: none"> The pilots were extremely successful and have been extended until they can be transitioned into a new non-urgent transportation system/model for the region expected to be implemented in mid-2015.

Project Name	NEON Allergy Project
Partners	Hopital de Mattawa Hospital and NEON
Scope	<ul style="list-style-type: none"> NEON has been attempting to increase the use of the Allergy system, for over 12 months. This is a major upgrade to NEON, using the Allergies 2.0. A part time pharmacist, will be dedicated to assist and support NEON's allergy project and ongoing dictionary support.
Key Deliverables	<ul style="list-style-type: none"> To convert allergies in N01 and N02 Test and Live
Status and Performance	<ul style="list-style-type: none"> Converted allergies in N01 TEST, N02 TEST, N03 TEST, Standards TEST, Sandbox, N01 LIVE, N02 LIVE, N03 LIVE, Standards LIVE

Project Name	Community Based Healthcare Integration
Partners	Hopital de Mattawa Hospital and Community Partners
Scope	<ul style="list-style-type: none"> This funding will assist with the legal and consulting costs incurred as a result of the integration between the Hopital de Mattawa Hospital, and Algonquin Nursing Home.
Key Deliverables	<ul style="list-style-type: none"> Legal and consulting costs for Hopital de Mattawa Hospital, and Algonquin Nursing Home covered.
Status and Performance	<ul style="list-style-type: none"> All key deliverables are complete

Project Name	NEON Advanced Clinical Plan
Partners	Hopital Notre Dame Hospital (Hearst) and NEON
Scope	<ul style="list-style-type: none"> To provide a 5 year ACS Plan for NEON, that includes a first two years (2014/15 to 2015/16) implementation analysis as, at a minimum, all NEON sites strive to achieve EMRAM Level 3.
Key Deliverables	<ul style="list-style-type: none"> Complete plan and submit to NEON and the NE LHIN
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete

Project Name	Meditech Clinical Specialist
Partners	Hopital Notre Dame Hospital (Hearst), Sensenbrenner Hospital, Smooth Rock Falls Hospital
Scope	<ul style="list-style-type: none"> To share resources to help advance our clinical applications to enhance our current Meditech clinical environment with features that will allow us to better utilize our system. Our Meditech Clinical Specialist would work with the three sites to review areas of improvement, standardize operations and allow us to provide better usage of the system for our clinicians thus improving patient care.
Key Deliverables	<ul style="list-style-type: none"> Create a Meditech clinical support model that will aid in supporting, enhancing its current usage and enabling advancements.
Status and Performance	<ul style="list-style-type: none"> The three hospitals Meditech support model was conceived with the same goals of supporting, enhancing, leading and advancements within Meditech to benefit our clinicians within the three organizations. Posting of position was completed. Each site benefited from successful enhancements within Meditech.

Project Name	XERO EMR Viewer for all NORad Partners
Partners	Hopital Notre Dame Hospital (Hearst) and NORad Partners
Scope	<ul style="list-style-type: none"> Members of NORrad who share a regional PAC's system have the ability to interface the AGFA PAC's system with our HIS Meditech EMR module to retrieve patient images. This would allow for our clinicians a seamless transition of patient data / information by linking / interfacing PAC's images with the patients Meditech EMR Data to allow a single point of access saving time for clinicians.
Key Deliverables	<ul style="list-style-type: none"> Improve clinician access to patient data
Status and Performance	<ul style="list-style-type: none"> Xero was successfully purchased and installed for 13 of the 15 sites in LIVE with the patients EMR in Meditech to NORrad Partners. Clinicians are now able to link directly to the patients images including previous images for diagnostic comparison of results.

Project Name	Implementation of Abstracting Software
Partners	Hornepayne Community Hospital and 21 North East Hospitals
Scope	<ul style="list-style-type: none"> This initiative involves the implementation of a shared common system for coding and abstracting for 22 North East Hospitals.
Key Deliverables	<ul style="list-style-type: none"> MED2020 Set Up SFTP Site MED2020 Performs and Tests Conversion MED2020 Installs and Configures DB on Timmins Server MED2020 Develops and Tests batch interface Training Final conversation and merge and go live date March 24, 2014
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete

Project Name	Lab Cluster Specialist
Partners	Hornepayne Community Hospital and 9 North East Hospitals
Scope	<ul style="list-style-type: none"> The NEO Out-Patient review clearly demonstrated a lack of quality and integrity in capturing MIS data which is submitted to MOHLTC. The Cluster has no one monitoring or trained to monitor the integrity of instrument interfaces and is also struggling to retain and maintain trained staff to perform Meditech Super User functions. Failure to do so puts the quality of our lab functions at risk, has the potential to impact patient safety, and may ultimately impact Lab Licensing. The new position will not only help mitigate these risks, it will help with the standardization of MIS data amongst the group and help with comparability.
Key Deliverables	<ul style="list-style-type: none"> Hire two 0.5 TE Lab Cluster IT Specialists Lab Cluster IT Specialists to monitor the integrity of instrument interfaces and perform Meditech Super User functions.
Status and Performance	<ul style="list-style-type: none"> Key deliverables in process, multi-year project

Project Name	IT Integration with Health Sciences North
Partners	Hornepayne Community Hospital and Health Sciences North
Scope	<ul style="list-style-type: none"> To integrate HCH's IT with Health Science North (HSN).
Key Deliverables	<ul style="list-style-type: none"> Replacement of all current hardware located at HCH Active Domain Services-user accounts HSN service desk for all IT related issues Storage for individual users (Home drives) Minimum of 2 onsite visits yearly
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete

