

The North West Local Health Integration Network is seeking expressions of interest for an:

Emergency Department Clinical Lead

Emergency Departments (EDs) are a critical component of the health care system. There is growing recognition of the challenges that EDs face in functioning effectively. There are a number of parties that need to work together to support effective emergency care delivery in the province, and the Local Health Integration Networks (LHINs) have an important role to play in the management of emergency care delivery.

As part of a provincial strategy:

- An ED Expert Panel has been created to develop and oversee the implementation of activities related to improving provincial ED care;
- The Ministry of Health and Long Term Care (MOHLTC) is looking at policy and programs that impact EDs; and
- Local Health Integration Networks are hiring ED Clinical Leads.

The North West LHIN is seeking Expressions of Interest from physicians for an ED Clinical Lead who will have both provincial and LHIN-level responsibilities.

This position will work closely with the MOHLTC's *Wait Time Team*, *HealthForceOntario* and North West LHIN staff. The ED Clinical Lead will also consult and cooperate with the multidisciplinary, Ontario Emergency Department Expert Panel which provides expert advice to the MOHLTC and the LHIN. This position will also work closely with the Physician Leads involved in various ED Strategy components. In addition, the successful candidate will chair the North West LHIN ED Advisory Committee.

This contracted position has a time commitment of one day per week and is remunerated in keeping with the LHIN clinical leads remuneration package.

Further information about the specific roles and responsibilities will be provided on request.



Interested candidates are asked to submit their resume and a written expression of interest to the North West LHIN by June 22, 2018 attention to:

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For additional information visit
www.northwestlhin.on.ca



**North West Local Health
Integration Network**

Réseau local d'intégration
des services de santé du
Nord-Ouest

**SCHEDULE 1
SCHEDULE OF SERVICES, RATES AND SUPPLEMENTARY PROVISIONS**

A. Personnel

The following Corporation Personnel shall provide all Services on behalf of the Corporation:

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B. Rate

The daily rate based on a 7.5 hour work day for Corporation's Personnel providing Services is as follows:

Corporation's Personnel	Rate per month
	\$

The Corporation's Personnel shall work 1 day per week, unless otherwise agreed to by the Parties in writing.

C. Description of Services

1. General Description.

The Emergency Department (ED) Clinical Lead will work with the LHIN to advance the ED Strategy locally within the LHIN and across the province. Without limiting neither the scope of this statement, nor the scope of the specific requirements set out below, this will require the ED Clinical Lead to

- (i) consult and cooperate with the multi-disciplinary, voluntary Ontario ED Expert Panel which provides expert advice to MOHLTC and the LHINs regarding the implementation and evolution of the ED Strategy; and
- (ii) Work closely with the hospital Executive Leads and the Physician Leads involved in various ED Strategy components as well as with HealthForceOntario MRA Emergency Department Coverage Demonstration Project

The ED Clinical Lead will be accountable and report to the LHIN Vice President of Clinical or LHIN Vice President of Clinical Delegate. The ED Clinical Lead will work closely with key staff in the LHIN. The LHIN will provide administrative support to assist the ED Specialist in carrying out their role. The ED Clinical Lead is expected to devote a minimum of 8-10 hours per week to the performance of the Deliverables.

2. Emergency Department Clinical Lead Provincial Table.

The ED Clinical Lead will be required to participate as a member of the ED Clinical Lead Provincial Table (the "Provincial Table"). The Provincial Table will meet monthly or more frequently as needed. In addition, four members of the Provincial Table will attend all meetings of

the ED Expert Panel to ensure the voluntary panel has up-to-date information on the activities at the operational level. The ED Clinical Lead will also participate on ad hoc sub-committees of the Provincial Table as needed.

3. Quarterly Analysis of Emergency Department Data.

The ED Clinical Lead will contribute to an analysis of the ED Reporting System (EDRS) data on a quarterly basis. Specialists will proactively monitor EDRS data and provide insight for wait time fluctuations, including Significant increases or decreases within the LHIN and noting key trends at the Provincial level.

4. System Improvement Support.

The LHIN ED Clinical Lead will work with a range of stakeholders to support the implementation of the ED Strategy and other system improvements. In 2018-2019 this will include:

- (i) Providing advice to Expert Panel and the MOHLTC on various aspects of ED Strategy including but not limited to:
 - Efficient and appropriate use of scarce ED resources (human and capital);
 - Continued implementation of EDRS;
 - Defining and refining targets and considering how to implement targets; and,
 - Consideration of other proposed initiatives targeted towards supporting the ED Strategy objectives of reducing ED demand, increasing ED Capacity and supporting timely access to most appropriate care.
- (ii) Championing the continued implementation of the ED Reporting System within their LHIN among health service stakeholder including use of targets;
- (iii) Working with hospitals to standardize ED policies and practices, encouraging hospital leadership (i.e. Coos, ED Chiefs) to develop leading practice solutions to address wait time issues and working with LHIN to circulate these practices across LHIN and with other ED Clinical Lead to support improved standardization across the province;

These activities would be undertaken with the primary aim of achieving provincial wait time targets and improving quality of care.

