

To: St. Joseph's Board of Directors  
From: Dr. Gillian Kernaghan, President and CEO  
Date: May 22, 2019

---

This month, I hosted my May staff and physician engagement sessions – seven in total. A key focus of this round of sessions was the looming transformation of Ontario's health care system and implications for St. Joseph's. The turn out was excellent at all sites.

On a related note, St. Joseph's, London Health Sciences Centre and several of our regional and community partners jointly submitted an Ontario Health Team self-assessment by the May 15 deadline. Based on self-assessment evaluations by the Ministry of Health and Long-Term Care, groups will be invited to complete a full application to form an Ontario Health Team. At the same time, conversations are beginning about how London's hospitals, which have a regional focus, will interface with potentially multiple Ontario Health Teams.

Also this month, I presented at Studer's Leadership and Improvement Conference, which was also attended by leaders from across St. Joseph's. The conference, held in Toronto May 1-2, focused on driving stakeholder engagement, executing evidence-based best practices, and providing the best possible care to patients. Live on-stage role playing and peer-to-peer networking opportunities enhanced the learning.

On May 7, I joined St. Joseph's Health Care Foundation and the Canadian Mental Health Association, Middlesex, for another sold-out and powerful Breakfast of Champions. This year's keynote speaker was Mark Lukach, author of the bestselling book *My Lovely Wife in the Psych Ward*, who spoke candidly about his family's mental health journey. Proceeds from the event will support St. Joseph's Zero Suicide initiative. More information can be found in this report.

Then, on May 13, as Co-Chair of the SouthWestern Academic Health Network (SWAHN), I led the Network Contributors' Roundtable. This full-day session provides an opportunity for SWAHN contributors to network, engage in knowledge sharing, review the strategic plan and project progress, and set new project priorities. Ultimately, SWAHN's goal is to achieve extensive, sustainable and evidence-based health outcomes for communities and residents of Southwestern Ontario.

On May 15-17, I was pleased to attend the Catholic Health Alliance of Canada 2019 Annual Conference, a forum for Catholic health and social services in Canada to exchange ideas and develop shared strategic initiatives that support our ability to strengthen the healing ministry of Catholic health care. This year's conference focused topics important to St. Joseph's. The theme was "Towards a Leadership Role in Mental Health and Addictions: Serving Vulnerable Populations."

And finally, on May 23, I will facilitate the Ontario Health Association's CEOs Out Front Peer Collaboration Network – a leadership development program and networking opportunity for hospital CEOs appointed within the past 12 months, and those about to take the helm. The day is designed to allow for an intimate, confidential and safe space for new hospital CEOs to explore situational and contextual challenges. The primary objective is to accelerate onboarding

and leadership effectiveness for new CEOs in a very complex and dynamic system within this period of transformation. I will present on political and community dynamics – navigating important relationships and building trusted and diverse partnerships.

## REACHING OUT

### **Food allergies – don't swallow everything you hear**

When it comes to food allergies, rampant misinformation is far too easily digested. From food sensitivity testing to allergy prevention in babies and children, incorrect information is actually contributing to an increase in food allergies. For Food Allergy Awareness Month in May, allergist Dr. Samira Jeimy with St. Joseph's Allergy and Immunology Program is debunking some of the most common food allergy myths.

More than 2.6 million Canadians, including nearly 500,000 children, are living with food allergies that need to be managed daily. In the last five years, research into the growing prevalence and incidence of food allergies is revolutionizing the approach to prevention, diagnosis and treatment. For example, says Dr. Jeimy, where the advice was to avoid feeding children peanuts until age three or four, the thinking now is to expose children at low risk of the allergy (those without a family history, eczema or egg allergy) to peanuts by age six months to prevent the allergy from developing.

On [St. Joseph's website](#), Dr. Jeimy takes aim at the myths to reduce the incidence of allergies as well as spare individuals from unnecessarily, and sometimes dangerously, restricting their diet. These myths and facts are receiving good pick up by media and Dr. Jeimy has done several media interviews.

## CONNECTING CARE

### **Sleep service launched for patients with post-traumatic stress disorder**

St. Joseph's Operational Stress Injury (OSI) Clinic at Parkwood institute has launched an OSI Sleep Service as a pilot project.

There is high co-morbidity of sleep disturbance with post-traumatic stress disorder (PTSD). It is hoped that addressing sleep disturbances early in the PTSD treatment phase will alleviate symptoms and improve the effectiveness of other therapies being provided by the OSI Clinic.

Being led by psychiatrist Dr. Craig Stewart, who is also a sleep medicine specialist, the pilot program is currently being offered to London OSI Clinic clients. It involves offering at-home sleep testing for veterans whose PTSD symptoms interfere with standard in-lab testing. To date, feedback from patients included in this project has been positive.

Capital costs for this project have been supported by St. Joseph's Health Care Foundation.

### **New Behavioural Response Team enhances care for veterans**

In response to an increase in dementia-related responsive behaviours within the Veterans Care Program, a Behavioural Response Team (BRT) has been formed, modeled after the work of Behaviour Supports Ontario (BSO). The BSO team at Parkwood Institute Mental Health Care Building provided assistance for this project, which has created excellent linkages between the Veterans Care Program and the Mental Health Care Program.

BRT is a multidisciplinary group that provides consultation and support to the primary health care team on all three units within the Veterans Care Program. The BRT reviews strategies currently in place for the individual with responsive behaviours and or suicidal ideation, makes recommendations for additional strategies, offers ongoing support to the primary health care team at the unit level, and builds capacity among the staff to work effectively using evidenced-based care and interventions.