Project Name	Physiotherapy
Partners	Hornepayne Community Hospital
Scope	<ul style="list-style-type: none"> Funding will go towards 0.4 (FTE) of a full-time physiotherapist for Hornepayne (the remaining 0.6 FTE will be funded through the Ministry of Health and Long Term Care Physiotherapy Reform). The physiotherapist will be housed in hospital and will provide ongoing preventative care for over 75 patients/residents per year (inpatients, outpatients, long term care, and community).
Key Deliverables	<ul style="list-style-type: none"> Hire a physiotherapist Provide service to 75 individuals per year (inpatients, outpatients, long term care, and community)
Status and Performance	<ul style="list-style-type: none"> Physiotherapist hired 58 individuals served to date Key deliverables still in process, multi-year project

Project Name	Mental Health Counsellor
Partners	Hornepayne Community Hospital and Services de Counselling Hearst-Kapusking-Smooth Rock Falls (SCHKS)
Scope	<ul style="list-style-type: none"> A full-time mental health counsellor (1.0 FTE) to be located in Hornepayne Community Hospital (HCH) and professionally supported by Services de Counselling Hearst-Kapusking-Smooth Rock Falls (SCHKS). This position will provide ongoing mental health services to over 75 Hornepayne residents (inpatient, outpatient, long term care, Francophone).
Key Deliverables	<ul style="list-style-type: none"> Negotiate service agreement Hire MH counsellor Bi-annual MH counsellor performance review 75 individuals served per year
Status and Performance	<ul style="list-style-type: none"> Service agreement negotiated MH counselor hired 26 individuals served to date Key deliverables still in process, multi-year project

Project Name	Quality Based Procedures- Clinical Steering Review
Partners	Kirkland and District Hospital and 24 North East Hospitals
Scope	<ul style="list-style-type: none"> The Hay Group was asked to facilitate additional engagement sessions in the NE LHIN to gather input from the CEO's and clinicians all hospitals. A supplementary analysis of inappropriate referrals to Health Sciences North was also conducted. The analysis was to determine if surgical cases referred to Health Sciences North could have been managed at the local hospital.
Key Deliverables	<ul style="list-style-type: none"> Conduct additional CEO and clinician engagement sessions Complete supplementary analysis of inappropriate referrals to HSN
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete

Project Name	Integration of Timiskaming Palliative Care Network
Partners	Kirkland and District Hospital and Timiskaming Palliative Care Network
Scope	<ul style="list-style-type: none"> The purpose of this funding is to cover costs associated with the integration of Timiskaming Palliative Care Network under Kirkland and District Hospital.
Key Deliverables	<ul style="list-style-type: none"> Audit review Staffing costs Other costs (i.e. insurance, telephone, travel, volunteer recognition, office expenses)
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete

Project Name	Implementation of a Common IT System
Partners	Kirkland and District Hospital, Temiskaming Hospital, Englehart and District Hospital
Scope	<ul style="list-style-type: none"> The projects to move this IT integration forward include: Embosser Replacement, e-Front Learning Management System, Medworxx, Netfacilities, Risk Management Software with interface, and Occupational Health Software.
Key Deliverables	<ul style="list-style-type: none"> Implement all projects listed above
Status and Performance	<ul style="list-style-type: none"> All key deliverables achieved and project complete

Project Name	Project Coordinator- North East Rural Communities Framework
Partners	Lady Dunn Health Centre and 14 community agencies/stakeholders
Scope	<ul style="list-style-type: none"> Funding will be used to hire a project coordinator to implement the North East Rural Communities Framework for Improved Health System Coordination in the Wawa Area (Wawa, Michipicoten First Nation, Missanabie, Hawk Junction, Dubreuilville, White River) as a pilot project. This process will lead the community to develop strategies to address local health system issues, and implement a model for improved health system coordination
Key Deliverables	<ul style="list-style-type: none"> Hire project manager Develop work plan Assess current state Determine opportunities for improvement Develop action plan Implement action plan Monitor, adjust, evaluate
Status and Performance	<ul style="list-style-type: none"> Key deliverables in process, multi-year project

Project Name	North East Joint Assessment Centre (NE JAC) Expansion
Partners	Manitoulin Health Centre, West Parry Sound Health Centre Sault Area Hospital, Timmins and District Hospital, Health Sciences North
Scope	<ul style="list-style-type: none"> This funding will go towards the expansion of the NE JAC program in North East hospitals to increase service levels and decrease wait times.
Key Deliverables	<ul style="list-style-type: none"> Wait time less than or equal to 90 days Increase percent choosing next available surgeon Maintain or increase patients seen in assessment center 100% of primary joints receiving surgery seen at NE JAC
Status and Performance	<ul style="list-style-type: none"> Key deliverables in process, multi-year project

Project Name	NEON Conversion Plan
Partners	Manitoulin Health Centre, North Bay Regional Health Centre, Sault Area Hospital
Scope	<ul style="list-style-type: none"> One of the key barriers for NBRHC and SAH to participate in NEON is the need to convert their respective organization's Meditech data into the live NEON HCIS. An RFP was executed to select a consultant to complete a business case, risk analysis, privacy impact analysts and implementation plan for data conversion activities.
Key Deliverables	<ul style="list-style-type: none"> Consultant hired Report Complete
Status and Performance	<ul style="list-style-type: none"> Key deliverables achieved and project complete

Project Name	QBP Module Implementation
Partners	Manitoulin Health Centre and 22 North East Hospitals
Scope	<ul style="list-style-type: none"> Patient Order Sets hired to assist with hospital QBP implementation including POS, change management, and technical support.
Key Deliverables	<ul style="list-style-type: none"> All small hospitals have required POS implemented
Status and Performance	<ul style="list-style-type: none"> Key deliverables in process, multi-year project

