



Thursday November 22, 2018
18:30-20:00

Location: **St. Thomas Public Art Centre**
301 Talbot Street
St. Thomas, ON
Minutes

Staff Present	Dr. Jeff Balsdon	√	Dr. Melissa Tenbergen	√	NP Laura Van Dam		
Staff Present	Dr. Connie Robinson	√	Dr. Kathleen McCully	√	Kate Dymock, WECHC		
Staff Present	Elmwood FHO	√	Dr. David Lum	√	Dr. Christian Paradis		
√	Dr. Kellie Scott	√	Dr. Kevin Mardell				
<i>Guest Presenters: Dr. Jan Owen, Dr. Brian Yan, Cancer Care Ontario Staff</i>							

Item	Topics and Actions
1.	Welcome and Introductions – Dr. Kellie Scott, Co-Chair
2.	<p>Update from Elgin SRIT</p> <ul style="list-style-type: none"> • Elgin Mental Health and Addictions Network has been re-established and is developing a workplan to move forward on recommendations for mental health in the SW LHIN and in Elgin <ul style="list-style-type: none"> – Focus on working better together across organizations – More transparent referral/access patterns for patients and for providers • Working on transitions for more elderly/chronic conditions <ul style="list-style-type: none"> – Hospital to home – Home to LTC – Hospital to LTC
3.	<p>Winter Surge Planning</p> <ul style="list-style-type: none"> • Some have referred to this year’s holiday surge situation as the “perfect storm”, due to current capacity levels at hospitals, shortages of human resources in home and community care, as well as the early onset of the flu season. • The LHIN is working in partnership with providers to maintain discharge practices and levels in hospitals over the winter period. The goal is to divert unnecessary visits to hospital-based urgent care and emergency departments. • The organization wants to help you keep your patients healthy during the flu and holiday season, and inform them of care options, including self-care. • Acknowledging many of you maintain services over the holiday period, the LHIN would like to assist you in advertising this to your patients by providing a few customizable templates (poster, voice mail, web content). <ul style="list-style-type: none"> – Public education – Materials for your office to help advertise your hours <p>Know where to go – call from healthline.ca – they may call your office to update your hours (this is not meant to be checking up by the LHIN or ensuring accountability but rather to compile information so ER triage, pharmacies, patients etc. can see from a central location when you are open)</p>

4.	<p>LHIN is funding 100 spots for Elgin for Indigenous Cultural Safety Training</p> <ul style="list-style-type: none"> • 8-10 hour online module/course at your own pace to complete over 3 months • Normally \$250 but LHIN has funded spots and will extend these to primary care providers/staff • If anyone is interested in completing this training please let me know or email laura.deyell@lhins.on.ca
5.	<p>Rounds/PCA Meetings 2019 Beginning in January 2019, Primary Care Rounds and Primary Care Alliance Meetings will be combined and will be located at the Health Unit. Please block the <u>3rd Wed of every month from 12:30-14:00</u> in your calendars for this and plan to attend regularly</p> <ul style="list-style-type: none"> • Try to ensure at least one Physician/MD from your group can attend
6.	<p>FIT Screening coming in 2019</p> <ul style="list-style-type: none"> • Roll out has been delayed based on feedback from these sessions, our LHIN is first to be doing this primary care engagement • FIT has superior evidence as a better test than FOBT, Ontario is one of the last provinces to implement (see slide deck) • FIT test has shorter shelf life so there will be a lab req which MD will complete and fax to lab – lab will mail a kit to patient. We will receive notification of result. • Contract was awarded to Lifelabs last week • Turnaround of receipt of test to reporting should be 2weeks, CCO will still send letter to patient as well • Benchmark is scope within 8 weeks of positive test. • Physician linked correspondence – studies show letter signed by you (rather than from random doctor at CCO) increases screening uptake rate. If you are not already signed up for this sign up here and they will send letters to your patients inviting them to do screening https://archive.cancercare.on.ca/pcs/primcare/physician_linked_correspondence/ • Some issues raised from those present: <ul style="list-style-type: none"> ○ We would like lab to follow up directly with patient if patient doesn't return test mailed to them or if test needs to be repeated for some reason – this is more efficient and patient-centred than sending us a note and then we do this and then send back a new req ○ In some areas like Elgin – we have 3 lifelabs – could labs have kits that patients could pick up and they could also return kit to lab, this would save money on mailing kits out and back in – this money could be used for more service from lab on other end (i.e. follow up to patients who haven't returned issued kit or test that needs to be repeated) ○ EMR reconciliation issues brought up – how will result be reported, how does this impact our searches and reminders, help from Ontario MD to have these ironed out before roll out ○ Can staff sign req on our behalf – workflow is often that a nurse or secretary goes through list of pts requiring screening, doctors signature adds step/interrupts workflow ○ Current workflow in Elgin is referral takes 6-8 mos for consult appt then scope is booked – can these be combined into one visit?

7.	Other Issues No other issues were raised
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