Since the BRT has been implemented, feedback has been positive. Residents with responsive behaviours are receiving care based on best practice, staff on the units are feeling well supported, and members of the BRT are highly engaged and are enjoying the challenge this work provides.

## INNOVATING TOGETHER

### **Researchers verify new method of HIV transmission among injection drug users**

New studies from Lawson Health Research Institute and Western University have found for the first time that HIV can be transmitted through the sharing of equipment used to prepare drugs before injection and that a simple intervention – heating the equipment with a cigarette lighter for 10 seconds – can destroy the HIV virus, preventing that transmission. The findings, used to inform a public health campaign called ‘Cook Your Wash,’ have helped reduce rates of HIV transmission in London.

The two studies published in the *Journal of Acquired Immune Deficiency Syndromes* were initiated in 2016 to address a public health emergency in London when HIV rates among injection drug users more than doubled. This outbreak occurred despite London having Canada’s largest per capita sterile needle and syringe distribution program, a strong opiate substitution therapy program and a multidisciplinary HIV clinic. The team of Dr. Michael Silverman, Lawson Associate Scientist, citywide Chair/Chief of Infectious Diseases, and Medical Director of St. Joseph’s Infectious Diseases Care Program, believed there must be a novel method of HIV transmission at play.

From August 2016 to June 2017, the research team interviewed 119 injection drug users to understand their injection behaviours and risk for HIV. They discovered that those who shared equipment used to prepare drugs for injection were 22 times more likely to contract HIV than those who did not, despite not sharing needles or syringes. The equipment includes a metal ‘cooker’ used to dissolve drugs in water and a filter used to draw the mixture, known as ‘the wash,’ into the syringe. Injection drug users reported reusing the equipment when consuming controlled-release hydromorphone, one of the most commonly injected opioids.

In the laboratory, the researchers confirmed that, on average, 45 per cent of the drug remains in the equipment after the first wash. They also discovered the HIV virus can be transmitted between needles, cookers and filters, and that that controlled-release hydromorphone has properties that promote survival of the virus.

The team found that the virus is destroyed when the cooker is heated. They termed the technique ‘cook your wash.’ Partnering with the Middlesex-London Health Unit and Regional HIV/AIDS Connection, ‘Cook Your Wash’ was launched as a public health campaign. Local rates of new HIV cases fell dramatically after the introduction of the campaign.

### **Boosting bee health**

In collaboration with the University of California, Davis, two Lawson Health Research Institute grad students, Brendan Reid and Andrew Thompson (Lawson Probiotics) are inoculating bee hives in the California almond farming community in the hope of reducing colony collapse disorder and helping pollinate almonds and other flowers critical to the state's economy.

In another effort to boost bee health, the lab of Lawson scientist Gregor Reid has sent BioPatties (patties with probiotics) to Detroit where they are being used on the top of downtown buildings.

### **Geriatric Medicine Refresher Day**

In Canada, an estimated 76,000 new cases of dementia are reported every year. As a growing number of seniors are diagnosed, many questions arise: What are the best ways to care for people with dementia? What do you do when they balk at receiving care?

Teepa Snow, a leading educator and advocate for those living with dementia, addressed these questions at the 33rd Geriatric Medicine Refresher Day on May 1. At the one-day conference, hosted by St. Joseph's Specialized Geriatric Services in collaboration with Western University's Schulich School of Medicine & Dentistry, Teepa described why people with dementia may refuse or resist care from health professionals and family members, as well as the verbal and physical skills that can improve these interactions.

The conference provides health professionals with the opportunity to broaden their knowledge base, refine specific skills, and meet with others who share their concern in improving quality care for the older adult. It includes medical updates and a review of best practices focused on various topics in geriatric care.

### **London Health Research Day**

On April 30, 2019, the eighth annual London Health Research Day brought together more than 400 presenters – medical students, graduate trainees and postdoctoral scholars– at the London Convention Centre to share the latest in health research and to hone their skills communicating their scientific work.

New this year, scientists and faculty members joined keynote speaker Timothy Caulfield, author and host of the documentary TV series *A User's Guide to Cheating Death*, for a panel discussion on science communication. They discussed how the ability to communicate science clearly, accurately and responsibly has become increasingly important in today's society.

### **Supervised pastoral education has lasting impact**

At the Canadian Association for Spiritual Care's national conference in April 2019, St. Joseph's chaplains Heather Vanderstelt and Alida van Dijk presented on the findings of a quality evaluative project that explored the lasting impact of supervised pastoral education for students participating in this training at St. Joseph's between 2004 and 2018. Alida and Heather presented the evaluative tool and process that was developed so that other teaching centres can replicate the study and add to the data pool. In a survey conducted for this project, the 34 survey respondents overwhelmingly spoke to a range of lasting impacts they continue to experience from their supervised pastoral education training at St. Joseph's.

### **Lawson Link 2019 now available**

Lawson Link is an annual magazine that showcases the quality, impact and broad scope of Lawson Health Research Institute scientists and their leading-edge work. The newest edition of the magazine, along with video and extended content, is now [available online](#).

## LEVERAGING TECHNOLOGY

### **New partnership empowers patients**

To provide patients with easy access to and control over their medical imaging, St. Joseph's Diagnostic Imaging Centre is partnering with [PocketHealth](#), a service that allows patients to access their images online and share them with others, in full diagnostic quality.

Currently, patients must come to St. Joseph's to order a copy of their images on CD, pay \$10 per CD, and wait 48 hours to receive it. This has been a time-consuming process for both patients and hospital staff. Through PocketHealth, patients have immediate access to their imaging files (reports are not included) and can also provide others, such as physicians in the community, with access to their images through fax, a secure email, or a link. The service also enables provider-to-provider sharing, which is also in control of the patient.