Project Name	Tele-Ophthalmology
Partners	Manitoulin Health Centre and Community Partners
Scope	<ul style="list-style-type: none"> To restore and expand the delivery of Tele-Ophthalmology in order to provide services such as screening for retinopathy and macular edema in diabetic patients. This funding is in alignment with NE LHIN and provincial priorities to coordinate local and regional services to the adult and aboriginal diabetes population.
Key Deliverables	<ul style="list-style-type: none"> Expand the delivery of Tele-Ophthalmology
Status and Performance	<ul style="list-style-type: none"> Key deliverables in process, multi-year project , 2013-14 funding reallocated towards Senior Friendly Hospital and Palliative Care Training

Project Name	Integrated Discharge Planning
Partners	Manitoulin Health Centre and Community Partners
Scope	<ul style="list-style-type: none"> To support 1 FTE to be involved in integrated discharge planning for all patients discharged from the Manitoulin health Center, as well as to coordinate service plans for clients transitioning back to the community in need of support. This position would ensure that service planning encompasses all available community services in the area, including on-reserve community support services and home support services.
Key Deliverables	<ul style="list-style-type: none"> Hire 1 FTE integrated discharge planner Develop work plan Implement work plan
Status and Performance	<ul style="list-style-type: none"> Key deliverables in process, multi-year project, 2013-14 funding reallocated towards Senior Friendly Hospital and Palliative Care Training

Project Name	Hub Quality and Integration Lead
Partners	Manitoulin Health Centre and Community Partners
Scope	<ul style="list-style-type: none"> To support the implementation of a Hub model for Manitoulin Island over 3 phases as outlined in key deliverables.
Key Deliverables	<ul style="list-style-type: none"> Project coordinator- creation of collaborative agreements with service providers and Integrated Quality Improvement planning; Care Pathway modeling and design, data standardization, service mapping; Implementation
Status and Performance	<ul style="list-style-type: none"> Key deliverables in process, multi-year project, 2013-14 funding reallocated towards Senior Friendly Hospital and Palliative Care Training

Project Name	Senior Friendly and Palliative Care Training
Partners	Manitoulin Health Centre
Scope	<ul style="list-style-type: none"> Through this funding, MHC staff will obtain specialized training in SFH best practices to assist with the implementation of the various initiatives outlined in their SFH Improvement Plan . Palliative Care training will assist MHC staff with providing an enhanced level of care to Palliative patients within their facility.
Key Deliverables	<ul style="list-style-type: none"> Complete SFH training Complete Palliative Care training
Status and Performance	<ul style="list-style-type: none"> Key deliverables achieved and project complete

Project Name	Seniors Quality Care Project
Partners	Services de sante de Chapleau Health Services
Scope	<ul style="list-style-type: none"> Through SSCHS' Senior Quality program, SSCHS will develop and implement an ELDCAP Residents' First Quality Plan; train staff in the use of a selected delirium screening tool; implement Senior Friendly initiatives across the hospital; and develop, train, and implement clinical restorative care programs in long term care.
Key Deliverables	<ul style="list-style-type: none"> Implement Residents' First Quality Plan Train staff in the use of selected delirium screening tool Implement SFH initiatives Develop, train, and implement clinical restorative care programs in LTC
Status and Performance	<ul style="list-style-type: none"> Key deliverables achieved and project complete

Project Name	Palliative Care
Partners	Services de sante de Chapleau Health Services
Scope	<ul style="list-style-type: none"> Enhancing palliative care services within Services de santé de Chapleau Health Services to ensure local access for Chapleau Area patients and families.
Key Deliverables	<ul style="list-style-type: none"> Increase number of individuals served Train 1-2 nurses in palliative care
Status and Performance	<ul style="list-style-type: none"> Key deliverables achieved and project complete

Project Name	Seniors Mental Health Worker
Partners	Services de sante de Chapleau Health Services
Scope	<ul style="list-style-type: none"> • Hire a part-time (0.5 FTE) seniors mental health worker as pilot project which will assist 40 seniors who are living with mental illness to remain in their homes. This project will support seniors to engage in social and physical activities to promote social integration and prevent deterioration. The funding will also support care-givers by providing them with coping strategies.
Key Deliverables	<ul style="list-style-type: none"> • Hire 0.5 FTE • Promote program to HSPs for referrals and community promotion for self-referral • Demonstrate positive outcomes of the program
Status and Performance	<ul style="list-style-type: none"> • 0.5 FTE hired • 5 individuals served to date, 24 units of service • Key deliverables in process, multi-year project

Project Name	Physiotherapy
Partners	Services de sante de Chapleau Health Services
Scope	<ul style="list-style-type: none"> • Funding will go towards 0.4 (FTE) of a full-time physiotherapist for the Chapleau Area (the remaining 0.6 (FTE) will be funded through the Ministry of Health and Long Term Care Physiotherapy Reform). The physiotherapist will be housed in hospital and will provide ongoing preventative care for over 80 patients/residents per year (inpatients, outpatients, long term care, and community).
Key Deliverables	<ul style="list-style-type: none"> • Hire physiotherapist • 80 individuals served per year (inpatients, outpatients, long term care, and community)
Status and Performance	<ul style="list-style-type: none"> • Key deliverables in process, multi-year project

Project Name	Oncology
Partners	Services de sante de Chapleau Health Services
Scope	<ul style="list-style-type: none"> Enhancing oncology services within Services de santé de Chapleau Health Services to ensure local access for Chapleau Area patients and families.
Key Deliverables	<ul style="list-style-type: none"> Increase number of individuals served Enhance partnership with Cancer Care Ontario Train 1-2 nurses in oncology
Status and Performance	<ul style="list-style-type: none"> Key deliverables achieved and project complete

