



To: St. Joseph's Board of Directors  
From: Dr. Gillian Kernaghan, President and CEO  
Date: July 27, 2017

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I hope you are enjoying some well-earned vacation time with friends and family. This report combines updates from June and July. In August, I will provide you with the environmental scan and "St. Joseph's in the News" only before we return to our regular board reports in September.

On July 11, an initial meeting of the Strategic Planning Steering Committee and The Potential Group consulting firm was held to map out an engagement process that will allow us to gather the thoughts and ideas of patients, residents, families, staff, physicians, researchers, volunteers, students, partners, donors and the community as we begin work on a refreshed strategic plan. A follow-up meeting was then held with the Senior Leadership Team to discuss strategy and pre-planning for this work.

Also this month, at the request of the CEO of the South West LHIN, I joined the London Middlesex Sub-Region Integration Table as the hospital representative. Within the South West LHIN's new structure, this group is mandated to enable, enhance and champion seamless, consistent high-quality care and integrated planning and delivery.

On July 19, we recognized the outstanding contributions of Sarah Jarman as Site Chief, Mental Health Care. Sarah has stepped down from that role after more than 10 years of excellent leadership, which included the challenging years of mental health care restructuring. Sarah played a key role in health system transformation including participating in the design and development of the new mental health facilities in St. Thomas and London, the promotion of collaborative care models, and in service planning with a focus on rehabilitation and recovery. We thank Sarah for her tremendous dedication and guidance as Site Chief. She will remain with St. Joseph's as a clinician within the mental health care program as well as Chair of the Medical Advisory Committee and Director of Medical Quality. Dr. Sandra Northcott, a physician leader within St. Joseph's Assessment, Treatment and Rehabilitation and Concurrent Disorders programs, has assumed the Site Chief role for Parkwood Institute Mental Health Care, Southwest Centre for Forensic Mental Health Care and the Operational Stress Injury Clinic at Parkwood Institute Main Building, effective July 17.

Finally, our web-based 2016-2017 Annual Report to the Community, which launched June 15, 2017, continues to be viewed. To date, there have been more than 7,700 page views while the Facebook ad campaign generated 41,789 impressions. As well, nearly 200 new Facebook page followers were gained by the campaign.

## Our Patients

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### **Move of residents to Western Counties Wing**

Over a two-week period that began June 12, 2017, residents from 5BS at Parkwood Institute moved to the Western Counties Wing (WCW) in a very coordinated fashion. All moves went smoothly and feedback was positive.

Much preparation took place leading up to the move to ensure the transition was as easy as possible for both veterans and staff. This included:

- Ensuring room assignments best accommodated residents' preferences and care needs
- Changes to staffing models to align with care needs
- Staff shadowing opportunities to allow WCW staff to meet residents and 5BS staff with whom they will be working
- Enhanced communication including a monthly newsletter focused exclusively on the transition to ensure residents, families and external partners were kept abreast of move plans
- Tours of the WCW for residents and families
- Welcome events
- Celebration closing of 5BS

Upon arriving in the WCW, residents were met with welcome signs on their doors and a hand-written card with a special message from the president of Resident's Council. There were also move celebration events to recognize the work of both staff and residents during the transition.

### **New website for acquired brain injury patients and families**

Based on feedback and consultation with patients, families and staff in the Acquired Brain Injury (ABI) Outpatient Rehabilitation Program at Parkwood Institute Main Building, a [new website](#) has been created to enhance information materials for brain injury patients. Made possible through a generous donation from an ABI patient, the website's purpose is to increase access to resources for current patients and families and those on the wait list for services. Design of the website is tailored specifically to patients with concussions and brain injuries. This includes shorter more concise content, the use of imagery and streamlined navigation. The site is in the development stages, being reviewed by patients, families, staff, physicians and leaders, with plans to have a formal launch in August 2017. The launch will be accompanied by an awareness campaign using social media to reach external audiences including clinicians, patients and family caregivers.

Phase two of the project will focus on printed information materials including a fully designed brochure booklet for patients and families, and materials used to reach family physicians and primary care providers across the region.

### **Care Partnership Framework**

As you know, a top priority within our strategic plan is to "Ensure patients and families are full partners in their care, and in the design, measurement and improvement of care." We have made good progress in pockets of our organization and are now seeking more consistency and reach in how and when we partner with our patients/residents and family caregivers. Our recently completed Care Partnership Framework provides a robust structure for our approach. From this framework, tactics or practices can be selected, implemented and evaluated. Developed in consultation with health care organizations leading in this area, and with our patients, residents, families, physicians, leaders and direct care providers, the framework will bring our care partnerships to the next level.

At the centre are those who come to us for care. The framework is grounded in our Statement of Patient, Resident and Family Values. Within three main areas of focus – direct care, our programs and initiatives, and advocacy – we aim to inform, consult, involve, collaborate with and empower our patients, residents and their family members. This is the next evolution in the relationship between patients/residents, families and health care providers.

The first meetings of the Care Partnership Steering Committee took place in May and June 2017. Vice Presidents Roy Butler and Karen Perkin are the two executive sponsors for the Care Partnership and directors Beth McCarthy and Michelle Mahood are taking leadership of the family caregiver and patient partnership work. A draft work plan has been created for year one of the Care Partnership.

At the quarterly the Leadership Development Institute in June 2017, roll out of the framework to leaders began with a view to provide information and education on the patient/caregiver partnership, as well as the key concepts of how patient/caregiver co-design can advance our work and improve outcomes and the experience for all involved. Attendees heard first-hand from three family caregivers and a patient in a panel-style discussion moderated by a representative from the Change Foundation. The event was inspiring and emotional, truly highlighting the ‘why’ for leaders. It was also an opportunity to learn about teams that have partnered with patients and caregivers, and where we can grow this practice. A [video](#) was shared from an education day held by the Change Foundation in March 2017. At that event, 30 St. Joseph’s staff, leaders and community partners, attending on behalf of our Improving Care Together project, learned the fundamentals of co-design with patients and family caregivers.

In other Care Partnership developments:

- A dedicated Twitter account was set up for the Improving CARE Together project being funded by the Change Foundation to improve the family caregiver experience and engagement across St. Joseph’s. Twitter was used throughout June 2017 to promote the project at various events, including the South West LHIN Quality Symposium and St. Joseph’s Leadership Development Institute.
- An intranet resource was created for staff, which will be highlighted in upcoming leader communications.

### **Improving access to care**

Two primary care physicians have been added to the Roth | McFarlane Hand and Upper Limb Centre team. These non-surgical members of the physician team will triage the patients where surgery is not an obvious requirement. The goal is to improve wait times and free up the surgeons to focus on the operative patients. The primary care physicians are Dr. Paul Fox and Dr. Stephen Joseph.