More than 500 hospitals, clinics and imaging facilities across North America – including 340 in Ontario – partner with Toronto-based PocketHealth to provide this service to their patients.

How it works:

- Patients who choose to enrol with PocketHealth will have their images stored permanently and readily accessible at any time, from any device. There is a \$5.00 fee paid to PocketHealth to have all their images at St. Joseph's stored with PocketHealth, as well as any additional exams over the subsequent two weeks after enrolling.
- Patients are notified of new images, which can be added to their account. After the initial two-week period, there is a \$5.00 fee to store new images.
- Strong privacy and encryption protocols keep the medical information secure.

This is an exciting partnership that will enhance the patient experience, empower patients by providing them with easy access to and control over their medical imaging, enhance communication between health providers, improve transitions in care, and enable St. Joseph's to more fully automate, secure and modernize the imaging release process.

PocketHealth will be launched at St. Joseph's in early June 2019.

## EMPOWERING PEOPLE

### **Employee/Physician Experience Pulse Survey results**

Results from the 2019 Employee/Physician Pulse Survey show that St. Joseph's is sustaining high employee and physician engagement scores. Conducted January 17- February 5, 2019 by our survey vendor NRC-Health, the online questionnaire included 19 questions for employees and 17 questions for physicians. All questions are a subset of our larger engagement survey used every other year and seek input on such themes as engagement, overall employee or physician experience, and clinical care or support services. The employee response rate was 49.2 per cent (up from 48.7 per cent in 2017) and the physician response rate was 40.6 per cent (up from 22.2 per cent in 2017). Some highlights of the results are:

- Among employees, St. Joseph's was statistically significantly higher in per cent positive scores than comparator hospitals in 80 per cent of the survey questions. For questions related specifically to engagement, St. Joseph's was significantly statistically higher in all questions.

- Among physicians, St. Joseph's was statistically significantly higher in the per cent positive score than our comparator hospitals in 35 per cent of all survey questions. For questions related specifically to engagement, St. Joseph's was statistically significantly higher in 50 per cent of the questions.
- The overall engagement score (based on a subset of six questions) for employees was 78.7 per cent. For physicians the score was 79.1 per cent. Among employees, 84.1 per cent said they are proud to tell others they are part of the organization, 80 per cent said their values are similar to the organization, and 87.6 per cent positively rate St. Joseph's as a place to work. (For comparator hospitals, those scores were 72.3 per cent, 67.9 per cent and 74.7 per cent respectively.)
- Among physicians, 85.9 per cent said they are proud to tell others they are part of the organization, 82.8 per cent said their values are similar to the organization, and 88.2 per cent positively rate St. Joseph's as a place to work. (For comparator hospitals those scores were 72.3 per cent, 65.1 per cent and 77.3 per cent respectively.)

Based on the results, leaders will set priorities for action at the program and department level.

### **Celebrating our nurses**

During National Nursing Week May 6-12, St. Joseph's celebrated the important contributions of nurses across the organization – their commitment to continuous learning and applying that learning to practice, to supporting the next generation of nurses, and to compassionate, patient-centred care. This year's theme was "Nurses: A Voice to Lead – Health for All," reminding us that every nurse has a story, and every story has the potential to improve the system and help patients achieve their highest attainable standard of health.

During the week, various activities were held at each site and nurses were showcased on the intranet and through St. Joseph's social media channels.

Also in support of nurses, as well as psychological health and safety in the workplace, the nursing 'thank you' postcards are back again this year. The postcards are available in the libraries at St. Joseph's Hospital, Parkwood Institute Main Building, Parkwood Institute Mental Health Care Building and Southwest Centre for Forensic Mental Health Care throughout May. Those who would like to recognize a nurse for the care and commitment they put into their work are invited to share a few words of support in a postcard. The nurses will receive the postcards by interdepartmental mail.

### **Removing barriers to volunteerism**

As part of an effort to boost the number of volunteers across St. Joseph's, a partnership has been forged with Bayshore Home Health to decrease the financial burden of tuberculosis (TB) testing for volunteers.

The two-step TB test is one of the requirements to be a registered volunteer at St. Joseph's, yet many family physicians will not perform the test due to the cost of the serum. This leaves volunteers looking for another option. Years ago, Occupational Health and Safety Services at St. Joseph's offered free TB testing but stopped due to the cost. The Middlesex-London Health Unit also no longer offers the testing.

The two-step test can cost \$90-\$120, which has been a barrier to volunteers. Through the partnership with Bayshore, the test is now being offered at a significantly reduced cost to St. Joseph's volunteers. With a letter from St. Joseph's, a volunteer now pays \$50.00 for the test. In

addition, a speedy process for testing has been established, allowing volunteers to be in their role at St. Joseph's within two to three weeks after applying.

Currently, more than 900 volunteers give the gift of time to St. Joseph's and the people we serve. Volunteer Services aims at increasing the number of active volunteers by 10 per cent in 2019-2020.

## **OUR FINANCES**

### **Provincial funding – 2019-2020**

St. Joseph's recently received its funding letter from the Ministry of Health and Long-Term Care. We are in the process of reviewing the total impact and clarifying certain components of funding with the South West LHIN. Based on our review so far, we are comfortable that we will not need to pursue any further in-year budget reductions beyond what was originally planned in our budget.

## **UNCOMPROMISING QUALITY AND SAFETY**

### **Focusing on patients, residents and family caregivers**

Preparations are ongoing for the Accreditation Canada on-site visit scheduled for September 30 to October 3, 2019.