Project Name	Fort Albany Geriatric Clinic
Partners	Weeneebayko Area Health Authority, North East Local Health Integration Network, North East Specialized Geriatric Services, Peetabeck Health Services.
Scope	<ul style="list-style-type: none"> This funding will support the initial costs surrounding the research and development of a pilot project for a geriatrics clinic situated in the community of Fort Albany First Nation. The development committee includes the North East Local Health Integration Network, North East Specialized Geriatric Services, Weeneebayko Area Health Authority and Peetabeck Health Services.
Key Deliverables	<ul style="list-style-type: none"> Research and implement pilot project
Status and Performance	<ul style="list-style-type: none"> Key deliverables achieved and project complete

Project Name	BSO Resources in Small Hospitals
Partners	West Nipissing General Hospital
Scope	<ul style="list-style-type: none"> West Nipissing Hospital must be connected to the BSO network and must serve the Hospital, the Interim Beds AU Chateau and the community. It is expected that the BSO resource will assist West Nipissing Hospital and Au Chateau to accept patients with behavioural issues.
Key Deliverables	<ul style="list-style-type: none"> Reduced patient transfers from LTCH/Interim Beds to acute care or specialized unit for behaviours Increased number of patients with behaviour issues admitted to the Interim Beds at West Nipissing Hospital Reduced length of stay for persons in hospital who can be discharged to a LTCH with enhanced behavioral resources
Status and Performance	<ul style="list-style-type: none"> All key deliverables in process, multi-year project

Project Name	Telemedicine Expansion
Scope	<ul style="list-style-type: none"> • Purchase and installation of telemedicine equipment in a variety of hospital and community settings. • Project is intended to expand the utilization of telemedicine services as the Project involves putting equipment into locations that currently have limited or no access to telemedicine equipment. • Project in intended to improve patient quality of care, access to care and reduce the need for patient travel.
Key Deliverables	<p>Key Deliverables:</p> <ul style="list-style-type: none"> • Faster access to care improves health outcomes. • As for client centeredness, increased access in the community would decrease the patient's need to leave family and home to receive care. • Based on feedback from current experiences of patients, the patient experience is greatly improved. The technology is proven to be safe and effective. • By providing Telemedicine options to a larger group of the population, there is a greater opportunity for those in compromised populations to access health care. • .Increased access health care is an understood and proven benefit of increased use of Telemedicine for both acute and chronic are patients. • Increased access to Telemedicine allows for the provision of care in a more timely fashion and is more flexible to patients' needs. • Along with the benefits to the patient, increased access to Telemedicine will help to leverage this technology to provide better service coordination between providers by creating linkages to a larger group of health service providers and community resources. This coordination will also serve to strengthen local health hubs and overall quality of care provided to the individual patient.
Status and Performance	<ul style="list-style-type: none"> • No status and/or performance updates were identified

Project Name	Integrated Project Management
Scope	<ul style="list-style-type: none"> • Development and implementation of a LHIN wide Project Management Office and Decision Support service for all hospitals in the LHIN. • Project will provide small hospitals and select community service providers with access to project management and decision support resources that traditionally would not be available to smaller HSPs. • This project will provide the HSPs resources required to make evidence based informed decisions and implement projects at to the standard expected by the LHIN. • These skills and capacities are required for the HSPs to be able to actively participate in the transformation initiatives underway in the LHIN including the implementation of the North West LHIN Health Services Blueprint and the development of Health Links.
Key Deliverables	<p>Key Deliverables:</p> <ul style="list-style-type: none"> • Service quality will be improved at all hospital and partner sites through the appointment of specific, subject matter experts in each of the noted areas. Safety, effectiveness, and staff and client experience is improved through standardization, elimination of duplicated efforts researching and then implementing leading industry practice • All small, rural northern hospitals and partnered agencies will <ul style="list-style-type: none"> • have access to leading practice in the specified areas regardless of availability to local human or fiscal resources • have improved access to a more robust and contemporary service through this proposed model • Be able to leverage the specialized subject matter expertise in this model
Status and Performance	<ul style="list-style-type: none"> • No status and/or performance updates were identified

Project Name	Medication Management
Scope	<ul style="list-style-type: none"> • Purchase of asset and process redesign required to advance closed loop medication. • This project will significantly advance 11 of 13 hospitals in the LHIN towards the implementation of closed loop medication. • The implementation of closed loop medication management has been proven to virtually eliminate medication errors. Medication errors have a significant impact on the quality of care and patient outcomes. • This project will provide participating hospitals with the equipment and required process redesign to implement closed loop medication management.
Key Deliverables	<p>Key deliverables:</p> <ul style="list-style-type: none"> • Will be improved at all participating hospitals through the introduction of the equipment, software, processes and procedures required to support automated medication management
Status and Performance	<ul style="list-style-type: none"> • No status and/or performance updates were identified

Project Name	Community Wide Scheduling
Scope	<ul style="list-style-type: none"> • Expansion of scope of community wide scheduling to additional hospitals. • Through this project, the participating hospitals will be able to complete online booking and scheduling for appointments using an electronic solution. • This solution will allow participating hospitals to book appointments at other sites for diagnostic tests and consultations more efficiently. Currently, scheduling is completed via phone or fax which is inefficient and untimely for both the patient and referring facility. • This project will allow the referring hospital to complete book the appointment(s) for the patient immediately and coordinate appointments where multiple diagnostic tests or consults are required.
Key Deliverables	<p>Key deliverables:</p> <ul style="list-style-type: none"> • Meditech CWS would provide solid client-centric service and improved service quality for the following reasons: • Work with a single patient's appointment history and upcoming appointments. Potential to schedule appointments at the same time for various different areas (lab, DI, clinics, etc.) to optimize patient travel and/or specialist travel between all six participating hospital organizations • Primary care practitioners can see the status of ambulatory care bookings for the patient, and know the status of test bookings, etc. • Benefit to workers being able to see scheduling availability at different facilities. • With all staff using the same patient scheduling system, there are synergies in group/mutual training activities and technical support functions
Status and Performance	<ul style="list-style-type: none"> • No status and/or performance updates were identified