5. Emergency Department Human Resource Planning.

The ED Clinical Lead will assist the MOHLTC, the LHIN and the ERI ALC Expert Panel in the development and implementation of strategies to address health human resources (“HHR”) issues including but not limited to:

- (i) Ensuring continuous coverage of the Province's EDs. The ED Clinical Lead will work with hospitals, LHINs and other relevant parties to ensure continuous physician coverage of the EDs within the LHIN.
- (ii) Working closely with the MOHLTC's Health Force Ontario ED Coverage Program, the LHINs, hospitals and physician associations/groups to develop short, medium and longer term solutions for ED coverage, ED education (pre and post licensure) and ED HHR planning;
- (iii) Helping to ensure the current ED vacancy dashboard is maintained in an accurate and timely manner;

- (iv) Assisting in disseminating information to hospitals and other relevant parties about programs, HHR best practice recommendations and resources to help hospitals maintain coverage;
- (v) Considering an approach for co-ordinating and pooling physicians across multiple sites and leveraging tools such as the common credentialing form;
- (vi) Helping to develop and champion innovative HHR models and safe and healthy work environments;
- (vii) Reaching out to engage family physicians with appropriate training experience and skills to help participate in ED coverage.

6. Tracking of Initiatives.

The ED Clinical Lead will track the implementation of ED Strategy initiatives within their LHIN including the Pay-for-Results program, ED Performance Improvement Program, Nurse-led outreach teams, as well as the implementation of related target setting to assess challenges and propose solutions.

7. Organize and Chair the LHIN Emergency Department Network.

With the support of the LHIN Vice President of Clinical, the ED Clinical Lead will organize and chair LHIN ED Network to achieve the preceding objectives. The ED Network will be composed of appropriate representatives from hospitals in the LHIN's geographic area that provide ED services (including both administrators and clinicians), designated LHIN staff and other relevant stakeholders. The ED Network will meet at least quarterly either in person or by teleconference.

8. Champion Improvements in Emergency Service Delivery

With the support of the LHIN Vice President of Clinical, each ED Clinical Lead will work as a collaborative leader and champion to effect key improvements in Emergency service delivery across the LHIN.

The ED Clinical Lead will:

- (i) review the EDRS data frequently looking for opportunities to facilitate the improved management of existing Emergency resources from a systems perspective, emphasizing inter-hospital cooperation and intra-hospital efficiency in resource utilization;
- (ii) work with the LHIN Vice President of Clinical, LHIN officials, hospital administrator and clinicians to understand and assess interesting or concerning data and achieve consensus and momentum on potential service improvements;
- (iii) liaise with the LHIN ER/ALC Performance Lead to support improved performance management in the LHIN; and
- (iv) will champion innovation and best practices in ED HHR including inter-professional teams and safe/healthy work environments.

9. Provision of Advice to the LHIN Vice President of Clinical.

The ED Clinical Lead will advise the LHIN Vice President of Clinical on ED resources across the hospitals in the LHIN's geographic area. This may include:

- (i) Evaluating options for inter-hospital organization of existing services to improve efficiency of utilization and patient outcomes in collaboration the LHIN Vice President of Clinical and hospital administrative and clinical leads.

- (ii) Identifying opportunities for improved intra-hospital management of existing Emergency Department resources, including between sites within a single hospital corporation.

10. Annual Plan Development and Reporting.

The ED Clinical Lead will develop high level annual action plan that reflects the activities and responsibilities set in this section (the "Action Plan"). The Action Plan will broadly outline the activities the ED Specialist will undertake in each quarter of the fiscal year and will list the anticipated outcomes associated with each set of activities.

Plans will be submitted for review to the LHIN Vice President of Clinical no later than 30 days from the date the Service Agreement is signed. The LHIN Vice President of Clinical will review the proposed Action Plan to ensure it aligns with the strategic objectives of the ED Strategy and HHR planning and will provide comment or confirmation of the Action within 60 days of receipt

The ED Clinical Lead will provide a monthly update to the LHIN Vice President of Clinical on the ED Clinical Lead's progress against the Action Plan.