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### **MINISTRY OF HEALTH AND LONG-TERM CARE PATIENT LIFTING FUNDING AGREEMENTS**

**The Health and Emergency Medical Services Committee recommends the adoption of the recommendations contained in the following report, January 18, 2005, from the Commissioner of Health Services:**

#### **1. RECOMMENDATIONS**

It is recommended that:

1. Health and Emergency Medical Services Committee and Regional Council approve the receipt and expenditure of \$136,364, a 100% one-time grant, from the Ministry of Health and Long-Term Care (MOHLTC) for the purchase of patient lifting equipment and delivery of lifting and transfer education programs under the Provincial Patient Lift Initiative.
2. Staff be authorized to immediately proceed with the procurement of the lifts and the award of the contract for the supply and delivery prior to 2005 budget approval.
3. Staff be authorized to enter into the necessary agreements with the MOHLTC to facilitate the receipt and expenditure of the funds.

#### **2. PURPOSE**

The purpose of this report is to secure approval from Health and Emergency Medical Services Committee and Regional Council for the receipt and expenditure of an additional 100% one-time grant from the MOHLTC for equipment and training costs related to the implementation of the Patient Lift Initiative in the Long Term Care and Seniors Branch (LTCSB).

#### **3. BACKGROUND**

On December 22, 2004, the MOHLTC advised the LTCSB that they had been approved to receive \$76,364 and \$60,000, for the Newmarket Health Centre and Maple Health Centre respectively, for equipment and training costs related to the implementation of the Patient Lift Initiative (*see Attachment 1*)

The Patient Lift Initiative is one component of a larger strategy by the Province to address issues related to nurse retention, recruitment and supply. The strategy has been implemented to try to stabilize and enhance the nursing workforce in Ontario. The immediate goal of the Patient Lift Initiative is to make the delivery of patient care by nursing and other health care staff easier and safer for both staff and clients. The longer term goal is to reduce injury in the workplace by creating a safer work environment

thereby making Ontario health care facilities a more attractive employment choice for nurses.

#### **4. ANALYSIS AND OPTIONS**

Under the Patient Lift Initiative, the MOHLTC will provide a one-time grant to the LTCSB in the amount of \$136,364. This grant will fund the purchase of approximately 24 additional portable and fixed patient lifting devices for our health centres and will fund the development and implementation of a comprehensive evidence based lift and transfer education program for nursing staff.

At the Newmarket Health Centre, four of five nursing units are currently equipped with built-in ceiling lifts. The new funding will allow for a built-in ceiling lift to be added to the remaining unit at that site which is not presently equipped. At the Maple Health Centre, two of four nursing units are currently equipped within built-in ceiling lifts. The additional funding will be used to start adding ceiling lifts to the units that are not equipped. Three portable lifts will also be purchased for the health centres.

The LTCSB had built-in patient lifting devices installed at the Maple Health Centre when the facility opened in 1998. Since that time, there have been no staff back-related injuries from patient lifting or transferring on the units in which the lifts were installed. Historically, back-related lifting or transferring injuries are the number one cause of Workplace Safety and Insurance Board lost time claims in the healthcare sector. Based on our experience to date, this technology has been very effective in reducing workplace injury and making the delivery of patient care easier and safer for both staff and clients.

The required agreement with the MOHLTC stipulates that lifting equipment must be purchased and received by the LTCSB on or before March 31, 2005. In order to qualify for this funding, agreements had to be signed and returned to the Province by January 14, 2005. To meet this deadline, the agreements were completed and signed by staff with a provision that they were subject to final approval by Regional Council.

##### **4.1 Relationship to Vision 2026**

The additional funding for the Patient Lift Initiative will contribute to the attainment of the Vision 2026 Goals of developing Quality Communities for a Diverse Population and Responding to the Needs of our Residents. The LTCSB offers a continuum of community-based, outreach, day and institutional services that support clients with a diverse range of care and support needs.

#### **5. FINANCIAL IMPLICATIONS**

Under the Patient Lift Initiative, the LTCSB will receive \$76,364 for the Newmarket Health Centre and \$60,000 for the Maple Health Centre for equipment and training costs related to implementation.

This one-time grant was included in the 2005 LTCSB Operating Budget. However, due to the MOHLTC requirement that the patient lifting equipment be purchased and received prior to March 31, 2005, it is necessary to secure Health and Emergency Medical Services Committee and Regional Council approval to receive and expend these funds in advance of the final 2005 Business Plan and Budget approval process.

## **6. LOCAL MUNICIPAL IMPACT**

The quality and level of services provided to residents from all local municipalities admitted to the centres will be enhanced as a consequence of the utilization of these funds for patient lifting equipment.

## **7. CONCLUSION**

The approval of the recommendations regarding the receipt of the additional funds from the MOHLTC will enable staff to proceed with the purchase of patient lifting equipment within the timeframe specified by the Province to qualify for the funding. As well, the additional patient lifting equipment and training will enhance the delivery of care and contribute to the creation of a safer work environment for both clients and staff.

The Senior Management Group has reviewed this report.

*(The attachment referred to in this clause was included in the agenda for the February 3, 2005 Committee meeting.)*