Project Name	Obstetrical Training
Scope	<ul style="list-style-type: none"> • Dedicated obstetrical services training for new nurses and enhanced training for existing staff. • Through the project, 4 recently recruited registered nurses will receive a one week orientation at a partnering hospital within an obstetrical unit. This training will allow the nurses to participate in a high volume and wide array of obstetrical services. • Additionally, other nursing staff will complete a continuing education course related to obstetrical services. • The combination of these initiatives provides the HSP with the human resources required to safely provide basic obstetrical services in the community.
Key Deliverables	<p>Key deliverables:</p> <ul style="list-style-type: none"> • RNs and MDs will be oriented and educated to the practice of delivering babies at the Red Lake Hospital • Low risk patients will receive safe care for themselves and newborns provided by competent health care providers • Service will be of a high quality and lead to a positive experience for the patient and family • Labour and delivery experience can be more individualized, supportive, reassuring and overall more effective • Appropriate orientation and education will lead to early identification of risk • Less travel for patients
Status and Performance	<ul style="list-style-type: none"> • No status and/or performance updates were identified

Project Name	Knowledge Transfer Exchange
Scope	<ul style="list-style-type: none"> • Participation of hospitals in the LHIN and provincial knowledge transfer and exchange session. • This project will allow the hospitals to share experiences and lessons learned related to these projects with stakeholders including other hospitals, LHINs and the MOHLTC.
Key Deliverables	<ul style="list-style-type: none"> • No key deliverables were identified
Status and Performance	<ul style="list-style-type: none"> • No status and/or performance updates were identified

Project Name	North Hastings IT Refresh
Scope	<ul style="list-style-type: none"> • This project builds upon the success of the QHC 2013-14 small hospital funding. • It is an improvement initiative identified through the “Improving the Patient Journey” LEAN analysis. • he project involves a refresh of the North Hastings hospital IT and telecommunications equipment in order to allow NHH to fully adopt the benefits of the rollout of the QHC eHealth plan and to enhance internal communication and communication with community partners.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Access to core acute • Collaboration with Community Services • Improve Quality, Safety and Value
Status and Performance	Expected completion date by March 31 st , 2015

Project Name	North Hastings Hospital Infection Control Microfiber Cloth Washer/Dryer
Scope	<ul style="list-style-type: none"> • This project builds upon the success of the QHC 2013-14 small hospital funding. It is an improvement initiative identified through the “Improving the Patient Journey” LEAN analysis. • The project involves a refresh of the North Hastings hospital IT and telecommunications equipment in order to allow NHH to fully adopt the benefits of the rollout of the QHC eHealth plan and to enhance internal communication and communication with community partners.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Health Links • Collaboration with Community Services • Meet needs for post-acute/palliative care • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st 2015.

Project Name	North Hastings Hospital Diagnostic Imaging
Scope	<ul style="list-style-type: none"> • This project also builds upon the success of the QHC 2013-14 small hospital funding. It is an improvement initiative identified through the “Improving the Patient Journey” LEAN analysis. • The project will see the addition of 1 full time evening x-ray technician. • This resource will reduce the need for DI patient transfers at NHH.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Access to Core Acute • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st 2015.

Project Name	North Hastings Hospital Security Coverage
Scope	<ul style="list-style-type: none"> • This project also builds upon the success of the QHC 2013-14 small hospital funding. It is an improvement initiative identified through the “Improving the Patient Journey” LEAN analysis. • The project will see the addition of evening security coverage at NHH to support security for clinical programs during this time.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Access to Core Acute • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • No status/performance information was provided.

Project Name	North Hastings Cardiology ECG Patient ID
Scope	<ul style="list-style-type: none"> • This project also builds upon the success of the QHC 2013-14 small hospital funding. It is an improvement initiative identified through the “Improving the Patient Journey” LEAN analysis. • The project will implement an ECG Barcode Patient ID system for patient registration and transmission to PACS.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Access to Core Acute • Collaboration with Community Services • Meets needs for post – acute/palliative services • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st 2015.

Project Name	Electronic Discharge Summary
Scope	<ul style="list-style-type: none"> • This project involves implementation of electronic discharge summary technology resulting in timely completion of discharge summaries, greatly increased accuracy, increased ability to share discharge summaries quickly.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Health Links • Access to Core Acute • Collaboration with Community Services • Meets needs for post – acute/palliative services • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st 2015.

Project Name	Dietary Information System
Scope	<ul style="list-style-type: none"> • This project initiative will be implementing a dietary system at the Lennox & Addington County Hospital to increase the quality of service to our convalescent care, acute and ambulatory patients. • Implementing this system will reduce waste by providing our dietary services with a tool to better track, change and process nutritional requests. • In addition, we will be implementing the cafeteria staff payroll deduction module. This is intended to raise revenues and staff satisfaction by providing easier access to cafeteria food without cash on hand.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Meet needs for post – acute/palliative services • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is August 31st 2014.