This year's onsite survey will include a patient representative as part of the survey team. This addition reflects significant changes to the standards since our last survey in 2015 to incorporate a focus on patient- and family-centred care – one of the quality dimensions that underpin all standards in the Accreditation Canada Qmentum Program. The patient- and family-centred care criteria in the standards includes requirements for engaging patients/residents/clients and families in planning and service design, partnering with them throughout their care, engaging them in shared decision making, and collaborating with them to co-create care plans and health goals.

St. Joseph's Care Partnership Framework aligns well with Accreditation Canada's patient- and family-centred care quality dimension. 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 families. This approach fosters respectful, compassionate, culturally appropriate and competent care that is responsive to the needs, values, beliefs and preferences of our patients/residents and family caregivers.

While patients, residents and family caregivers are engaged in many different ways at St. Joseph's, a comprehensive plan is being created as part of accreditation planning that will: validate how we currently engage patients and caregivers; share strategies implemented by programs/units with success; and explore opportunities to continue to enhance and incorporate specific strategies to ensure input and partnership with our patients and family caregivers into our work.

## **PARTNERSHIPS WITH PATIENTS, RESIDENTS, FAMILY CAREGIVERS**

### **A community conversation on housing**

[London's Homeless Prevention and Housing Plan](#) is being updated and input from the public is needed. This community plan will guide homeless prevention and housing in London for the next five years and shape the future for years to come. A community conversation facilitated by St. Joseph's mental health care patient and family councils is being held on May 28 at Parkwood Institute Mental Health Care Building to collect ideas and feedback into the plan. All patients, families, staff, physicians, students and volunteers are invited and encouraged to attend.

Suggestions and input will be provided to the City of London to help inform strategies and decision making. More information on the plan and additional ways to share feedback is available on the city's [Get Involved London website](#).

## **ADVOCACY AND COLLABORATIONS**

### **Shaping education nationally**

The National Conference on Post-Traumatic Stress Disorder (PTSD) in April 2019 was organized by the Public Health Agency of Canada (PHAC) in its capacity as the developers of the Federal Framework on Post-Traumatic Stress Disorder Act, which was enacted in June 2018. The act has the specific goal of developing a federal strategy for: tracking prevalence/incidence and costs of PTSD; developing guidelines for the assessment and treatment of PTSD; and developing standardized education materials on PTSD.

Dr. Maya Roth, psychologist with St. Joseph's Operational Stress Injury Clinic, was invited by Dr. Alex Heber, Chief Psychiatrist at Veterans Affairs Canada, to participate in the development and planning of the conference. Dr. Roth co-led the working group focused on developing standardized educational materials with Dr. Heber and played an instrumental role in shaping the content of the conference. At the conference, Dr. Roth presented on evidence-based treatment of PTSD and facilitated a panel. She is seen as a subject matter expert nationally.

St. Joseph's psychiatrist Dr. Don Richardson also attended the conference and facilitated a breakout session related to societal costs of PTSD.

The conference was attended by 200 invited participants representing political, research, and health care organizations, and those with lived experience such as first responders and veterans, military personnel and members of the Aboriginal community.

### **Breakfast of Champions 2019**

On May 7, Mark Lukach spoke openly about his family's heart-wrenching mental health journey at Breakfast of Champions, an annual event hosted by St. Joseph's Health Care Foundation and Canadian Mental Health Association (CMHA), Middlesex. His presentation touched on themes from his 2017 bestselling book *My Lovely Wife in the Psych Ward*, which chronicles his wife Giulia's battle with bipolar disorder and how he supported her through suicidal depression and three hospitalizations with psychosis.

The event also honoured local individuals and organizations making significant contributions to advance mental wellness in the community. Winners of the CMHA Middlesex's Champion of Mental Health Awards are:

- Sgt. Andrew Gough of the London Police Service was recognized for his efforts in destigmatizing common mental health myths through his “Stronger Than you Know” campaign.
- Sue McLeish, Brenda Wentzell and the Family Support Group at London Health Sciences Centre were recognized for their mental health advocacy and providing resources that support family caregivers. This peer-led group offers education, resource sharing and support to families with loved ones experiencing mental illness.

Read more about these champions and the nominees [here](#).

Proceeds from the breakfast will support St. Joseph’s Zero Suicide initiative, a quality improvement model that will reduce suicides and attempted suicides. During the event, Michelle Campbell, President and CEO of St. Joseph’s Health Care Foundation, announced that TD Bank Group had committed \$225,000 towards Zero Suicide

### **Roadmap for integrated heart failure care**

From 2017-2019, CorHealth Ontario partnered with Health Quality Ontario and three early adopter teams to begin the Integrating Heart Failure Care Initiative (IHFCI), a model that integrates heart failure care delivery with quality standards for a localized population suffering from heart failure. During Canada’s inaugural Heart Failure Awareness Week May 6-12, CorHealth Ontario launched the [Roadmap for Improving Integrated Heart Failure Care in Ontario](#) and supporting resources.

The early adopter teams, as well as input from a provincial Heart Failure Roadmap Task Group, informed the roadmap and a toolkit for use by care teams to provide more integrated heart failure care to their patients. Dr. Robert McKelvie, cardiologist at St. Joseph’s, is a member of the task group. According to Dr. McKelvie, common and recurring issues, such as readmission and patient care gaps, often result from a lack of organization and communication among health care providers, caregivers and supports. The use of the integrated heart failure care model advances patient care by improving access to evidence-based care, and enhances the patient experience through seamless transitions in care, including between specialty and primary care providers or between hospital and home, says Dr. McKelvie.

