

## Broad improvements for health care in Winnipeg

Consolidation of health centres builds on excellence

**Winnipeg, Manitoba – April 7, 2017** - The Winnipeg Regional Health Authority (WRHA) today announced broad changes aimed at improving the quality of health care and strengthening the system that provides it.

“Right now, many patients wait too long for care, stay too long in hospital, or need to visit multiple sites to get the care they need,” said Milton Sussman, WRHA President and CEO. “With this announcement we begin the process of healing our health system, taking important steps that focus squarely on our patients. Both significant and sensible, these changes address systemic challenges that have hindered quality care and taxed our resources.”

Central to the plan is consolidation of services at specific sites to capitalize on their strengths, position them to deliver improved quality and timeliness of care, and permit the concentration of valuable resources, such as diagnostic services and specialty physician consultation, currently spread over multiple sites.

Minister of Health, Seniors and Active Living Kelvin Goertzen added, “We know these changes will not be easy but are necessary; our current system isn’t delivering the quality of care that our patients and their families deserve, and we have to act. Evidence from other jurisdictions and from recent reports and research in our own region support this system transformation and its intent to better our health system and improve the quality of care.”

The WRHA lags behind the national average on a number of key indicators, including wait times in Emergency Departments and in-patient length of stay. Changes the region is making align with independent consultant Dr. David Peachey’s recommendations in the recently released *Clinical and Preventive Services Planning for Manitoba* study commissioned in 2015, on how health care services are delivered and allocated.

Dr. Peachey’s report represents hundreds of hours of consultations with community representatives, Regional Health Authority leadership and staff, unions and associations, Indigenous organizations, clinical leaders in all major specialties across the province and other important stakeholders, all aimed at identifying major opportunities to improve care

“Cities such as Vancouver, Calgary, and Ottawa have fewer emergency departments per capita yet have shorter wait times than Winnipeg. Clearly, more is not better,” Dr. Peachey said. “Three Emergency Departments will allow the WRHA to provide more focused and specialized care.”

Karen Dunlop, Chair of the WRHA Board of Directors, which unanimously approved the plan, echoed the need to address fundamental challenges within the system. “We have to shorten wait times for admission from Emergency Departments and key diagnostic tests and consultations, bring patient lengths of stay in line with national averages and better address mental health and elder care needs in the community. Today we take the first steps towards transformation that is both fundamental and necessary.”

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### Key Changes:

- Emergency and acute health services consolidated at three sites: Health Sciences Centre, St. Boniface Hospital and Grace Hospital.
- Two urgent Care Centres, for cases that are serious but not-life-threatening, located at Seven Oaks Hospital in the north side of the city and Victoria Hospital in the south.
- Specialized areas of focus for Winnipeg's community hospitals and health centres aimed at providing the right care in the right place at the right time.
  - Concordia Community Hospital – will continue to offer specialty care in orthopedics and will also offer geriatric rehabilitation services and transitional care for patients waiting to get into personal care homes.
  - Seven Oaks Community Hospital – will continue to offer specialty care in out-patient renal services and will also offer an emphasis on elective endoscopy procedures as well as rehabilitation and transitional care for older patients.
  - Victoria Community Hospital – will continue to offer specialty care in day surgery and expanded in-patient mental health services to support a growing need in our community. In addition, the hospital will focus on offering mental health services to older patients in geriatric mental health.
  - Deer Lodge Centre – will continue to offer specialty care in geriatric rehabilitation, chronic care and long term personal care. Deer Lodge will receive enhanced capacity for special needs residents which includes care for those with dementia.
  - Misericordia Health Centre – will continue to specialize in eye surgery and treatment, long term and interim care for the elderly along with respite care. The Urgent Care Centre will be repurposed to accommodate an expanded community intravenous therapy clinic.
  - Riverview Health Centre – will continue to specialize in dementia care, respite services and respiratory chronic care and will continue their work in the important area of Alzheimer's care.

In addition to improving the quality and timeliness of care, the transformation is intended to create sustainability, balancing the region's budget for 2017/18 and laying the groundwork for more effective management of resources.

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See below a summary chart of the changes, an FAQ and list of health experts available for interviews.

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## **WRHA Changes Will Provide Better Care Delivered More Effectively Frequently Asked Questions**

### **1. How can going from six to three emergency departments result in better care?**

Services are spread too thinly across six emergency departments right now. Having three emergency departments will allow us to concentrate our specialists and diagnostic services in fewer facilities, resulting in better access and shorter wait times.

### **2. What happens to the hospitals that no longer have emergency departments?**

Each of Winnipeg's six hospitals will have a distinct, unique role in delivering specialized services, making it easier to provide the right care at the right place at the right time. For example, Victoria Hospital will add 50 beds for inpatient mental health services. Concordia Hospital will assume more orthopedic surgery and continue to specialize in hip and knee replacements. Seven Oaks Hospital will focus on renal services, rehabilitation for the elderly and will be the go-to centre for elective endoscopy.

### **3. Knowing that one of the greatest pressures on health care is an aging Baby Boomer population, how do these changes affect the elderly?**

We are focusing care for the elderly at three sites. We are also creating an enhanced home care services program to allow more than 1,200 patients each year to transition home for recovery after they've been in hospital. The goal would be to keep more people at home longer with appropriate health care support but, if they need to go into a personal care home, they can do so more often from home. This program will also support high-risk patients in the community who would otherwise rely on emergency departments for care.