### **Phone calls to surgery patients after discharge**

In June 2017 a pilot project began in the Surgical Day Care Unit that involves post discharge phone calls by a registered nurse to surgery patients. Post discharge calls allow us to close the loop on patient care. As the hospital stay is short and patients are sent home with a lot of information, the calls focus on four main areas related to the patient’s post-operative care: pain; nausea and vomiting; activity; and discharge instructions. By focusing on these four areas we can evaluate the information provided to patients upon discharge, determine if additional information is required or if changes are needed to the information. The patients will also be asked about the quality of the care they received and areas for improvement.

Before discharge, patients will be informed about the post discharge calls and asked for their consent and a phone number to reach them the next day. Once evaluation of the pilot is completed, all staff will be trained to complete post discharge calls and assigned on a rotating basis.

### **High school students pay tribute to veterans**

Veterans at Parkwood Institute were recognized at the ONERUN fundraiser held at John Paul II Catholic Secondary School on May 10, 2017.

ONERUN was created by cancer survivor Theresa Carriere to raise funds and awareness for cancer care in London. In 2010, 2011, 2014 and 2015, Theresa ran the 100 km between Sarnia and London in a single day. Since then, ONERUN has been extended to a week-long event at area high schools. In May 2017, 3,000 students from across the city mirrored her feat, running the 100 km in teams of 10 at five area high schools.

One of the ONERUN organizers is Brittany Tiseo, a therapeutic recreation aid with the Veterans Care Program. Passionate about her role at Parkwood Institute and proud of both the veterans and the Veterans Care team, Brittany arranged for the veterans to be included in the event. A goal of ONERUN is to ensure that everyone in the community has an opportunity to take part. Including the veterans was also way for the students to show their appreciation to those who had served the country.

At John Paul II Catholic Secondary School, the first lap was dedicated to the veterans, who were escorted by the London Police and completed the first lap as the song Highway of Heroes played. More than 600 students linked arms and walked behind the veterans. Students also spent time meeting with the veterans. Theresa Carriere said there were many incredible moments throughout the ONERUN week but few matched the impact of the veterans' presence.

ONERUN has raised nearly a \$1 million since it began. St. Joseph's Breast Care Program has been among the beneficiaries of the funds raised.

### **New Patient and Family Caregiver Advisory Council – Parkwood Institute**

A Parkwood Institute Main Building, a Patient and Family Caregiver Advisory Council has been formed to create a forum for patient and family caregiver involvement in our current delivery of services and planning for the future. The objectives include:

- Creating a true partnership between patient and family caregiver representatives and the health care team
- Integrating the patient and family caregiver voice, perspective and insight into planning and decision-making
- Improving the patient and family caregiver experience
- Advancing patient safety and quality improvement, and promoting changes in practice

Members of the advisory council include 10 patient and family caregiver representatives, and five staff representatives from across the various programs at Parkwood Institute Main Building. The first meeting was held in May 2017.

At the council's July meeting, Rhodora Laylo, Coordinator of Infection Safety, provided information on the importance of St. Joseph's hand hygiene strategy and gathered feedback and ideas from council members on what could help make the strategy more effective in improving hand hygiene

compliance among staff. Input was also gathered on what council members see as meaningful resources for patients, residents, family and caregivers. The feedback was valuable.

The council will meet bi-monthly beginning September 2017.

### **Smoking cessation – mental health care**

St. Joseph's is working with the Middlesex-London Public Health Unit to review and find solutions to increased incidents of smoking on the inpatient units at Parkwood Institute Mental Health Care Building. As part of this effort, standard practice for managing smoking material and nicotine replacement has been reviewed with staff and a program facilitator role for the implementation of the Ottawa Model of Smoking Cessation has been posted. The focus is on strengthening our smoking cessation efforts within our mental health care programs.

### **Save the date – Tribute Dinner to honour veterans**

Former Lt. Gen. Roméo Dallaire, one of Canada's most distinguished and decorated soldiers will share his no-holds-barred journey with post-traumatic stress disorder (PTSD) at the 2017 St. Joseph's Tribute Dinner hosted on September 28, 2017 by St. Joseph's Health Care Foundation. Lt. Gen. Dallaire developed PTSD during the 1994 United Nations peacekeeping mission he led in Rwanda. In his new book *Waiting for First Light* he highlights the psychological injuries many Canadian service men and women face as a result of their military service.

For ticket information, visit [sijhcfoundation.org](http://sijhcfoundation.org) or call 519-646-6085. Proceeds from Tribute 2017 will enable St. Joseph's to invest in health care discovery and innovation that would otherwise not be possible.

### **Operational Stress Injury Clinic icon**

An icon to represent the Operational Stress Injury Clinic at Parkwood Institute Main Building has been created. The icon, designed to align with the St. Joseph's brand, will be used for internal and external audience marketing and communication efforts. Clients, families, leaders and staff were involved throughout the process of the icon's creation, providing feedback and suggestions. The icon will be incorporated into the clinic's patient and family caregiver information materials, signage, the website, and other marketing materials.



### **Celebrating Canada and veterans – with a youthful touch**

To celebrate Canada's 150<sup>th</sup> anniversary, the Royal Bank of Canada (RBC) initiated [Make150 Count](#) to recognize youth who are most likely to shape the country's future. The bank gave \$150 to thousands of young Canadians across the country and challenged them to use it to make a positive impact. What they did with the money was completely up to them. The only requirement was that they show how it was spent through photos and videos.

Dylan Mastorakos of Lucan was among those nominated and selected. Recognized for his entrepreneurial drive and community involvement, Dylan chose to use his money to hold an event for veterans in the Veterans Care Program at Parkwood Institute. Held June 8, 2017, in the Western Counties Wing auditorium, the event hit various marks. It coincided with Seniors' Month in Ontario and Canada's 150<sup>th</sup>, as well as celebrated Dylan's generous donation. The veterans participated in a trivia game about influential Canadian seniors with Canadian-themed prizes up for grabs, and enjoyed Canadian-flavoured ice cream while listening to and watching Canadian music artist videos on the projection screen. The veterans enjoyed the company of each other and Dylan.

In choosing the Veterans Care Program to make a difference, Dylan said the following on RBC's Make 150 Count website: "Canada's 150th birthday is possible in large part because of our veterans. This Canada Day let's remember our veterans and all that they have done for us and our country."

### **Patients help design new gown**

A new patient gown for Parkwood Institute Mental Health Care and Southwest Centre for Forensic Mental Health Care has been designed with input from clinical staff and patients.

The request to design a new patient gown came from clinical staff at Parkwood Institute Mental Health Care to ensure we are treating inpatients with dignity while also focusing on patient safety. Current practice is to provide inpatients with a gown, pajama bottoms and a bathrobe. The team requested a gown without ties for the purpose of safety and no open back to preserve dignity. London Hospital Linen Service provided sample gowns with three arm holes that wrap around the patient. This removes the need for ties and covers the patient's body. The samples were tried on by staff and patients and adjustments made based on feedback. The new gown will replace the traditional gown for inpatients.