The roadmap can be expanded beyond cardiac disease into other chronic illnesses and population health management overall.

### **Got a Plan?**

St. Joseph’s Regional Sexual Assault and Domestic Violence Treatment Program (RSADVTP) participated in Middlesex-London Health-Unit’s ‘Got a Plan? Day’ held at London Health Sciences Centre on April 24, 2019. The half-day workshop focused on preconception, pregnancy, and postpartum health education and was open to high school students and their teachers in the Middlesex-London area. The goal of the day was to introduce students to a variety of topics related to reproductive health and help them realize the importance of preventing/planning for pregnancies and avoiding unplanned pregnancies. More than 80 per cent of teen pregnancies are unplanned, which can have serious health impacts on a developing fetus and result in negative long-term health outcomes.

Members of the RSADVTP team spoke to the students about consent and healthy relationships. Through this event, one high school has reached out to the program for further information on how to support their students.

## RECOGNITIONS AND CELEBRATIONS

### **Excellence in Professional Practice Awards**

The Excellence in Professional Practice Awards were established 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. The recipients of these prestigious awards are nominated by their peers or leaders for their efforts in demonstrating excellence. They show a passion for practice and exemplify the mission, vision and values of St. Joseph's.

These awards are an expansion to our previous Nursing Excellence Awards. The 2019 recipients are:

- **Excellence in Clinical Practice - Complex Care, Rehabilitation and Geriatrics**
  - Karen Sutherland, registered nurse
  - Therapeutic recreation team at Mount Hope Centre for Long Term Care
  - Lesley Kirley, occupational therapist
- **Excellence in Clinical Practice - Mental Health Care:** Janet Hunt, clinical nurse specialist
- **Excellence in Leadership:** Debbie Sims, registered practical nurse
- **Excellence in Teaching and Coaching:** Stephen Yeo, chaplain
- **Excellence in Innovation and Evidence Informed Practice:** Charlie Giurleo, occupational therapist

Bursary applications are also accepted each year, creating an opportunity for nursing and professional practice staff to apply for funds to support their studies. The bursaries and awards are made possible through generous donations to St. Joseph's Health Care Foundation.

### **An international hospital leader**

David Ross, Director, Finance, was recently accepted into the International Hospital Federation's Young Executive Leaders Program. David is one of 18 international young hospital leaders selected to participate in this program and one of only two in Canada. Other members of the program are from Brazil, France, Hong Kong, Oman, Portugal, Spain, Taiwan, United Arab Emirates, and the United States. The rigorous selection process includes specific criteria and scoring for each applicant. Over the next six months, this group will prepare a report relating to health care transformation and the role of health executives for presentation during the closing ceremony of the International Hospital Federation's annual World Hospital Congress in November 2019.

### **A program of excellence**

On April 8, 2019, Deputy Minister of Veterans Affairs Canada, General (Retired) Walter Natynczyk, visited the Veterans Care Program at Parkwood Institute. Throughout his visit, General Natynczyk took time to speak to the veterans and their families and asked about the care we provide. Overall, it was a positive visit, and the residents and families provided very positive feedback about the program.

The Deputy Minister also expressed his gratitude and thanks to the staff. At the conclusion of the visit, he presented a medallion of excellence to Veterans Care Program Director Heather Tales and Vice President Roy Butler through a ceremonial handshake to acknowledge the work of the program and for modeling Veterans Affairs Canada values of respect, care and compassion. During the month of May, the medallion will be passed to each team member in the program through the ceremonial handshake.

In follow up to the Deputy Minister's visit, Veterans Affairs Canada gave permission for the Veterans Care Program to admit the frail, high-risk veterans with preferred status on the wait list. This will be completed on a case-by-case basis in consultation with our Veterans Affairs Canada liaison. Two high-risk veterans were admitted immediately.

## OTHER

### **The People's Health Care Act, 2019, receives royal assent**

On April 18, 2019, the provincial government [announced](#) that Bill 74, The People's Health Care Act, 2019, passed third reading and received royal assent.

The Ontario Hospital Association has prepared a [revised backgrounder](#) to provide members with a high-level overview of the finalized Bill 74 and its implications for hospitals. Bill 74 received minor amendments during its legislative review, including revamping the Health Minister's community engagement obligations to Indigenous communities under section 44 and specifying that accessibility of health services in French is now a "public interest" factor under section 45.

As of April 18, 2019, Bill 74 is now force.

### **Government announces interim CEO for Ontario Health**

On April 24, 2019, the government announced that Susan Fitzpatrick will be acting as Interim Chief Executive Officer (CEO) for Ontario Health while a comprehensive recruitment process for a permanent CEO is underway.

According to the [announcement](#), Fitzpatrick will play an important role in the next phase of setting up Ontario Health. She most recently held the position of CEO at the Toronto Central Local Health Integration Network, and was previously the Associate Deputy Minister of the Ministry of Health and Long-Term Care.

### **Health Canada releases fourth report on medical assistance in dying**

Health Canada has announced the release of the [Fourth Interim Report on Medical Assistance in Dying \(MAID\)](#). The fourth and final report covers a 10-month period from January 1 to October 31, 2018. Since Canada's federal legislation on MAID was implemented in 2016, Health Canada has released three interim reports. Findings highlighted in the fourth report include:

- 2,614 Canadians received MAID between January 1 and October 31, 2018.
- MAID has accounted for approximately 1.12 per cent of the estimated total deaths in Canada during this reporting period.
- The setting for the provision of MAID continued to be primarily divided between a hospital (44 per cent) and a patient's home (42 per cent).
- MAID was largely provided by physicians (93 per cent).

