

Here's what we're working on to bring better health care services to our region!



Interlake–Eastern
Regional Health Authority

Community Update



CEO Ron Van Denakker

I know we share with you the **mutual goal to bring sustainable, predictable health care to our communities** and I should also acknowledge that we have many challenges in our region to ensure we are successful in achieving that goal.

With the upcoming provincial election on April 19 comes a period where the RHAs, along with the Province, are unable to announce any new programs or updates between January 19 and April 19. During this "blackout", local papers will still report on our current, existing programs that we continue to offer and we will also advertise new health care providers accepting patients in our communities. Everything will return to normal after April 19.

Elected leaders often bring up their desire for access to reliable sustainable health care service in their communities. So I wanted to summarize what we as an RHA are doing to achieve more sustainable, reliable health care services in our communities. We know that it is far from a perfect system and we are aware that the services delivery model we are working under is not meeting the needs of our communities. The following report aims to give you a snapshot of how we're working to make it better.

Delivering sustainable, reliable and accessible health care

We recognize that our health care service delivery model **is not successful in reaching all of our population** in an accessible and reliable manner. It is necessary to adapt our current delivery of services model to keep it sustainable, accessible and patient centred.

Interlake-Eastern RHA is identifying where we offer what services (acute, long term care, primary care, community, mental health, etc.) and determining what services are needed for that particular population through the **clinical services plan**. One thing that is clear on a provincial level is the need for concentrated planning and **investment in primary care services**. We have slowly morphed into a culture

where emergency rooms and urgent care services are the centre of our system. This undermines efforts to make more appropriate primary health care available to our residents.

A **review of our primary health care services** has been conducted by an outside consultant. One element that is initially clear is the need for investment in our primary health care networks. Better primary care services will lead to better health outcomes for patients in our region. Our ultimate goal is to decrease the number of patients presenting in our urgent care facilities and emergency rooms. It is becoming evident that the culture of healthcare is moving away from the model of an independent practitioner and towards teams of health care professionals who can capably address a wider range of health care needs. This means creating circles of integrated health care providers and services that our communities can rely on for consistent, predictable health care before health concerns become critical and people require urgent care in a hospital or emergency room.

These plans integrate well with our **emergency rooms stabilization plan** that we're undertaking to deliver reliable and accessible emergency room services across our entire region.

On the other hand, we are exploring methods to **keep people in their homes longer** so that we can free up some of our beds in hospitals that are the only option for some people waiting for personal care home beds. At the beginning of January, we launched the first phase of our **home care after hours project** that sees home care staff working on weekends to assist with hospital discharges. They also provide after hours coverage for health care aides to ensure continuity of home care service. On a related note, we recently submitted our 10 year personal care home strategy to the province and that outlines where we identify we need to invest to free up our long term care beds and ensure people awaiting placement are in environments specifically suited to their unique needs.

Physician Recruitment

Our region, like other rural RHAs in Manitoba, continues to **face challenges in recruiting and retaining physicians**. Our large geography, with smaller facilities and limited opportunities to consult with colleagues, greatly contributes to these challenges. An important aspect of the primary health care review that I addressed earlier is the recommendations on how we can use physician resources more efficiently.

Physician recruitment is constant in our region. Our chief medical officer, Dr. Myron Thiessen, and his physician recruitment team are busy following up leads from existing physicians and working with external stakeholders to bring more physicians to our region. We continue to recruit physicians to almost all communities in our region and work with existing physicians to ensure we cover the gaps in service to the best of our ability. With the support of Manitoba Health, we continue to participate in the **Provincial international medical graduate recruitment program**. We also continue to offer new physicians financial incentives to relocate to our region and we work with communities to offer housing incentives.

Some ways we are building the relationship with **University of Manitoba medical students** in hopes that they will one day look to our region for employment are:

- In October, a group of 47 first and second year medical students participated in recreational activities and clinical workshops facilitated by three of our local physicians and a physician assistant to showcase the many career and lifestyle opportunities in our region.
- This summer, we will participate in Home for the Summer program where medical students can work in our region for the summer period.
- In May, our region is once again hosting the Rural Week where medical students shadow a physician in our region and we work with communities to provide a well rounded experience that reflects not only rural practice but living as well.
- On January 8, the physician recruitment team held a dinner for 15 medical students (some who have already been exposed to our region) to remind them of the employment opportunities that

exist in our region.

Capital Projects

We're investing in newer, larger buildings that can help us address pressing health care needs and accommodate the latest technology, larger patient volumes, employ additional local people and attract interest from health care providers who want to work in these new facilities.

We toured the minister of health through the **Selkirk Regional Health Centre** at the beginning of December and we are on budget and on time to open in Spring 2017. This hospital will service outlying communities by offering surgery, obstetrics, medicine, emergency, diagnostic imaging, rehabilitation, community cancer outreach, dialysis, palliative care and MRI imaging. The new ER space will expand access to care by providing the right care, at the right place and the right time. This new hospital offers better technology to improve staff's ability to care for their patients and it is designated for expansion when the need arises.

The foundation is complete and the walls are up on the redevelopment of the **Powerview-Pine Falls Health Centre Complex** – if all continues to go well we'll be operational in next fall! This facility will include a new primary health care centre and Manitoba's first traditional healing centre that has space for traditional healers, elders, an additional nurse practitioner, a First Nation and Métis outreach liaison, a medical lab assistant and spaces for support services. The First Nation communities of Sagkeeng, Black River and Hollow Water have come together to create the Giigewigamig First Nation Health Authority. - "Giigewigamig" means "A place of healing," in Ojibway. Giigewigamig First Nation Health Authority will manage program development of the new traditional healing centre with RHA support where requested.

We're adding 50 long term care beds in our region with the **Winnipeg River Region Personal Care Home** in Lac du Bonnet. Tenders will soon be released for the construction of this facility. We're working to ensure the new personal care home reflects the cultures of the population and reflects residents' unique needs.

We're looking at **capitalizing on the recruitment and training opportunities** that these new facilities will bring to our region. They also offer the potential to attract other complementary health care services to the region.

Working with communities



We have created **Local Health Involvement Groups** as an opportunity for people from all parts of Interlake-Eastern life to have a voice in healthcare and the delivery of health care services in our region. These groups are now up and running and we are beginning to receive and act upon their initial feedback.

In addition, I have been meeting with people across the region to establish **community health groups** composed of community partners who work with us to identify and address ongoing challenges in an appropriate manner.

In the spring, I expect to have more information with regards to these two initiatives to share with you.



Interlake–Eastern
Health Foundation

We are pleased to announce we have established a **regional foundation that will support existing community and hospital auxiliaries** whose established fundraising models have contributed significantly to investments in health care across the region. The foundation will help bring continuity to our fundraising efforts across the region and identify additional opportunities for donor investment. Look for more information on this foundation in the spring or contact Pamela McCallum at 785-2-4722 or pmccallum@ierha.ca.

Thank you for your continued support

Whenever we communicate, we as an RHA benefit from your expertise and continued support for the program and services we are delivering in your communities. I look forward to continuing the conversation after the spring and working to bring more sustainable, reliable health care services to the region. In the meantime, please don't hesitate to connect with me by email, rvandenakker@ierha.ca and by phone, 204-785-4701.

Until next time,

Ron Van Denakker

CEO

Visit our website



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