Project Name	LEAN Promotion and Education
Scope	<ul style="list-style-type: none"> • The Lennox & Addington County General Hospital is in the process of developing a lean culture to preserve the future viability of our organization and the health care system. LACGH has successfully used the lean methodology over the past two years to correct problems and make processes more efficient. LACGH will further develop the lean culture over 2014/2015 by upgrading some of our green belt staff to black belt certification, and by training a new group of people in the Lean methodology. • LACGH believes that a road to a better health care system is dependent on collaboration and cooperation with our community partners. To achieve better cooperation and collaboration LACGH will offer 50 percent of the available seats to its community partners.
Key Deliverables	<p>The anticipated benefits of the project are:</p> <ul style="list-style-type: none"> • As a result of this arrangement, multiple Lean projects will be created to obtain certification. Participants will be expected to choose topics that will benefit both the partner and the hospital. This approach is intended to build inter-organizational relationships that will last for years. • The short term benefit will be more efficient processes that will be created through the specific projects. • The LHIN will benefit from this project by creating 18 more “Lean mean efficiency creating machines” that will promote the lean methodology and contribute to the system as a whole.
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st 2015. This includes training within the period of April 2014 to August 2014.

Project Name	Business Intelligence Solution
Scope	<ul style="list-style-type: none"> • Lennox & Addington County General Hospital will be implementing Healthcare BI Solution for Lennox-Addington County General Hospital which will provide an elegant combination of ETL (Extract, Transform and Load) and Business Intelligence to support the current needs for analyzing and monitoring data. • As future BI initiatives are undertaken, it also offers a foundation for extended BI capabilities to deliver readily-available, consumable information from the disparate systems implemented at Lennox-Addington County General Hospital made available to internal and external stakeholders. • The initial focus for this project will be to develop clinical indicators combining data from CIHI Meditech Rics Med2020 and CCAC • To accelerate the implementation and delivery of valuable information, we will be implementing an identical solution to numerous other Ontario hospitals (including QHC/Quinte General Hospital). • Data modeling and report templates will be replicated when possible for comparative data and collaboration. • Our internal resource will endeavor to develop a relationship with the Quinte BI team to share work and lessons learned.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Health Links • Collaboration with Community Services • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st 2015.

Project Name	Hospice Integration
Scope	<ul style="list-style-type: none"> • In November 2013 the local Hospice was required to integrate with another health service provider. Hospice Lennox and Addington (HLA) decided that Lennox and Addington County General Hospital would be the flow through for the HLA MSA. • In an effort to enhance end of life services, LACGH would like to enhance the new integration partnership by introducing and developing a comprehensive end of life program in the hospital. • This program would include education, on site psychosocial support, a resource library and service enhancement to clients and their families. HLA has a wealth of valuable knowledge and expertise that could benefit staff, patients and families during a difficult period in their life.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Collaboration with Community Services • Meet needs for post – acute/palliative services • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is January 31st 2015.

Project Name	Clinical Modality Integration with Content Management System
Scope	<ul style="list-style-type: none"> • During our last 12 months, L&A have leveraged the small hospital funding program to align our health records department with a “new electronic world” • Through this process we have identified some efficiencies that will only be achieved by integrating our remaining pieces of electronic data in a single system. Therefore, we will be working on integrating ECG’s, telemetry, Vital Signs, PFT’s, and stress test results into the Hyde media platform. This will enable us to reduce filing, increase accessibility to information, and deliver more content to the CDR.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Organizational Sustainability • Access to Core Acute • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is January 31st 2015.

Project Name	iCART (Integrated Community Assessment and Referral Team)
Scope	<p>Services Roadmap for the SE LHIN, iCART objectives include:</p> <ul style="list-style-type: none"> • Providing a system navigation mechanism for HSPs to assist with sustaining people in the community • Improve awareness of and access to an appropriate range of community supports • Enhancing timely and effective communication during transition points • Establish and streamline processes for referrals between providers <p>The project will support the implementation of:</p> <ul style="list-style-type: none"> • A centralized information and referral source supporting community service delivery and service coordination to create better care • Innovative use of navigators to work directly with clinicians, individuals and families and foster access to required services • Information and education strategy to inform all health care providers
Key Deliverables	<p>Benefits to the healthcare system include:</p> <ul style="list-style-type: none"> • Improved service coordination will support community service delivery, resulting in better care, increased system efficiencies and improved client outcomes through transitions and hand-offs • A better informed and collaborative health care system in the SE LHIN • A centralized navigation system will foster relevant communications across the hospital-community and among all HSPs • Supports flow during patient transitions within restorative care programs
Status and Performance	<ul style="list-style-type: none"> • No status/performance information was provided.

Project Name	Medworxx Learning Management System
Scope	<ul style="list-style-type: none"> • The Medworxx Learning Management System (LMS) supports the development, management and delivery of classroom and online learning, with associated reporting and compliance tracking capabilities. • Medworxx LMS leverages the Medworxx Content Management System engine to create, distribute, archive, manage, track, and administer enterprise-wide healthcare learning solutions. • The delivery of quality patient care and providing the highest level of patient safety requires healthcare workers to be knowledgeable. The Medworxx LMS ensures the right course or content is delivered to the right student at the right time, in the proper format. Increasingly, hospitals are required to demonstrate compliance with regulatory requirements. Audited employee accreditation is mandatory.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Action Plan • Organizational Sustainability • Health Links • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st 2015

Project Name	Regional Shared Voice Activated Transcription for Radiology
Scope	<ul style="list-style-type: none"> The project is to allow Quinte to expand their voice activated transcription platform to include PSFDH. This has already occurred with Lennox and Addington County General Hospital. Costs would be approximately \$77,000 to include interfaces, training, licenses, and testing. Timely access to support quality patient care. Software utilized would be Speech Q and made available to 3 radiologists at PSFDH.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> Action Plan Organizational Sustainability Health Links Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> The estimated timeline for completion is June 30th 2015.