## **Our People**

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### **In the pursuit of safety**

At the Southwest Centre for Forensic Mental Health Care, daily "rapid safety rounds" have been initiated. This involves a brief (10 minute) teleconference between leadership and all unit leads at 8:50 am and 7:50 pm. The rounds provide an opportunity for everyone to confer, plan and have a broad view of what is happening across the program. The aim is to increase safety, enhance communication and promote a collaborative approach in the ongoing pursuit of safety for staff as well as patients.

### **Living our mission**

St. Joseph's once again finished at the top in Canadian Blood Services' annual Hospital Challenge blood drive, taking second place among 15 participating hospitals. It's the third year in a row St. Joseph's has finished in the top two, outranking Hospital for Sick Children, Toronto General and Princess Margaret. While St. Joseph's had to give up the championship trophy won last year, second place is a strong finish and an impressive accomplishment made possible by all those who took the time to roll up their sleeves and give the gift of life.

The annual challenge sees hospitals across Ontario go head-to-head to donate the most units of blood per capita (hospital employee population). This year's challenge ran during the month of May.

### **Medical leadership announcements**

- **Otolaryngology – Head and Neck Surgery:** Dr. Kevin Fung has been appointed Chief of the Department of Otolaryngology – Head and Neck Surgery for a five year term, effective July 1, 2017.
- **Anesthesia and Perioperative Medicine:** Dr. Ramiro Arellano has been appointed Interim Chief of the Department of Anesthesia and Perioperative Medicine, effective July 1, 2017. This appointment allows for the continued recruitment of a permanent citywide chief.

- **Critical Care Medicine:** Dr. Wael Haddara has been appointed Chief, Division of Critical Care Medicine, effective July 1, 2017.
- **Gastroenterology:** Dr. Nitin Khanna has been appointed Chief, Division of Gastroenterology, effective July 1, 2017.
- **Clinical Immunology and Allergy:** Dr. Harold Kim has been promoted from Interim Chief to permanent Chief, Division of Clinical Immunology and Allergy, effective July 1, 2017.

### **Making St. Joseph's safer**

A new system at St. Joseph's will improve the organization's response to workplace injuries, allowing hazards and injuries to be addressed more effectively and efficiently. The electronic Workplace Occurrence Reporting System (WORS), which launched July 1, replaces the paper version of the workplace occurrence report. The system provides immediate notification of hazard and injury reporting, helping to improve our ability to respond to hazards to prevent further injuries. It also improves St. Joseph's ability to meet its responsibility to offer safe work within an employee's abilities as soon as possible following an incident. As a result, the employee is able to stay at work and/or return-to-work safely.

An e-Learning module has been created for staff to explain the importance of immediate reporting, how to report and what to do following reporting of an injury or hazard.

### **Changes to health reviews for new employees**

To ensure the safety of patients and staff and in keeping with our strategic priority focused on the relentless pursuit of safety, St. Joseph's health review process changed as of July 15.

Regulation 965, Section 4, of the Public Hospitals Act requires hospitals to have a health surveillance program that meets requirements established in the various communicable disease surveillance protocols published jointly by the Ontario Hospital Association (OHA) and the Ontario Medical Association (OMA). Completion of an occupational health review/screen is a condition of employment, requirement to volunteer, and credentialing requirement for staff, volunteers and professional staff respectively. This review ensures all immunization/immunity and tuberculosis testing requirements are met in accordance with the OHA/OMA protocols. It also identifies any need to accommodate a new worker related to a disability.

Previously, the health review was initiated after commencement of work or placement by attending an appointment within Occupational Health and Safety Services (OHSS). On average it was taking 34 days to complete with many situations taking longer. This presented risk of communicable disease transmission to patients and staff which could be avoided. In addition, while the new employee or volunteer was asked to submit their previous immunization records to OHSS, most did not resulting in OHSS completing blood work to confirm immune status. The immunization/immunity and tuberculosis testing requirements must now be completed and submitted before the new employee's start date, avoiding the need for an appointment in OHSS. The new employee or volunteer will be required to gather and submit their previous records to avoid unnecessary testing by St. Joseph's. This same process is in place for credentialing of professional staff.

## **Our Finances**

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### **Sharing our experiences**

The Ontario Auditor General (OAG) is conducting a review of the province's Design-Build-Finance Maintain (DBFM) model – a public-private partnership in which the private sector designs, builds

and finances a building for the public sector and provides facility management or maintenance services under a long-term agreement.

As part of the review, the OAG asked to meet with St. Joseph's to discuss our extensive experience with the DBFM model in the planning and building of our mental health care facilities. Vice presidents Lori Higgs and Karen Stone, and directors Terry Maslen and David Ross toured the OAG auditor through the Parkwood Institute Mental Health Care Building and sat down to discuss our experiences. Our feedback will contribute to the OAG's final report. A draft report will be shared with us prior to it being finalized and publicly available.

## Clinical, Education and Research Excellence ---

### **Probiotics could improve survival rates in honey bees exposed to pesticide, study finds**

In a new study from Lawson Health Research Institute and Western University, researchers have shown that probiotics can potentially protect honey bees from the toxic effects of pesticides.

Honey bees are critical to agriculture as they pollinate approximately 35 per cent of the global food crop, contributing an estimated \$4.39 billion per year to the Canadian economy. Pesticides are currently used to maximize crop yields, but the most common pesticides – neonicotinoid insecticides – are a major factor in colony collapse disorder which is killing honey bee populations.

A current dilemma in agriculture is how to prevent bee decline while mitigating crop losses. The team of Dr. Gregor Reid, Director for the Canadian Centre for Human Microbiome and Probiotic Research at Lawson, set out to see if probiotics could counter the toxic effects of pesticides and improve honey bee survival. The study was performed in Dr. Reid's lab at St. Joseph's Hospital. Researchers used fruit flies as a well-known model for studying pesticide toxicity in honey bees. The researchers found that fruit flies exposed to one of the world's most commonly used pesticides, imidacloprid, experienced changes to their microbiota and were more susceptible to infections. The flies were exposed to a comparable amount of pesticide as honey bees in the field.

By administering a specific strain of probiotic lactobacilli, survival among fruit flies exposed to the pesticide improved significantly. The study showed that probiotic lactobacilli can potentially help honey bees to live longer after exposure to pesticides.

### **Reducing diabetes-related amputations**

Half of all limb amputations in Ontario are directly related to diabetes. Of those, 85 per cent are a result of a foot ulcer (breakdown of the skin) that won't heal. In an effort to reduce diabetes-related amputations caused by foot ulcers, the Primary Care Diabetes Support Program (PCDSP) team has developed a standardized screening, assessment and referral tool called the "Harmonized Diabetic Foot Ulcer Risk Stratification and Referral Algorithm." The tool is fast, simple and reliable. It allows clinicians to quickly look for red flags before foot ulcers develop so that referrals can be made for preventative care, education can be provided to the patient, and close monitoring can be initiated.

