



ELGIN PRIMARY CARE ALLIANCE

Thursday, November 16, 2017

5:30 p.m. – 7:30 p.m.

South West LHIN St. Thomas Office

In attendance

Dr. Kellie Scott (Co-Chair), Elmwood FHO	Dr. Melissa Tenbergen (Co-Chair),	Dr. Kelly Jones, STEGH	Dr. Kevin Mardell, West Elgin CHC
Dr. Anne Howe, East Elgin FHT	Dr. Kristin Richter, Elgin FHO (Port Stanley)	Dr. Connie Robinson, Elgin FHO (Shedden)	Dr. John Bryans, Windemere FHO
NP Laura Sheridan, LHIN Palliative Care	NP Laura Moon, Central CHC	Michael Oates, TVFHT	Rebecca Sutcliffe (HCC), South West LHIN
Jana Fear (Planner), South West LHIN	Kelly Simpson (Admin Lead via t-con), South West LHIN		

Guests

Carla Vallee (cSWO)	Sue Hocking (cSWO)	Julie Ridgewell (OTN)	
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Regrets

Dr. Dave Dougherty, Windemere FHO	Dr. Amit Shah STEGH ER	Dr. Christian Paradis, Windemere FHO	Dr. Brendan Boyd, Elgin FHO (Port Stanley) and STEGH
Dr. Mike Toth, Elgin FHO	Dr. Jeff Balsdon, Elgin FHO	Dr. Emil Grigore, West Lorne	Keri Selkirk, TVFHT
Dr. Michael Fernando, East Elgin FHT	Dr. James Menlove STEGH ER/Anaesthesia	NP Kate Underhill, Windemere FHO	Dr. Afiza Elahi, Windemere FHO
Stephanie Johnson, TVFHT	Dr. Kehinde Olorunsola, Elmwood FHO		

Minutes

Topic or Subject	Presenter	Minutes/Actions
Welcome & Introductions	Dr. Kellie Scott	<ul style="list-style-type: none"> Dr. Scott welcomed the group and asked each participant to introduce themselves
Digital Health Strategy	Dr. Kellie Scott Carla Vallee, Sue Hocking (cSWO)	<ul style="list-style-type: none"> Dr. Scott provided a brief overview of Ontario's Digital Health Strategy <p>cSWO</p> <ul style="list-style-type: none"> C. Vallee presented on cSWO activities currently underway OLIS provides hospital and private lab information province-wide ClinicalConnect now provides a patient visit timeline

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	Julie Ridgewell (OTN)	<ul style="list-style-type: none"> • Coming soon: Medications from private pharmacies; Imaging; Immunizations records • Action: Elgin PCA members to engage with their colleagues regarding applying for ClinicalConnect access. Contact Carla Vallee (Carla.vallee@sw.ccac-ont.ca) for more information. <p>OTN</p> <ul style="list-style-type: none"> • J. Ridgewell presented an update on OTN • eConsult can be used to share health information and to seek advice from a specialist (e.g., child psychiatrist, nephrologist) • Professional Development videoconferences and webcasts are available via OTN • Telehomecare is a 6-month program to support technology-enabled care for patients with COPD or CHF. Will be expanded to diabetes self-management. • eVisit with patients is currently not billable. There are currently 500 physicians involved in a home video compensation model pilot. It is expected that there will be a billing code available within the next 8 to 12 months. • Contact Julie Ridgewell (jridgewell@otn.ca) for more information.
Elgin SRIT Update	Dr. Kellie Scott	<ul style="list-style-type: none"> • Dr. Scott provided an overview of the content and outcomes of the November 9th Elgin Sub-region Integration Table (SRIT) meeting: <ul style="list-style-type: none"> ○ The Elgin SRIT engaged in a facilitated review and discussion of key inputs (such as capacity reports, provincial strategies, and meetings) by population priority. The SRIT also reviewed the Elgin and South West “At A Glance” performance documents. ○ Following the discussion, there was a generative brainstorming discussion to identify areas of opportunity by priority population. ○ The group participated in a “dot-mocracy” exercise to identify the top opportunities. • Dr. Scott walked through the top ten opportunities. <ul style="list-style-type: none"> ○ Home visits: Utilize downtime for EMS (union issues when attempted in East Elgin)? NP model? Goal is to keep people out of ER and extend reach of primary care. ○ Prevention & education: Opportunity to educate patients in the waiting room, via Facebook page, etc. ○ Concerns expressed that some of the opportunities feel system-level. This is the mandate of the SRIT. System-level changes will impact individual practices but that doesn’t mean we can’t also discuss local or sector specific issues at our PCA – This is part of the purpose of the PCA to develop our own primary care sector
Forms and Referrals	Dr. Kellie Scott	<ul style="list-style-type: none"> • Dr. Scott provided highlights of new and revised forms and referral processes. Forms have been circulated. • Dr. Scott has circulated the Practice Solutions versions of the Home Care Services/IV Starts forms. • Dr. Kerr, Pediatrician, has reached out to Dr. Scott to talk about referrals. Dr. Kerr would like to see more referrals kept in St. Thomas. They’ve noticed that some referrals are sent directly to sub-specialty peds that can be managed locally by our pediatricians. Consider giving them ‘first-crack’ at it (i.e. derm, endocrine, GI, neurology etc.)
Primary Care Issues	All	<ul style="list-style-type: none"> • Billing of K002 by hospital physicians affecting outside use: FPs are being deducted \$63 each time a hospitalist bill using K002, even if patients are in hospital for appropriate reason and hospitalist may

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		<p>be billing appropriately in some instances. OMA section of hospitalists has tried to get focused practice designation so this doesn't happen but no movement. Or need to take code "out of basket" for all – negotiations team at OMA aware. Discussed with Dr. Cieslak, new Chief of Hospitalists and also made Dr. Chehadi Chief of Staff, aware.</p> <ul style="list-style-type: none"> • Direct admits to palliative care: There is a number to call in order to ensure that patients go straight to a hospital bed rather than waiting in ER. Dr. Scott will circulate number. • Back line/cell phone numbers: Share phone numbers and email addresses? Add to existing STEMA list. Seemed to be consensus in the room of willingness to share. • ACTION: Will work with STEMA (Dr. Kevin Mardell as President) to ss if this is possible. • Follow-up/documentation from patients' ER visits varies across Elgin. Dictations are much appreciated for complex patients or major medical issues • Elgin needs: Sleep study, Dermatology, MRIs (only sub-region in LHIN that doesn't have MRI), Child and Adolescent Psychiatry • Primary Care same-day access: Only 33% of those in LHIN could access primary care same/next day. Education of patients re: "urgency" is needed. Patient accountability is lacking. • Referring for colonoscopy: Would be more patient-centred to have consult and scope completed at same visit. Due to ambulatory cut-backs at STEGH, scope wait times have increased.
<p>Next meeting date: Thursday, December 21, 2017 5:30-7:30pm, St. Thomas South West LHIN Office (Walmart Plaza, beside Mark's Work Wearhouse)</p>		