Project Name	Net Delivery Software Expansion Project
Scope	<p>Use of Net Delivery Software – two augmented uses of the software would support regional responses to improving patient care and both relate to the sharing of data from the Hospital to primary care practitioners in the catchment area.</p> <ul style="list-style-type: none"> • The project would involve the creation of a Meditech report which would be automatically sent to the primary care provider at the time of discharge. This would support the primary care community in meet their targets of seeing the discharged patient within 7 days of discharge from an acute care facility. • The project would involve the automation of reports going to primary care practitioners following a patient's stay in acute care. Currently lab, diagnostic imaging and Health Records reports are mailed to practitioners. This information is not always sent in a timely fashion, increases risk of confidentiality breaches, are costly from a human resources, envelopes and stamps perspective and does not contribute to seamless, timely, and patient focused care. The Rideau–Tay Health Link is asking for timely information to support
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Action Plan • Organizational Sustainability • Health Links • Access to Core Acute • Collaboration with Community Services • Meet needs for post – acute/palliative services • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is December 31st 2014.

Project Name	LEAN Training
Scope	<ul style="list-style-type: none"> • In keeping with the Hospital's new strategic plan to implement LEAN throughout the organization; the first steps will be to educate staff about the principles and begin the change of culture which would see all staff assess all processes for value and potentially for waste. • Concepts such as time spent doing something incorrectly versus inspecting and fixing errors. The idea of overproduction, doing more than is required or sooner without the added value. • Investigating unnecessary transportation of goods or services, the impact of waiting, the loss of human potential by not engaging employees, listening to their ideas or supporting their ideas for change. Excesses in inventory increase financial costs due to expiration dates, storage and other factors. • Also in a multi-site hospital the concepts of unnecessary movement of staff and doing work that is not value added would begin to be assessed with any "waste" being seen as a potential for financial and/or human resource savings. • The project will require a project manager and training for over 500 staff.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Action Plan • Organizational Sustainability • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is March 31st, 2015

Project Name	Tape Data Backup Upgrade
Scope	<ul style="list-style-type: none"> • Upgrade ageing tape backup infrastructure to support modern virtual infrastructure and to incorporate offsite replication for faster data recovery. • Improvements in this process would augment patient confidentiality by reducing the risk of moving back up tapes from site to site and would be the first step to removing tape altogether.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Action Plan • Organizational Sustainability • Health Links • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is June 31st 2014

Project Name	PC Replacement
Scope	<ul style="list-style-type: none"> • Replacement of outdated fleet of Windows XP PCs, notebooks and unsupported thin clients. • This will allow for operating system (OS) standardization, security hardening, energy efficiencies, a standard and more efficient user experience and support standardization. • Updated devices in clinical areas would allow physicians and nurses access to the internet and specifically support their access to PatientOrderSets.com. The alliance with PatientOrderSets.com is new for the Hospital focusing on evidence based practice. • The new devices would also allow staffs who work 24/7/365 to access education modules during their worked shifts.
Key Deliverables	<p>This initiative meets the following objectives set out within the domain as directed by the MOHLTC for the Small Hospital Transformational Fund program;</p> <ul style="list-style-type: none"> • Action Plan • Organizational Sustainability • Health Links • Improve Quality, Safety and Value
Status and Performance	<ul style="list-style-type: none"> • The estimated timeline for completion is June 31st 2014

Project Name	Citrix Upgrade
Scope	Citrix software will provide for a better clinical user experience. It will mean clinicians can access patient information faster and more reliably.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety, quality, sustainability, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	7-24 Down Time Viewer
Scope	Patient care and safety are enhanced during system downtimes by minimizing information and workflow disruption.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety, quality, sustainability, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Medication Distribution for the Inpatient Areas
Scope	A secure and efficient portable medication system. This funding will support improved access to medication in the participating small hospitals.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	mPage Developer
Scope	This software technology will increase adherence to clinical standards by improving clinical team response time.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	PowerNote
Scope	<p>PowerNote allows doctors to complete their own notes directly into Cerner and eliminates the need for staff to transcribe these notes.</p> <p>Physicians can access pre-completed notes and use template charting. This helps streamline communication among healthcare providers regarding a patient's status.</p>
Key Deliverables	<ul style="list-style-type: none"> • Patient safety, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Advanced Picture Archive System Functionality (PowerViewer)
Scope	The PowerViewer technology improves the quality of diagnostic results. This helps doctors determine the best course of treatment for patients.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Single Sign ON
Scope	<p>This technology will make it much easier for clinicians and staff to log in and work between applications.</p> <p>Physicians can access pre-completed notes and use template charting. This helps streamline communication among healthcare providers regarding a patient's status.</p>
Key Deliverables	<ul style="list-style-type: none"> • Care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Healthcare Undergoing Transformation (HUGO) – Phase I
Scope	This technology will help the participating hospitals develop electronic health records for patients, including helping with medication administration records.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety; quality, sustainability, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project Phase complete

Project Name	Bedside Documentation Terminals
Scope	Wall-mounted computers at every inpatient bed at the Seaforth, Clinton (HPHA) and AMGH hospital sites reduce congestion improving clinical and nursing capacity.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety, quality, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Clinical Paper Records Scanning
Scope	This technology will help to ensure quality and seamless care, by scanning paper records so that they can be included in the patient's Electronic Health Record and provide a more complete picture of past health experiences and medical interventions.
Key Deliverables	<ul style="list-style-type: none"> • Improved efficiency, care coordination
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	HPHA AMGH Rural Sites Server Virtualization
Scope	Refresh computer server infrastructure utilized by Seaforth, Clinton and AMGH hospital sites. Will combine information from different sources on one screen improving clinical capacity.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety, improved efficiency, increased capacity
Status and Performance	<ul style="list-style-type: none"> • No status and/or performance updates were identified