The tool is now being used by the PCDSP, located at St. Joseph's Family Medical and Dental Centre (FMDC), where it has led to 50 per cent more patients being screened and a 10 per cent increase in patients being identified with diabetic foot complications who would have otherwise been missed. The goal is to introduce the tool to family physicians at the FMDC and across the city with a view to creating a coordinated approach to foot care in the region that ensures

individuals are receiving the best care by the most appropriate care provider in a timely way. The team's efforts recently won them St. Joseph's Sandra Letton Quality Award. (See Recognitions and Celebrations section of this report)

### **Lawson at the movies**

The Canadian premiere of a film created by Dr. Gregor Reid and a Dutch /African production team was shown on June 30, 2017 in the Shuttleworth Auditorium at St. Joseph's Hospital. The one-hour film, called "The Promised Land", was produced as a unique and engaging way to showcase the [Fermented Food for Life](#) project and promote the idea of good nutrition through fermented food.

Set in Kenya and directed by Charles Liburd of No Money No Cry Films, the movie portrays the story of two children who are good at soccer but are bullied by teenagers. Their life begins to improve when their mother gets an opportunity to produce probiotic yogurt.

The recent showing gave the audience a better appreciation for the environment and challenges faced by those in Africa who could benefit from the project. As the film is part of a research project designed to create a sustainable microenterprise model for poor people, the audience filled out a questionnaire assessing their perception on how well such a film might convey these messages and attract producers and consumers to reach more communities in Uganda, Tanzania and Kenya.

### **Preparing internationally educated nurses for the Canadian workforce**

The Regional Rehabilitation Program at Parkwood Institute recently hosted three internationally educated registered practical nurses (RPNs) along with their clinical teacher from Fanshawe College as part of Fanshawe's Interprofessional Education for Internationally Educated Nurses (IPEIEN) program. From June 6 to July 25, 2017 the student nurses were on the Regional Rehabilitation Unit twice a week for 12-hour day shifts.

In 2014, the Ministry of Citizenship and Immigration funded George Brown College, Fanshawe College and three other colleges to begin implementing IPEIEN across Ontario. In 2016, Fanshawe, George Brown and the Toronto Rehabilitation Institute collaborated with St. Joseph's to launch a pilot project, which was implemented on the Musculoskeletal Rehabilitation Unit and Geriatric Rehabilitation Unit, both part of Specialized Geriatric Services at Parkwood Institute. You can read about this pilot in [St. Joseph's Annual Report](#). The program has now expanded into the Regional Rehabilitation Program.

Interprofessional collaborative practice and teamwork is new to many of these internationally educated nurses. Known to positively impact both patients and health care practitioners, interprofessional practice and teamwork is an entry-to-practice competency for Ontario registered nurses and RPNs. The IPEIEN program helps prepare internationally trained nurses for the collaborative practice settings. The student nurses gain an understanding of the Canadian health care context and are provided with skills and hands-on experience to participate as confident members of an interprofessional team once they join the workforce.

### **Scientific leadership – aging, mental health, rehabilitation and recovery**

Following an international search, Dr. Cheryl Forchuk has been appointed to The Beryl and Richard Ivey Research Chair in Aging, Mental Health, Rehabilitation and Recovery, effective July 1, 2017.

Funded through an endowment established in 2001 by St. Joseph's Health Care Foundation with the support of many donors and lead support from the Ivey family, The Beryl and Richard Ivey Research Chair in Aging, Mental Health, Rehabilitation and Recovery provides scientific leadership to the primary areas of research within the Parkwood Institute Research Group.

Dr. Forchuk will continue her renowned research in homelessness, poverty and mental health while also assuming strategic leadership of the Parkwood Institute Research program of Lawson Health Research Institute. She brings enormous experience in research partnerships between community organizations, all levels of government and the private sector, and in the creation of evidence to support innovative public policy to improve the lives of disadvantaged Canadians.

Dr. Forchuk will also continue in her role as an Assistant Scientific Director of Lawson and leader of the Mental Health Research Group.

### **Predicting effectiveness of ovarian cancer treatment**

Technology developed at Western University and Lawson Health Research Institute can provide a new window into whether or not patients are responding to treatment for advanced ovarian cancer. A multi-centre clinical trial has demonstrated that CT perfusion, which measures blood flow and blood volume to tumours associated with ovarian cancer, can provide an accurate prediction of how well a treatment is working, allowing physicians the opportunity to better plan treatment.

The study found that blood flow tends to decrease in those who will survive longer without symptoms. For those whose symptoms will recur within six months, blood flow to the tumour increases after treatment. With CT perfusion, explains Ting-Yim Lee, Lawson scientist and a medical physicist at St. Joseph's, researchers were able to see a change in the blood flow as early as four weeks after treatment. Rather than waiting months to determine whether symptoms will recur, they were able to tell whether the treatment is effective much sooner.

According to the study, published in the journal *Clinical Cancer Research*, 60 to 85 per cent of ovarian cancer patients will relapse after initial treatment. Using CT perfusion to identify which patients are more likely to benefit from a specific therapy enables better patient selection and treatment planning. It also provides a biomarker for future clinical trials assessing new treatment options. Read more on [Lawson's website](#).

### **Serving up tray assembly accuracy in the operating room**

On average, Central Processing staff are responsible for assembling 3,000 instrument trays every month for the operating rooms at St. Joseph's Hospital. As part of a quality improvement initiative, Central Processing and the operating room (OR) team have developed a process to ensure operating room trays consistently contain all the instruments needed for each procedure. A case cart/instrument tray audit tool was developed that can be completed online by the OR staff to report a missing item or error in what they have received.

'Case carts' are the carts of trays and supplies that are picked each evening for every procedure the following day. 'Trays' are the instrument trays that are cleaned, assembled and sterilized following each procedure.

The online tool generates an email message to the Central Processing and OR leaders. From the information, the leaders determine how and why each error occurred and follow up. They have also uncovered supply issues for certain commonly used instruments and have made bulk purchases to ensure stock is available.

Using the new process, Central Processing has achieved 97 per cent tray assembly accuracy on cases going to the OR from Central Processing. Work continues to reduce actual number of errors to zero.

### **Roth | McFarlane Hand and Upper Limb Centre marks 25 years**

On June 3, 2017, the Roth | McFarlane Hand and Upper Limb Centre (HULC) celebrated 25 years of clinical and research excellence. Fellows trained through the years returned for a special day-long educational event. They came from around the world and many disciplines, expressing gratitude for their experience at HULC.