Following this report, the federal government will begin producing annual reports starting in spring 2020. This expanded data set will provide better understanding of MAID requests, insight into the circumstances under which MAID is administered, and the reasons why requests for MAID may go unfulfilled.

## Environmental Scan

---

### **Program to reduce wait times for patients with hip, knee and low back pain**

Patients referred to see orthopedic and spine surgeons for hip and knee osteoarthritis and low back pain will soon have to wait just four weeks to see a health provider under a new system of Rapid Access Clinics (RACs) rolling out through the South West Local Health Integration Network (LHIN).

Currently, many patients wait in pain for months before they get an initial consultation with a surgeon. Some attend this appointment only to find out they don't qualify for surgery at all, according to a [news release](#) from the South West LHIN.

The RACs use a new central referral system that allows family doctors to send their referrals to one place and quickly find the first available surgeon, according to Rhonda Butler, advance practice leader for the hip and knee program in the musculoskeletal RAC. Until now, surgeons worked independently. Once they've entered the referral system, patients will be triaged to an "advance practice provider"— typically a physiotherapist, nurse practitioner, occupational therapist or chiropractor – within four weeks.

The RACs began seeing patients from the current wait list in early 2019, and began accepting new referrals April 15, 2019. For now, four weeks to assessment is still the goal, not the reality, Butler said. The musculoskeletal rapid access clinic location at London Health Sciences Centre's University Hospital is handling hip and knee assessments, while Victoria Hospital is seeing patients referred for lower back pain.

So far, about 150 hip and knee patients and 100 low back pain patients have been seen, Butler said. Of those, about 60 per cent of hip and knee patients and just 20 per cent of low back pain patients go on to need surgery, Butler said.

[CBC London, April 30, 2019](#)

### **Lab personnel shortage impacting health care system**

Canada doesn't have enough medical laboratory technologists to meet the growing demands of the health care system, and the problem is getting worse, warns the Canadian Society for Medical Laboratory Science (CSMLS).

"We have reached the point now where some laboratories have been closed for weeks due to insufficient staffing, which is a cascading problem for patients and the health care system," said Maria Klement, CSMLS president.

Medical laboratory technologists perform blood tests, do biopsies, and examine fluid or tissue samples to detect disease and infection. About 1.2 million laboratory tests are performed in Canada every day, according to the CSMLS. Without laboratory capabilities, hospitals and clinics are forced to decide whether to treat people on-site, or send them somewhere where all their tests can be done, Klement said. Rural areas are particularly stretched.

With the shortage already being felt, many people are set to leave the profession with about half of all medical laboratory technologists eligible to retire in the next 10 years, said Klement. The new supply of graduates will not be enough to offset these retirements. To fill the gap, about 400 new people are needed each year for the next 10 years, she said.

The CSMLS is hoping to make it easier for people to enter the profession by creating programs to bridge internationally trained lab technologists into the Canadian system, giving them the additional training needed to be able to work in Canada.

[Global News, May 1, 2019](#)

### **Ontario government ends health coverage for travellers outside Canada**

Ontario is pushing ahead with a plan to eliminate basic out-of-country travel insurance, saying the program is very costly and does not provide value to taxpayers.

The insurance currently covers out-of-country inpatient services to a maximum of \$400 per day for a higher level of care, and up to \$50 per day for emergency outpatient services and doctor services.

Health Minister Christine Elliot announced the decision to scrap the program on May 1, 2019, following a six-day public consultation. She said the province spends \$2.8 million to administer approximately \$9 million in claim payments through the program every year, which is "not good value for Ontarians,"

The change is expected to come into effect October 1, 2019.

[CTV News, May 1, 2019](#)

### **Drug treatment stopped transmission of HIV in gay couples, study finds**

A European study of nearly 1,000 gay male couples who had sex without condoms – where one partner had HIV and was taking antiretroviral drugs to suppress it – has found the treatment can prevent sexual transmission of the virus.

After eight years of follow-up of the so-called serodifferent couples, the study found no cases of HIV transmission within couples. The study proves, the researchers said, that using antiretroviral therapy (ART) to suppress HIV to undetectable levels also means it cannot be passed on via sex.

Alison Rodger, a professor at University College London who co-led the research, said the results could help end the HIV pandemic by preventing the virus' transmission in high-risk populations.

The findings add to an earlier phase of the study which looked at HIV transmission risk for serodifferent heterosexual couples who also did not use condoms. It also found zero risk.

[CBC News, May 2, 2019](#)

### **Systemic change needed to address suicide among physicians in Canada**

Suicide as an occupational hazard for physicians is examined in the May 6, 2019 issue of the [Canadian Medical Association Journal](#). The article outlines five key points about physician suicide, which has a rate for male doctors that is nearly double that of the general public, and two and a half times higher for female physicians.

Thoughts of suicide can begin in medical school and are later associated with patients' complaints to regulatory bodies, say authors Joy Albuquerque and Sarah Tulk, adding doctors face unique barriers to care compared with the general public. While stigma is generally

pervasive, physicians have the extra burden of little time to access care and face concerns about confidentiality as they fear discrimination in licensing and applications for work at hospitals, the commentary says.

In an [interview](#) about the issue, Dr. Gigi Osler, president of the Canadian Medical Association (CMA), said the CMA is working with medical students, residents and provincial associations to create change and has hired a clinical psychiatrist to take the lead on the issue.

[Canadian Medical Association Journal, May 6, 2019](#)

### **More young Canadians seeking hospital help for mental health issues: report**

Children and young adults are showing up in Canadian hospitals to get help with mental health-related issues far more often than in the past, bucking a trend that sees overall youth hospital visits on the decline.