### **4. Will these changes result in fewer hospital beds?**

It's not about a gain or loss of hospital beds, it's about moving those care spaces about in the system and organizing them differently. When services are concentrated at any one site, the bed capacity will accompany that increased concentration of services.

Changing the way we approach bed management also means that we will use beds more appropriately and be better equipped to handle a surge of patients should there be a busy weekend or flu in the emergency department that requires additional beds to be brought in.

### **5. How will people know which hospital to go to if they need help?**

We'll be working to communicate the changes with our staff and the public to let people know where to go. For example, if your illness or injury is life threatening call 911. Paramedics will take you to an emergency department. If an illness or injury needs immediate attention but is not life-threatening—like a broken ankle—go to one of the 24/7 Urgent Care centres at Seven Oaks or the Victoria.

### **6. When will these changes start to happen?**

We expect the urgent care centres will be the first to transition, starting this fall followed by the opening of the new ED at Grace Hospital in the spring of the New Year. Other will be over the next six to 24 months.

### **7. Won't it cost more money to make these changes than it will save?**

No. Evidence from other provinces and from trials in our own region have proven that this approach is the best way forward in healing our health system for this and future generations and will be more cost effective.

### **8. Will any healthcare workers lose their jobs as a result of these changes? How many?**

We have committed to government to reduce management positions by 15 per cent. We will be working to fulfill that commitment throughout the coming months. Continued...

We believe there will be jobs for everybody who wants one. There will be movement throughout the system. Some positions will be deleted and some will be moved to different sites but any front line staff person who wishes to remain with the WRHA will be able to do so.

## Hospital and health centre roles

Following is a summary of hospital and health centre roles at a glance – but keep in mind, these changes don't take effect immediately. They'll take anywhere from 6 to 24 months to complete.

Acute care hospitals	Community hospitals with urgent care	Health centres
<b>Health Sciences Centre</b> <b>Services</b> <ul style="list-style-type: none"> <li>24/7 emergency</li> <li>critical care</li> <li>surgery</li> <li>medicine</li> <li>mental health</li> <li>specialty rehabilitation</li> <li>child health</li> <li>women's health</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>increase in mental health and surgical capacity</li> <li>increase in surgical beds</li> </ul>	<b>Seven Oaks Hospital</b> <b>Services</b> <ul style="list-style-type: none"> <li>24/7 urgent care</li> <li>out-patient renal services</li> <li>elective endoscopy expansion</li> <li>complex continuing care</li> <li>elder rehabilitation</li> <li>elder transitional care</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>24/7 emergency converted to urgent care</li> <li>focus on rehab and care for the elderly</li> </ul>	<b>Misericordia Health Centre</b> <b>Services</b> <ul style="list-style-type: none"> <li>eye surgery and treatment</li> <li>long-term personal care</li> <li>interim care</li> <li>respite care</li> <li>intravenous therapy clinic</li> <li>sleep disorder centre</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>24/7 urgent care department repurposed to accommodate intravenous therapy</li> </ul>
<b>St. Boniface Hospital</b> <b>Services</b> <ul style="list-style-type: none"> <li>24/7 emergency</li> <li>critical care</li> <li>cardiac sciences</li> <li>surgery</li> <li>medicine / family medicine</li> <li>mental health</li> <li>child health</li> <li>women's health</li> <li>palliative care</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>increase in mental health capacity</li> <li>increase in medical beds</li> </ul>	<b>Victoria Hospital</b> <b>Services</b> <ul style="list-style-type: none"> <li>24/7 urgent care</li> <li>day surgeries</li> <li>in-patient mental health</li> <li>complex continuing care</li> <li>general rehabilitation</li> <li>dementia care</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>24/7 emergency converted to urgent care</li> <li>expanded day surgery services</li> <li>increase in mental health beds</li> <li>focus on elder friendly care including complex dementia care</li> </ul>	<b>Deer Lodge Centre</b> <b>Services</b> <ul style="list-style-type: none"> <li>geriatric rehabilitation</li> <li>general chronic care</li> <li>long-term personal care</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>enhanced capacity for special needs including dementia care</li> <li>added capacity for geriatric rehabilitation</li> </ul>
<b>Grace Hospital</b> <b>Services</b> <ul style="list-style-type: none"> <li>24/7 emergency</li> <li>critical care</li> <li>surgery</li> <li>medicine</li> <li>palliative care</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>role as teaching hospital expanded</li> <li>increase in surgical capacity</li> <li>increase in medical and surgical beds</li> <li>increased access to specialist and after hours diagnostic imaging</li> </ul>	<b>Community hospital</b> <b>Concordia Hospital</b> <b>Services</b> <ul style="list-style-type: none"> <li>orthopedic surgery</li> <li>complex &amp; continuing care</li> <li>elder transitional care</li> <li>rehabilitation</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>24/7 emergency department repurposed</li> <li>rehabilitation services expanded</li> <li>focus on transitional care for the elderly</li> </ul>	<b>Riverview Health Centre</b> <b>Services</b> <ul style="list-style-type: none"> <li>long-term personal care</li> <li>dementia care</li> <li>respite services</li> <li>respiratory chronic care centre</li> <li>specialty rehabilitation – acquired brain injury, stroke</li> <li>palliative care</li> </ul> <b>What is changing?</b> <ul style="list-style-type: none"> <li>strengthened Alzheimer's care</li> <li>additional capacity for long-term care beds</li> </ul>