HULC has been advancing care for patients with upper limb injuries and disorders in Southwestern Ontario and across the globe since it was founded at St. Joseph's Hospital in 1992 by doctors James Roth and Robert McFarlane. It has grown to become the largest upper limb centre in Canada and is now recognized as a world-renowned centre of excellence in education, research, and the diagnosis, care and treatment of patients with complex conditions affecting hands, wrists, elbows and shoulders. Below are some fascinating fun facts about HULC:

#### **25 years – HULC by the numbers:**

- More than \$26 million dollars in research funding
- More than 850 articles published in medical journals
- More than 680,000 patient visits
- More than 200,000 therapy visits
- More than 300 medical professionals trained (orthopedic and plastic surgeons, emergency room and other physicians, nurses, physiotherapists and occupational therapists)
- More than 90,000 surgeries
- 350 fingers reattached
- Seven arms reattached

### **Celebrating Canada 150 and research milestones**

Canada's 150th anniversary of confederation is an opportunity to celebrate the impact of health research over the last 150 years. To do so, Lawson Health Research Institute has launched a [Canada 150 website](#) to celebrate the past and present in London research milestones, and to look forward to how Lawson research can shape the future of health care.

In related news, [Lawson's facts and stats for 2017](#) are now available, providing an impressive overview of Lawson at a glance.

### **Sharing collaborative success**

The collaboration between London Health Sciences Centre and Parkwood Institute in the timely transition of stroke patients from acute care to inpatient rehabilitation will be highlighted at the 2017 Canadian Stroke Congress in Calgary September 9-11, 2017. In the joint submission, entitled "Two Sites – One Team, Improving Transitions from Acute to Rehabilitation", the team summarized some of the key initiatives and successes of their collaborative team work to enable them to be as best prepared as possible for the implementation of the South West LHIN Stroke Project. This meant working together to be as supportive and efficient as possible in transitioning patients from one site to the other while being conscious of each other's length-of-stay parameters and patient acuity/rehabilitation needs.

At the congress, which attracts more than 800 delegates from across Canada and around the world, experts share the latest research findings, exchange ideas, and make the connections that will change the future of stroke. Being accepted to present at the congress is an achievement.

## **Fostering our Partnerships**

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### **Connecting Care to Home program wins national quality award**

The Connecting Care to Home (CC2H) program is a recipient of the 3M Health Care Quality Team Awards. Presented by the Canadian College of Health Leaders, the national awards recognize three important elements: innovation, quality and teamwork.

CC2H, which won in the category “Quality Improvement Initiative(s) Across a Health System”, was initiated by London Health Sciences Centre (LHSC) and the South West Community Care Access Centre (now part of the South West LHIN). It is an integrated, multi-disciplinary team approach across care settings, including hospital, community and primary care, to support patients with chronic diseases that may experience higher rates of emergency department visits and readmission following a hospital stay. LHSC, the South West LHIN, St. Joseph’s and the Thames Valley Family Health Team partner to provide CC2H.

CC2H currently focuses on patients with chronic obstructive pulmonary disease (COPD) and heart failure (HF). CC2H successfully integrates patient care between hospital and home by offering patients education and involvement, leading practice care pathways, physician participation through teleconference with both family and hospital physicians, clinical patient data, a 24/7 live support phone line and supported self-care initiatives. Patients are given the knowledge and tools to manage their symptoms at home.

This approach improves the patient experience, clinical outcomes, provider experience, and lowers overall health care costs. Data shows that hospital length of stay, readmission within 30 days and total cost per patient to the health care system have declined.

### **Improving the patient experience in the classroom**

To improve school services for adolescent inpatients at Parkwood Institute’s Mental Health Care Building, a partnership meeting and review took place with the Adolescent Psychiatry Program team and the principal and teachers who support W.D. Sutton School services within our program. W.D. Sutton School provides an administrative umbrella under which various educational programs in the community's care, treatment and correctional facilities are coordinated. There are currently 17 W.D. Sutton School locations, 33.5 classroom teachers, one principal and one vice-principal.

As a result of the review, opportunities were created to pilot a more inclusive model of child and youth worker staff within the classroom during the school hours. The board policy states that a hospital staff member must be present to supervise the activities and this was initially implemented in a way that saw the child and youth worker staff restricted to more of an observer role. With this change child and youth workers are engaged in the classroom, encouraging the students (patients) and reinforcing the principles of dialectical behavior therapy and other goals identified in their plans of care.

### **Sharing knowledge to improve care**

Leaders from Southwest Centre for Forensic Mental Health Care hosted two forensic managers and a safety specialist from the Forensic Psychiatry Program of St Joseph’s Healthcare Hamilton.

The leaders reviewed each other's perspectives on how our forensic programs function. Discussions included physical environments and how they impact patient care, staffing ratios, risk management strategies and general day-to-day functioning. The leaders learned that they have similar staffing models, risk management strategies and leadership perspectives regarding staff and patient care.

The Hamilton leaders were impressed by Southwest Centre's quality of work life travelling coffee break and the use of medication doors in the seclusion rooms. The Southwest Centre leaders, meanwhile, are interested in Hamilton's use of a "safety specialist" and are exploring this role further.

### **Reaching out**

In June 2017, physiotherapist Fabian Krupski and occupational therapist Martha Scott, both at Parkwood Institute, provided education and consultation to the Oxford VON Stroke Adult Day Program.

The purpose of Fabian's visit was to address questions from VON staff regarding specific equipment and to review/observe some of the exercises. It was also an opportunity for participants of the program to ask questions about their individual care plans. Fabian has been providing similar support to the stroke day program in Aylmer.

In a separate visit, Martha provided education to program participants on a number of areas of expressed interest, such as return to driving, return to work and complementary therapies.

This type of consultation is important to support the day programs in the community, which are a vital asset to the stroke population in the region.

### **Shaping post-concussion care across the province**

Speech language pathologist Penny Welch-West and physiotherapist Shannon McGuire have dedicated many personal hours to the consulting, planning and development of the Ontario Neurotrauma Foundation (ONF) "Standards for Post-Concussion Care: From diagnosis to the interdisciplinary concussion clinic." These standards were publicly released June 13, 2017, and represent more than a year of collaboration between the Concussion Advisory Committee and more than 50 additional experts from the field. The ONF Standards for Post-Concussion Care focus on guiding delivery of the right care at the right time by the right provider anywhere in Ontario. This work supports improved post-concussion care across the province and empowers the patient to better manage their care. Next steps include expanding this work to include education strategies and implementation with stakeholder groups and audiences from across the province.

## **Recognitions and Celebrations**

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### **Improving care for older adults**

A St. Joseph's-led project titled "Assess and Restore: Improving Health Outcomes for Older Adults" is the 2017 South West LHIN Quality Award winner for large projects. The goal of the project was to develop a system-wide approach in the care of older adults.

St. Joseph's collaborated with several partner organizations across the region to proactively identify older adults in the community with restorative potential and at risk for losing their independence. To do so they implemented a standardized screening tool that clinicians can use

to evaluate the risk level of older adults living in the community, and developed assessment and navigation resources. These resources help clinicians provide appropriate assessment and intervention for patients, earlier access to preventative and restorative services to avoid hospitalizations, and direct access to inpatient rehabilitation care when required.