According to [new data](#) from the Canadian Institute for Health Information (CIHI), there was a 65 per cent increase in mental health-related hospitalizations of Canadians between the ages of five and 24 from 2006-2007 to 2017-2018, as well as a 75 per cent increase in mental health-related emergency room visits. Hospitalizations for other conditions fell by 24 per cent in that age group over the same time period.

The increases occurred even though the prevalence of young Canadians being diagnosed with mental health-related disorders over the 12-year period was relatively unchanged. Additionally, CIHI found that 9.3 per cent of young Canadians, or about one in 11, were given medication for a mood or antipsychotic disorder in 2017-2018.

[CTV News, May 6, 2019](#)

### **Family doctors caught in middle in deadly opioid crisis, London study finds**

The complex needs of patients in chronic pain are leaving their doctors increasingly exhausted and overwhelmed, a new Western University-led study says. In detailed interviews and clinic observations, researchers found many primary care physicians are close to burnout in caring for patients in pain.

Researchers conducted interviews with more than 60 physicians (most of them family doctors) from urban, rural and Northern Ontario and took in more than 40 hours of observation, with patient and doctor consent. They heard repeatedly of doctors' emotional exhaustion, loss of job satisfaction, burnout and, at the extreme end of the continuum, depersonalization of the patient. For some doctors, "policing and adjudicating the legitimacy of patients' requests for pain medication" were troubling enough to keep them awake at night, the study said.

Many physicians worried they were doing patients a disservice if they didn't prescribe opiates for pain; they worried they'd cause more harm if they did prescribe the highly addictive medication; and they worried some patients were seeking opioids to feed an existing addiction.

The [study](#) is published in the open-access journal *PLOS One*.

[Western News, May 3, 2019](#)

### **Ontario Telemedicine Network lays off 44 staff**

The Ontario Telemedicine Network (OTN), a non-profit agency that helps Ontario patients access health care through videoconferencing, has laid off more than 15 per cent of its staff – 44 positions – in the wake of a cut to its provincial funding.

OTN uses videoconferencing technology to link doctors and nurses with patients around the province. For instance, psychiatrists hold face-to-face consultations with patients, nurses can check in with patients at home after they've been discharged, and students living away from home can connect with their family doctor. Small rural hospitals and clinics use OTN's network to access specialists in Ontario's larger cities.

When Health Minister Christine Elliott announced plans to reform the health system earlier this year, she said the province intends to boost the amount of medical care delivered virtually. A spokesperson for Elliott declined to reveal the size of the province's funding cut to OTN.

OTN's latest annual report says it facilitated nearly 900,000 patient consultations and saved nearly \$72 million that would have been paid in travel grants to patients in northern Ontario.

[CBC News, May 8, 2019](#)

### **Excess weight expected to become second leading preventable cause of cancer**

A study by the Canadian Cancer Society (CCS) has found that, unless Canada makes changes, excess weight will become the second leading preventable cause of cancer, following tobacco.

The Canadian Population Attributable Risk of Cancer (ComPARE) study estimated that by 2042, the number of cancer cases due to excess weight will nearly triple, from 7,200 to 21,200. Currently, more than one in two Canadian adults has excess weight, putting them at increased risk for at least 13 different types of cancer, including breast, colorectal, endometrial and esophageal cancers.

Published in the international journal, *Preventive Medicine*, and conducted by CCS in collaboration with a pan-Canadian team of experts, the ComPARE study is the first of its kind in Canada and estimates the current and future burden of more than 30 different cancer types due to more than 20 different modifiable cancer risk factors. The ComPARE study revealed as many as four in 10 cancer cases can be prevented. The top five leading preventable causes of cancer are currently smoking tobacco, followed by physical inactivity, excess weight, low fruit, and sun.

“This new study gives us insight into where we can make the biggest difference in cancer prevention for Canadians so they can live their lives to the fullest,” says Dr. Leah Smith, Senior Manager, Surveillance at CCS.

[Canadian Cancer Society, May 8, 2019](#)

### **Why desperate Americans are driving to Canada in caravans for insulin**

As the cost of insulin continues to skyrocket in the U.S., where pharmaceutical companies can dictate the price, people are making the trek to Canada as an alternative to paying thousands of dollars to stay alive.

Insulin and many other drugs cost less in Canada, thanks to the Patented Medicine Prices Review Board, a federal agency that establishes the maximum price that can be charged for

patented drugs. So while an influx of Americans crossing the border to buy insulin won't affect the price, it could hurt supply in Canada.

"There absolutely is some degree of risk," said Barry Power, director of therapeutic content with the Canadian Pharmacists Association. "If you look at the disparity in the populations, a small percentage of Americans coming to Canada is a disproportionate increase for services and supplies that are earmarked for Canada."

[CBC News, May 8, 2019](#)

### **Ford government cuts eHealth, research budgets, spending documents show**

Ontario is cutting more than \$70 million from eHealth's budget ahead of a major health system merger, and millions in health research funding is drying up. The numbers are contained in a detailed spending plan tabled by the government tabled May 9, 2019.

Though the Progressive Conservative's overall spending package is up nearly \$5 billion from the last Liberal budget, it contains cuts to a host of programs and services. Many of those cuts were not readily apparent in the April 11, 2019 budget, but have come out in the days and weeks since as various organizations learn of funding changes from respective ministries.

In the most recent spending plan tabled, expenditure estimates for 2019-2020 include a reduction of \$70 million for eHealth Ontario – which works on digital health programs – and nearly \$52 million less for health policy and research, which involves a large cut to the Health System Research Fund that contributes to research relevant to provincial policy.

