

WFHT Annual Report

2014



Message from the President of the Board of Directors

Looking back on the past year and looking forward to the future, there is no doubt that we are truly on a mission to improve the health and well-being of the residents of Windsor-Essex and the 9,400 clients that we currently serve.

This year, the Board embarked on the journey of developing a new three-year Strategic Plan, taking us through to 2017. This has been a large undertaking, commensurate with its importance to the long-term future of the WFHT and health care services for the people we serve. A comprehensive consultative process was undertaken which included public input through an online survey, public consultation sessions that included a very successful community engagement breakfast, several meetings with individual stakeholder groups, and focus groups with staff and clients. The strategic plan will provide the blueprint for the WFHT's goals, priorities and actions over the next three years that will continue to see WFHT as a vital part of the community, meeting the needs of our clients today and into the future. As part of this important work, we have recognized that it is now time to chart a new course, one focused on thriving as opposed to merely surviving. To guide us, and having received input from many internal stakeholders, the Board has adopted a new mission statement for the WFHT - one that succinctly conveys who we are and why we exist: **"Providing access to primary health care through an integrated team approach."**

The WFHT has done a lot of good work in the past twelve months, including adopting the Model of Health and Wellbeing, in which all of our services and programs will be grounded (see over). The Model represents a strong philosophical and values framework for the WFHT.

In addition, the Quality Improvement Plan indicators are positioned to maximize progress, productivity and accountability, and to minimize risk, waste and exposure, all at the same time.

Partnerships, more than ever, are critical to the success of our vision. If we are indeed going to strive for **"Healthy Lives, Healthier Community"** we will need to work not only on improving as an FHT, but also by playing a vital role in developing and working within the health care system. This means reaching out and working even more closely with other providers in the community and region.

The success of the WFHT could not occur without the outstanding work of a dedicated and talented team of Physicians, Nurses, Allied Health Professionals and Support Staff. Our team is very well managed, hardworking and financially sound. On behalf of the Board of Directors, thank you for all of your tremendous effort.

In conclusion, I would like to thank and acknowledge my fellow Board members for all of their hard work, dedication and diligence in their roles as trustees of the WFHT. I wish to thank Penny Merrett and Bill Marra who will not be returning next year. We will also be saying goodbye to Carl Hooper, who has held the position of Treasurer for the WFHT since 2008. We thank you Carl for all of your financial wisdom and oversight over the years.

We look forward to another successful year!

Respectfully submitted,

Message from the Executive Director

If I can use two key words to describe this year they'd have to be evaluation and consultation. The WFHT received important feedback from two research initiatives on the performance of the Centre compared to other community governed FHTs in Ontario and to all FHTs (community and physician governed) more generally. I'm pleased to share that the feedback was quite favourable and to a large degree affirming. Intuitively we knew that we were doing something great and now we have the proof. Here are some of the highlights:

- Better than average avoidable hospitalizations - what this means is we are meeting the health care needs of our clients so they aren't showing up in hospitals for things that should be managed in primary care.
- Better than average access for people with complex care needs - what this means is the complexity of our patients is higher (20% higher) than what you'd expect to see across the general population. This translates into exceptional access practices for those seeking primary health care services.
- Lower than average 30 day readmission rates - what this means is we are providing better follow up care after a client has been discharged from hospital so they don't require readmission.

Also, more than ever we've focused on stakeholder consultation to inform our work priorities for the next 3 years. Personally, I'd like to thank everyone who took the time to give us feedback. This includes staff, patients, caregivers and colleagues. Moving forward we have a clear understanding of what we need to do to continue building upon our successes so that more people have access to sustainable, responsive and highest quality primary health care.

Our Vision and Mission

Vision: Healthy Lives; Healthier Community.

Mission: Providing access to primary healthcare through an integrated team approach.