Project Name	Huron Perth Healthcare Alliance and AMGH Patient Registration Integration
Scope	This technology will help standardize training for staff who are registering patients This will allow healthcare professional to better record the patient's medical information.
Key Deliverables	<ul style="list-style-type: none"> • Care coordination, access to care
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Rural Network Infrastructure Refresh
Scope	Replace current network equipment to increase performance and ensure sustainability.
Key Deliverables	<ul style="list-style-type: none"> • Organizational sustainability
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Refresh of HPHA Rehabilitation Model
Scope	This Project will assess the present HPHA rehabilitation program. It will make recommendations for the future rehab model based on evidence.
Key Deliverables	<ul style="list-style-type: none"> • Care coordination, access to care
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	Regional Bed Allocator
Scope	The Huron Perth Healthcare Alliance (HPHA) implemented a regional bed allocator. The initiative centralized bed utilization decisions across four hospitals serving the Huron and Perth Counties with the intent of proactively planning bed moves with acute awareness. It also supported patient access to acute services through timely communication and a proactive approach to the discharge of patients.
Key Deliverables	Based upon the information shared the following outcomes have been achieved: <ul style="list-style-type: none"> • Positioned project as a means to ease the burden on physicians in finding a bed for their patients • Patients will receive an enhanced access to bed resources throughout the HPHA as well as access to physicians for consult/urgent admissions through the HPHA One Number protocol • Improved quality of care as patient receives care in the correct bed service in a timely manner.
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	District Hospital Molecular Testing for Clostridium Difficile
Scope	The Polymerase Chain Reaction (PCR) test helps to identify c-difficile in patients diagnosed with gastroenteritis. This technology is an improvement on previous testing methods.
Key Deliverables	<ul style="list-style-type: none"> • Patient safety
Status and Performance	<ul style="list-style-type: none"> • Project complete

Project Name	OTN Enabled Healthcare Providers, Telemedicine Clinical and Videoconferencing Equipment
Scope	Telemedicine clinical and videoconferencing equipment will facilitate increased access to interdisciplinary teams, specialized and community-based services LHIN-wide.
Key Deliverables	<ul style="list-style-type: none"> Care coordination, access to care
Status and Performance	<ul style="list-style-type: none"> Project complete

Project Name	SHHA FirstNet
Scope	FirstNet is a comprehensive Emergency Department (ED) information management system that helps hospitals improve ED workflow from triage through discharge.
Key Deliverables	<ul style="list-style-type: none"> Care coordination, Access to care
Status and Performance	<ul style="list-style-type: none"> Project complete

Project Name	Web Site and Knowledge Sharing
Scope	Conference will share project proposals and results with the goal of spreading innovative projects. Idea sharing for 14/15 and 15/16 projects
Key Deliverables	<ul style="list-style-type: none"> Knowledge transfer
Status and Performance	<ul style="list-style-type: none"> No status and/or performance updates were identified

Project Name	LEAN Training and Support
Scope	<ul style="list-style-type: none"> • Provision of formal education and training for staff on LEAN and for participants to initiate and complete a LEAN project six after the completion of the formal education process. • The participants include those at North Wellington Health Care, local Family Health teams, Waterloo Wellington District Canadian Association for Mental Health and other additional health care partners. • Beyond the initial training group, two additional LEAN Black Belt participants will be identified and will be tasked with initiating a project with a target of \$100,000 in savings.
Key Deliverables	<ul style="list-style-type: none"> • To build additional capacity within the health care organizations identified on LEAN principles, its tools and philosophy
Status and Performance	<ul style="list-style-type: none"> • The project was to be initiated by December 31, 2013 with the hiring of a LEAN facilitator with the training to be completed by March 31, 2014.

Project Name	Antimicrobial stewardship
Scope	To support the antimicrobial stewardship initiative within WHAC to promote best practice and meet WWLHIN mandate and Accreditation Standards
Key Deliverables	<ul style="list-style-type: none"> • No key deliverables identified.
Status and Performance	<ul style="list-style-type: none"> • Project charter completed by Dec 13, 2013, project to span two years

Project Name	OCR Digital Scanning
Scope	<p>The intent of the initiative is make Emergency Department records available to healthcare providers through an electronic information system and shared through an access portal whereas the records are currently paper based and require time for retrieval for follow up purposes for North Wellington Healthcare and Groves Memorial Community Hospital</p> <p>With an anticipated start date of January 2014 and the completion by December 2015, the creation of this system includes:</p> <ul style="list-style-type: none"> • Mapping out the current processes in the creation of Emergency Department patient records • The selection, acquisition, implementation and training of required hardware and software • Development of new processes where they are required • Modifying processes to ensure that they are suitable for scanning • Scanning emergency records and then subsequently storing and archiving records • Testing all systems
Key Deliverables	<p>The scanning of Emergency Department records intends on achieving the following:</p> <ul style="list-style-type: none"> • Legible image quality – 100% of records will meet the quality expectation of clinicians • Improved accessibility – Access to information will reduce from 2 weeks to 24 hours • Improved efficiency – Reduction in the labour required to manage records • Improved privacy – Incidents of unauthorized file access will be maintained at 100% • Improved disposition time – Faster and easier access to clinical information for clinicians allowing for quicker diagnosis/decision making
Status and Performance	<ul style="list-style-type: none"> • Scanning to begin by March 31, 2014 and completion and roll out in FY 2014/2015



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