LOCALNEWS

HEALTH CARE: Review responds to growing seniors' population

LHIN seeks better system to transport patients

QMI Agency

The needs of patients are at the centre of a just completed North East LHIN review of non-urgent patient transfers across Northeastern Ontario.

The review took almost a year to complete and was done in collaboration with the region's 25 hospitals, 41 long-term care homes, eight municipal social service managers, ORNGE, five Central Ambulance Communi-

cations Centres, and the emergency medical services base hospital at Health Sciences North in Sudbury.

It included regional engagements, data analysis, modeling, and three NE LHIN-funded pilot projects to test a variety of approaches.

The review responds to concerns by patients, hospitals and EMS workers regarding the impact of the region's growing seniors' population and how patients are

currently transferred to and from hospitals for non-urgent matters.

Patient delays for return trips from appointments, patient flow blockage at hub hospitals, and stranding of escorts after they accompany patients to other hospitals, were a few of the issues raised.

"Northerners, particularly seniors, want a better, more co-ordinated transportation system as they are transferred from one hospital to another to access care,"

said Louise Paquette, CEO of the NE LHIN. in a release.

The review's final report outlines five categories of recommendations to help build a new model, including eight transfer routes for longer-distance transfers, new information technology tools to coordinate ride scheduling, process improvements to ease the current community hospital staff escorts process, a permanent Non-Urgent Transportation Leadership Work Group to

implement the new system, and ongoing change management communication.

The review indicated that the current non-urgent system is unsustainable from either a patient care or community hospitals' financial perspective. Today's system is resulting in patient flow blockages at hub hospitals, and a human resource deficit for community hospitals providing a patient escort. A permanent non-EMS solution for long-haul trans-

fers (typically those taking more than 60 minutes) is needed in the Northeast.

The review showed that onethird of the patient transfers performed in and out of the main transfer centres in the North East by EMS in 2012 accounted for two-thirds of the EMS hours expended on non-urgent transfers. These "long-haul" transfer hours could be replaced with a restructured non-urgent system of transportation.