WFHT 2014 Board of Directors



Anita Harris, President



Claudia Den Boer Grima,
Vice President



Carl Hooper, Treasurer



Mark Ferrari,
Executive Director/
Secretary



Dr. Mohsan Beg, Director



Dolph Barsanti, Director



Joyce Zuk, Director



Liz Daniel, Director



Michael Marchand, Director

Jack Sullens, Director
Photo Unavailable

Bill Marra, Director (Retired in 2014)
Penny Marrett, Director (Retired in 2014)



Ontario's Community
Family Health Teams
Équipes de santé familiale
communautaire de l'Ontario

The Windsor Family Health Team is located at
2475 McDougall Street, Suite 245 Windsor ON N8X 3N9
519-250-5656 www.windsorfht.ca



Model of Care & Strategic Planning

In June 2014, the WFHT as a member of the Association of Ontario Health Centres, adopted the AOHC MODEL OF HEALTH AND WELLBEING.

Using the depicted model as a framework, in December 2014 the WFHT Board of Directors approved a new 3 year strategic plan that focuses on three key areas of effort: Care Development, Organization Development and System Development.

Specifically the plan seeks to address these attributes from the Model: **Accessibility, Community Development Approach, Inter-professional, Integrated and Coordinated, Social Determinants of Health and Population Based.**



Quality Improvement

Our Quality Initiatives focused on 3 priority areas: Access, Integration and Client Centredness.

Access - we focused on improving our responsiveness to people with urgent needs. Our goal was to offer an appointment the same day or following day at least 50% of the time and we achieved an average of 97%. We did this by extending hours and reserving evenings for urgent appointments. Another goal was to improve our availability for regular follow up visits. Although we still have more work to do in that area we are trending in the right direction.

Integration - In partnership with Windsor Regional Hospital we have developed a reporting tool that allow us to know when one of our clients has been admitted or discharged from hospital. The primary health care provider is then able to follow up with the patient within 7 days of discharge.

Client Centredness - we want to understand clearly how patients feel about the quality of services being received at the WFHT. On rotating days each week we invite clients to participate in a survey by using a touch screen kiosk in the waiting room, using their smart phone or online from the comfort of home. Our goal is to survey 5-10% of our clients every year. This year, we've surveyed over 7% of our clients.

Here's what we are hearing (percentages indicate what is considered a positive response)...

How often are you involved to the extent that you want to be in decisions relating to your care?	90%
When you see your doctor or NP, how often do they or someone else in the office encourage you to ask questions?	70%
When you see your doctor or NP, how often do they or someone else in the office spend enough time with you?	89%
The last time you were sick or were concerned you had a health problem, how many days did it take from when you first tried to see your doctor or NP to when you actually saw him/ her or someone else in the office? (responding 10 days or less)	79%

WFHT Quick Facts

- The WFHT is fully funded by the MoHLTC and the funding for fiscal year 14/15 is \$1,607,086
- Serving approximately 9400 enrolled and non-enrolled clients at the WFHT and St. Clair College Campuses
- We have a staffing complement of 21
- The cost per patient per year is approximately \$270

Key Ongoing Partnerships

- Windsor Regional Hospital (affiliate)
- St. Clair College Health Centre Services - Providing expanded healthcare services to serve students and staff as well as providing student placements
- Asthma Research Group Inc. (In-house Lung Health)
- The Arthritis Society (In-house Occupational Therapy)
- Schulich Medical School (student placements)
- SAFE Windsor (LGBT service collaboration)
- Family Services Windsor (mental health referrals)
- University of Windsor (student placements)

Specialist Services

- Mental Health - Psychiatry (Dr. Basker)
- Senior Health - Geriatrics (Dr. Sclater)

Presentations

- Health Quality Transformation 2014 (poster) Sara Dalo; Hospital Discharge Reporting
- AFHTO Conference 2014 (poster) Brice Wong; Using Visual Analytics to Support Quality Improvement

Watch for in 2015

The WFHT welcomes Chantelle Cecile as the new Manager of Quality, Experience & Patient Safety.



The Windsor Family Health Team encourages and promotes the adoption of healthy lifestyles in a positive, supportive, safe, non-judgmental environment and is committed to reduce health inequities in our community.