Through the project, three website resources were created: a resource database for health care providers; a toolkit to support clinical education and delivery of comprehensive geriatric assessment; and an online venue to connect older adults and their caregivers with community resources.

The South West LHIN Quality Awards recognize organizations that have implemented a sustainable quality improvement initiative by working together to achieve performance excellence.

### **2017 Excellence in Professional Practice Award**

As previously reported, The Excellence in Professional Practice Awards were established this year as a way to recognize both nursing and other allied health discipline staff who are at the heart of patient and resident care at St. Joseph's. These awards are an expansion to the previous Nursing Excellence Awards and include recognition opportunities for professional practice disciplines. The recipients of these prestigious awards are nominated by their peers or leaders for their efforts in demonstrating excellence. The 2017 recipients are:

- **Excellence in Clinical Practice:**
  - Complex Care, Rehabilitation and Geriatrics – Dr. Jason Carr, psychologist
  - Complex Care, Rehabilitation and Geriatrics – Cathy Okolisan, registered practical nurse
  - Acute Ambulatory Care – Suzie Hettinga, registered nurse
  - Mental Health – Tanya Goertz, occupational therapist
- **Excellence in Leadership:** Stephanie Cornell, physiotherapist
- **Excellence in Teaching and Coaching:** Shrikant Chinchalkar, occupational therapist
- **Excellence in Innovation and Evidence Informed Practice:** Christina Seely, registered dietitian

### **An outstanding alumnus**

Dr. Shawn Steele, dentist and Site Chief for the dental clinics at Parkwood Institute and Southwest Centre for Forensic Mental Health Care, received Western University's Young Alumni Award of Distinction - Dentistry. The award is presented annually by Schulich School of Medicine and Dentistry to a graduate who is under the age of 40 and has made sustained and outstanding contributions to Schulich Dentistry, the art and science of dentistry, research, or the profession of dentistry.

In 2014, when Parkwood Institute's Mental Health Care Building opened, the mental health care dental team merged with the Parkwood Institute dental team to form one team and provide consistent services for all patients. Dr. Steele leads this team. He is described as a caring and compassionate dentist, committed educator, community leader and advocate for social justice in oral health care. Graduating from Schulich Dentistry in 2005, Dr. Steele is well known for his desire to increase access to dental care for the most vulnerable in our community. He has developed a model of dental outreach at Parkwood Institute and Southwest Centre that allows patients to continue receiving dental care after discharge.

Read more about Dr. Steele on [Western's website](#).

## President's Awards

St. Joseph's President's Awards recognize staff, physicians and community partners who have made outstanding contributions to the mission, culture, collaboration, quality of care and performance of St. Joseph's. Underpinned by our Catholic mission, our core values and ethical practice, these awards and the people who receive them exemplify St. Joseph's commitment to excellence and community service. Presentation of this year's President's Awards, which includes the Kathy Burrill Leadership in Mission Award, Aspiring Leader Award, Sandra Letton Quality Award and Community Partner of Distinction Award, took place on June 22, 2017. The recipients are:

- **Aspiring leader Award:** Encouraging the leaders of tomorrow, this award is given each year to a formal or informal leader who has shown significant skill development and has more recently risen to the challenges of a leadership role or activity. Recipient: **Erin Watson**, Coordinator of Specialized Geriatric Services at Parkwood Institute.
- **Community Partner of Distinction Award:** This award recognizes partnership and collaboration – essential requirements of health care delivery and community service. It is our way of expressing appreciation of other organizations who demonstrate their commitment to collaboration through formal or informal partnerships in support of our mission and/or the advancement of the health care system. Recipient: **St. Leonard's Community Services, London and Region**.
- **Kathy Burrill Leadership in Mission Award:** This award recognizes a St. Joseph's leader or volunteer who has made an outstanding contribution to the hospital's mission. It celebrates extraordinary efforts to exemplify and advance St. Joseph's roles and values as a Catholic, academic and community-oriented health care provider. Recipient: **Julie Gagliardi**, Coordinator of Regional Rehabilitation and the Neurobehavioural Rehabilitation Centre at Parkwood Institute.
- **Sandra Letton Quality Award:** The award recognizes St. Joseph's teams who have made an outstanding contribution toward improvement in quality patient care, raise awareness of the importance of this work, and contribute to an overall culture of quality at St. Joseph's. Recipient: **Primary Care Diabetes Support Program** located at St. Joseph's Family Medical and Dental Centre.

On [St. Joseph' website](#), read about each recipient and why they are standouts in advancing the mission and values of St. Joseph's.

## Excellence in Communications

The annual APEX Awards are presented in 11 major categories to honor outstanding work by professionals who write, edit and manage business communications. Communication consultant Amanda Jackman with Communication and Public Affairs has won two 2017 APEX Awards for Communication Excellence for the Diabetes Vision Screening project and the department's Emergency Communication Plan.

Holly-Ann Campbell, Interim Vice President, Communication and Stakeholder Relations, is also the recipient of two APEX Awards for her previous work at The Scarborough Hospital. Holly-Ann received a Grand Award – Campaigns for the hospital's 2016 accreditation communications program, and an Excellence Award – Most Improved Publication for the donor publication, *Caring Connections*.

## Other

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### **Fair Workplaces, Better Jobs Act, 2017,**

On June 1, 2017, the Ontario government introduced legislation in response to the recent release of the Changing Workplaces Review [final report](#). The Changing Workplaces Review is the first independent review commissioned by the Ontario government seeking recommendations for legislative change to the Employment Standards Act, 2000 and the Labour Relations Act, 1995. The government appointed special advisors to hold province-wide consultations to gather information from Ontarians on potential updates and amendments to the two pieces of legislation.

The [Fair Workplaces, Better Jobs Act, 2017](#), proposes amendments to Ontario's Employment Standards Act and Labour Relations Act. The government's announcement is available [here](#). A backgrounder on the proposed legislation is available [here](#).

The Ontario Hospital Association (OHA) provided two formal submissions to government during the consultation process. The original submission can be found [here](#). The OHA is currently reviewing the new legislation.

### **Improving the Last Stages of Life project**

The Law Commission of Ontario (LCO) has released a discussion paper and launched province-wide consultations for its [Improving the Last Stages of Life project](#). The project responds to public concerns regarding how the law shapes the rights, choices, and quality of life for people in Ontario who are in the last stages of life. It addresses the experiences of everyone involved in the dying process, including individuals, caregivers and other family and friends, health care institutions and professionals, government, and other professionals and community organizations.

The LCO is currently conducting public consultations with the goal of “identifying and recommending law reforms that are concrete, precise and responsive to the experiences of persons in the last stages of life.” The consultations will run from June through September 2017 with the results to be released in early 2018.

### **Ontario enhancing emergency services across the province**

In June 2017, the Ontario government announced it is investing in a new medical dispatch system that will help triage and prioritize 911 calls for ambulance services. This new system, expected to be in place in the first site by March 2018, will prioritize calls based on patient need and redirect low acuity patients to locations other than emergency departments in instances where it would be safe and appropriate to do so. The province also plans to update the Ambulance Act through a consultation process. The proposed changes, if passed, would enable the government to:

- Expand the scope of paramedics to provide appropriate on-scene treatment and refer patients to non-hospital options, such as primary care and community-based care
- Provide funding for two pilots in interested municipalities that will enable firefighters certified as paramedics to respond to low acuity calls to treat and release or treat and refer a patient, and provide symptom relief to high acuity calls

### **Year in Review – Council Academic Hospitals of Ontario**

The Council of Academic Hospitals of Ontario (CAHO) has released its [2016-2017 Year in Review](#). Over the past year, CAHO has continued demonstrating the unique and vital role of research hospitals under the banner of its ‘Healthier, Wealthier, Smarter’ campaign. In partnership with its committees, task forces, patients and external partners, CAHO has also undertaken a variety of initiatives and activities to advance its strategic areas of focus. Some examples include:

- CAHO has been appointed as an ‘Innovation Broker’ for the province by the Ministry of Health and Long-Term Care. As a partner to the Office of the Chief Health Innovation Strategist, CAHO and its members are connecting innovators and removing barriers so that innovations are brought into hospitals and the health care system faster, benefiting the Ontario economy and improving patient care.
- CAHO has advanced work on increasing patient and public involvement, engagement and participation in health research.
- Lab tours and hospital “field trips” were initiated, generating interest and participation for member hospitals and extensive social media reach.

### **Province launches care coordination services for medical assistance in dying**

Ontario has established a care coordination service (CCS) to help patients and clinicians access information and supports for medical assistance in dying (MAID) and other end-of-life options. Supports available for patients and their caregivers include information about end-of-life options such as hospice care, other palliative care options in their community, and MAID. Patients and caregivers looking for information and support on MAID can also request to be connected to a physician or nurse practitioner who can provide MAID-related services.

Supports for physicians and nurse practitioners include facilitating a connection to doctors or nurse practitioners who can provide MAID services or a second assessment, and to a community pharmacist who will dispense the drugs needed for MAID.

The CCS can be contacted through a 1-800 number Monday to Friday during business hours with service available in English and French, and translation assistance in other languages upon request. Beginning September 1, 2017, the information line will be available 24/7. More information is available [here](#).

### **New patient safety guide**

Health Quality Ontario has partnered with the Canadian Patient Safety Institute and the Atlantic Health Quality and Patient Safety Collaborative to create *Engaging Patients in Patient Safety – A Canadian Guide*. This online resource can be used across all health care settings and demonstrates how thoughtful engagement and partnership can lead to safer care for patients and more successful health outcomes.

Visit Health Quality Ontario’s [Patient Engagement Tools and Resources hub](#) to learn more and download the guide.

### **Hospital naming directive – an update**

As previously reported, the Ministry of Health and Long-Term Care issued a [draft directive](#) on hospital naming. The draft directive sets out restrictions on hospitals’ discretion to change their corporate and site names. Such name changes would be subject to Local Health Integration Network (LHIN) and ministry approval. As drafted, the directive will have significant implications on health care philanthropy.

Through public consultation, the ministry sought hospitals’ feedback regarding the proposed directive. The Ontario Hospital Association (OHA), working in close partnership with the Association of Healthcare Philanthropy and the Association of Fundraising Professionals, has done extensive government outreach to raise awareness of the detrimental impact this directive could have on hospitals. The OHA made a [formal submission](#) to government providing policy alternatives which preserve the vital role that philanthropy plays in the hospital sector.

## Environmental Scan

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### **Newcomers struggling with health care language barriers**

All forms of government and health care providers are being urged to increase access to professional interpretation services. Retired London psychologist Beth Mitchell is lobbying for health interpretation to be recognized as a necessity, as outlined in a report commissioned by a working group of the London Middlesex Local Immigration Partnership.

Mitchell said language interpretation services are often provided in large-scale hospitals but many people who need translations aren't made aware the service exists. Family physicians also struggle with accessibility to community translators.

The report looks into the financial and emotional cost of language barriers within the health care sector. Several solutions are outlined, including health care provider sensitivity training and an educational program to raise awareness of community services offering interpretation services to immigrants or newcomers who need it.

Across Languages and the Cross Cultural Learner Centre (CCLC) offers medical interpreters to health care providers in London. The agency has 30 medically trained interpreters ready to accompany people who have limited English language proficiency. But CCLC director Valerian Marochko said most of interpreters are swamped with requests.

Mitchell is rolling out a medical questionnaire as a pilot project to help health care providers offer adequate interpretation services. For example, patients may not ask for interpretation because they are embarrassed. A question health care providers can ask is "How would you be comfortable telling me about your medical issue and in what language?" Mitchell hopes the questionnaire becomes standard practice for the London area.

[CBC London, June 27, 2017](#)

### **More than 60,000 Canadians left the country for medical treatment in 2016**

An estimated 63,459 Canadians travelled abroad for medical care in 2016 – up nearly 40 per cent over the previous year, finds a new study released June 29, 2017, by the Fraser Institute.

According to the study, [Leaving Canada for Medical Care, 2017](#), more patients (9,454) travelled abroad for general surgeries than any other treatment. High numbers of Canadians also left the country for urology treatment (6,426), internal medicine procedures such as colonoscopies, gastroscopies and angiographies (5,095) and ophthalmology treatment (3,990).

Among physicians in Canada, otolaryngologists (which include ear, nose and throat specialists) reported the highest proportion (2.1 per cent) of patients travelling abroad for treatment, followed by neurosurgeons (1.9 per cent).

[Fraser Institute, June 29, 2017](#)

### **Ontario court orders end to secrecy around names of highest-paid doctors**

Ontario's Divisional Court has ordered an end to the secrecy surrounding the province's highest-billing doctors. A three-judge panel dismissed an application to quash an order from Ontario's Information and Privacy Commissioner to make the names of the highest-paid physicians public, ruling that the order was a reasonable one.

The court accepted that the names of the doctors, in conjunction with the amounts they receive in OHIP payments and their medical specialties, are not “personal information.” They are, therefore, not exempt from disclosure under the province’s Freedom of Information and Protection of Privacy Act.

The Toronto Star has been trying to get physician-identified payment data from the province for more than three years. The effort started with a freedom of information request to Ontario’s Ministry of Health and Long-term Care in 2014. The ministry refused to release the names, arguing that doing so would be an unjustified invasion of privacy. The Star successfully appealed to the privacy commissioner, but then three groups of doctors, including the Ontario Medical Association (OMA), sought a judicial review.

In an unanimous decision released June 30, 2017, the court rejected the doctors’ argument that the Star had failed to establish a proper rationale for the disclosure. Justice Ian Nordheimer, writing on behalf of the majority, said the argument ignores the well-established rationale that underlies access to information legislation.

“The rationale is that the public is entitled to information in the possession of their governments so that the public may, among other things, hold their governments accountable,” the decision states.

The OMA plans to appeal the court ruling.

[Toronto Star, June 30, 2017](#)

### **Meet one of only two London doctors willing to help their patients die**

Although medically assisted dying has been law for more than a year in Canada, Dr. Scott Anderson is one of only two physicians in the London area willing to help his patients die.

Dr. Anderson, an emergency intensive care specialist at London Health Sciences Centre, is one of only 74 doctors in Ontario and 11 in the South West Local Health Integration Network registered with the province's 1-800 number to help connect patients seeking the procedure with doctors willing to perform it. Dr. Anderson suspects that, of those 11 doctors in the London area, he and only one other will actually perform a medically assisted death (a third is being trained). He believes the others are only willing to provide the patient consultations required for a medically assisted death.

Dr. Anderson sees helping patients end their life as necessary, saying it's about allowing the patient to have an autonomous decision about their own health care. In practice, however, he said there are too many barriers for what he believes should be a care option available to every Canadian who wants and qualifies for it.

[CBC London, July 4, 2017](#)

### **For-fee service connects Ontario doctors and patients via video chat**

A controversial service allows patients, for a fee, to consult with doctors via video chat over the Internet. For fees that start at \$49 for a weekday visit, patients can consult with doctors about a number of common ailments, receive a diagnosis, even get a prescription sent to the pharmacy of their choice.

The service, called [Maple](#), it was started Dr. Brett Belchetz last November and now operates in seven provinces. Dr. Belchetz, an emergency physician in Toronto, sees the service as a way to expand patient access and eliminate necessary and expensive visits to walk-in clinics and emergency rooms. He believes that for most patient visits, he can give them the diagnosis and treatment they need "without laying a hand on them."

Once patients are registered and triaged, they can schedule an "appointment" with a doctor online. Prices start at \$49 for a weekday consultation, and range up to \$99 for a consultation after midnight. Annual family memberships that offer unlimited consultation can be had for \$580.

Maple doctors keep the majority of what patients pay, with Maple collecting a "small fee" for arranging the visit. This can be done in a publicly funded health care system because doctors can only charge the Ontario Health Insurance Plan (OHIP) for doctor visits that happen in person. At the same time, doctors can charge for services that aren't insurable under the provincial plan. Belchetz says he'd love to see Maple patients be able to bill OHIP for their visits.

The health ministry says it's monitoring health providers like Maple.

[CBC News, July 10, 2017](#)

### **Residential care could have been delayed or avoided for more than one in five seniors**

A new report from the Canadian Institute for Health Information (CIHI) looked at a sample of Canadian seniors and found that more than 20 per cent of those who were admitted to residential care might have been able to remain at home with appropriate supports.

[Seniors in Transition: Exploring Pathways Across the Care Continuum](#) studied more than 59,000 seniors in 35 health regions over a three-year period whose care needs were assessed by health care professionals. Factors that influenced admission to residential care (also known as long-term care) included

- The need for physical assistance
- Cognitive impairment
- Wandering behaviours
- Living alone
- Having a caregiver who is unable to continue providing care

The findings also showed that seniors assessed in hospital were significantly more likely to be admitted to residential care than those assessed in the community.

Residential care is typically the most intensive and expensive service in the continuing care sector as it provides care to people with the most complex needs. Within the next 20 years, the population of older seniors (age 75 and older) – who rely more heavily on continuing care services – is expected to double, from 2.6 million to 5.7 million.

[Canadian Institute for Health Information, July 11, 2017](#)

### **Canada ranks third-last in study of health care in 11 rich countries**

Canada placed third from the bottom in a major new study of health care in 11 affluent nations, a score that reflects this country's poor performance on measures such as infant mortality, access to after-hours medical care and the affordability of dental visits and prescription drugs.

Canada's ninth-place finish is a slight improvement over 2014, when the Commonwealth Fund, a New York-based private research foundation, put Canada in 10th place, ahead of only the United States.

In the group's new report, released July 14, 2017, Canada pulled ahead of France, but stayed well behind such standouts as the United Kingdom, Australia and the Netherlands, which ranked first, second and third. The United States remained in the basement of the rankings.

"The domains that put Canada in ninth place are really access, equity and health care outcomes," said Eric Schneider, senior vice-president for policy and research at the Commonwealth Fund. "On those domains of quality, [Canada] is fairly similar to the U.S."

[Globe and Mail, July 14, 2017](#)

### **Health unit asks province for \$1.5 million to address London HIV epidemic**

The Middlesex London Health Unit (MLHU) is getting a funding boost to help address the region's opioid crisis as HIV rates climb. Upwards of \$250,000 will be given to the health unit as part of the provincial government's \$15-million investment to support opioid response initiatives across Ontario. The funding is meant to help increase staffing levels to address the crisis, enhance the naloxone program and support work on early warning and monitoring for opioid overdoses.

During the Board of Health meeting on July 20, 2017, officials also outlined a provincial funding request for more than \$1.5 million over a three-year period to address the current HIV epidemic. Rates of HIV, hepatitis C and other diseases are on the rise across the region.

"It's spreading through people who inject drugs in London and it's really out of keeping with what's happening in the rest of the province," said Dr. Chris Mackie, medical officer of health for the MLHU.

The health unit hopes the province will cover the cost of four outreach nurses and one harm reduction outreach coordinator, along with other program costs.

[Global News/AM980, July 21, 2017](#)

## **St. Joseph's in the News**

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[Club Scene: Rock the '90s for St. Joe's](#), London Free Press, June 28, 2019

[Simple CT scan shows responsiveness to ovarian cancer treatment: Researchers](#), Global News/AM980, June 28, 2017

[CT technology shows how blood flow can predict effectiveness of ovarian cancer treatment](#), Science Daily, June 28, 2017

[Success starts with putting audience first](#), Administrative Assistant's Update, July 2017

[Meet one of only two London doctors willing to help their patients die](#), CBC London, July 4, 2017

[Why you can't get a doctor-assisted death at St. Joseph's in London](#), CBC London, July 4, 2017

[Test-driving the Dream cars](#), Our London, May 31, 2017

[London researchers discover probiotics may help insects fend off infections](#), London Free Press, July 11, 2017

[Winners of London's Dream Lottery to be announced Thursday morning](#), Global News/AM980, July 13, 2017

[St. Thomas man, Dorchester woman Dream Lottery winners](#), Blackburn News, July 13, 2017

[Dream Lottery: St. Thomas man who won hospital lottery top prize almost speechless](#), London Free Press, July 13, 2017

[Imagine the freedom](#), CTV London, July 13, 2017

[London Dream Lottery winners announced](#), Global News/AM980, July 13, 2017

[Dream Lottery winners continue to share the joy](#), Our London, July 13, 2017

[St. Joe's medical milestone marked](#), Our London, July 20, 2017

[Masterful hands guide their way through surgery](#), Hospital News, July 21 2017