"As part of our government's commitment to direct all available resources to frontline care, we have made the decision to wind down certain research programs," Hayley Chazan, Ministry of Health spokesperson said in a statement.

The cut to eHealth, said Chazan, is related to the merger of that organization, the 14 local health integration networks, Cancer Care Ontario and several other health agencies into one super agency.

[Global News, May 9, 2019](#)

### **Government to merge five local public health units**

The Middlesex-London Health Unit has received notice of the proposed boundaries for a regional health office that would combine five public health agencies stretching from Windsor to Woodstock. The new administration would take in the territory covered by the Windsor-Essex County health unit, Chatham-Kent public health unit, Lambton health unit and the already-merged Southwestern public health, which serves Elgin and Oxford counties.

Middlesex-London Health Unit communications manager Dan Flaherty said health units are awaiting many more details about how the public health governance shakeup will unfold.

The specific boundaries of the new regional health units will be finalized in consultation with municipalities through technical working groups, which are expected to launch shortly, said Hayley Chazan, spokesperson for Health Minister Christine Elliott

[London Free Press, May 14, 2019](#)

### **Program cuts unwanted hospital visits for those with chronic heart, lung conditions**

The South West Local Health Integration Network (LHIN) is seeking new patients for a program that helps those with chronic heart and lung conditions manage their symptoms at home and stay out of hospital.

The Telehomecare program is aimed at patients with mild to moderate chronic obstructive pulmonary disease (COPD) and congestive heart failure (CHF). Both are chronic conditions that worsen over time, but can improve with early intervention, according to Patrice Dodsley, a patient care manager with the South West LHIN.

Those enrolled in the four to six month program are equipped with home health care equipment, such as a blood pressure monitor, pulse oximeter and weight scale. Telehomecare staff and nurses help monitor patients' vital signs and get in touch over the phone or computer if something doesn't look right.

"The program is really to educate the patient about the signs and symptoms of their own condition, how to identify those signs and then to seek earlier treatment so it doesn't end up in a full-blown exacerbation [of symptoms]," said Dodsley.

Since the program began in the region in 2015, 1,695 patients have taken part. Results show that patients' unplanned hospital admissions went down by nearly 68 per cent during their time in the program compared to the three months before they joined. Once they were out on their own, patients who'd completed the program had about 80 per cent fewer unplanned hospital admissions than they had in the three months before joining.

[CBC London, May 14, 2019](#)

### **Pilot project relieves mental health burden on emergency rooms**

As paramedics cope with a growing number of mental health-related emergency calls, a London-based pilot project wants to reduce the strain on local hospitals with a simple idea: that not everyone who calls 911 needs to go to the emergency room.

Over the past two and a half years, the Canadian Mental Health Association (CMHA), Middlesex has run a satellite mental health crisis centre out of Victoria Hospital at London Health Sciences Centre (LHSC). Staffed by two trained nurses, occupational therapists or social workers, the space treats patients who are in mental distress, but who aren't in enough danger to require the full support of the emergency room. As a result, patients who use the clinic tend to get help faster, and so does everyone else who's in line at the emergency room, said Julie Trpkovski, vice-president of mental health, emergency services and access and flow at LHSC.

On average, paramedics respond to about 4,500 mental health and addiction-related calls every year, according to Dustin Carter, superintendent of community paramedicine with Middlesex-London Emergency Medical Services (EMS). Between October 2017 and January 2019, Carter said EMS helped a total of 524 patients through the centre at Victoria Hospital. Another 132 were helped after EMS redirected them to CMHA's mobile crisis response team.

Carter said an estimated 1,200 additional people could have been helped by the crisis centre, except it was closed during the time of their call.

Currently, the centre is open Monday to Friday from morning until evening, according to Lori Hassall, director of crisis and short-term interventions at CMHA Middlesex. CMHA hopes to

offer 24/7 service by having paramedics bring patients directly to the organization's crisis centre on Huron Street once approved by the Ministry of Health and Long-Term Care.

[CBC London, May 15, 2019](#)

### **WHO releases new guidelines for reducing dementia risk**

The World Health Organization (WHO) has unveiled new guidelines on reducing the risk of dementia, a rapidly growing public health concern with more than 50 million people around the world suffering from the disease and nearly 10 million new cases yearly.

In the guidelines, the WHO stresses that dementia is not a natural and inevitable part of aging, but rather has been associated with several modifiable risk factors. The organization came up with a number of interventions, rated as either strong or conditional, that might be recommended to a patient to try and prevent the development of dementia.

Some of the strongest recommendations include increased physical activity and quitting smoking. Recommendations classified as conditional are those that may be useful for some patients and should be discussed with their health care professional. They include cognitive training, interventions in cases of harmful levels of alcohol consumption, and maintaining a healthy weight.

The guidelines also look to dispel some myths that surround dementia. For example, despite the common belief that social activity can help keep people's brains sharp as they age, there is insufficient evidence that social activity reduces the risk of cognitive decline.

Renowned London neurologist Dr. Vladimir Hachinski contributed to and reviewed the recommendations released by the WHO.

[CTV News, May 14, 2019](#)

### **Health Canada approves injectable hydromorphone to treat opioid addiction**

Health Canada has approved injectable hydromorphone – a drug commonly used to manage pain – to treat patients with severe opioid use disorder. The change makes Canada the first in the world to approve the drug for such use, all in an effort to get the tragic overdose crisis under control.

In Vancouver, Dr. Scott MacDonald has been running the Crosstown Clinic for about 14 years, where patients have been prescribed heroin and injectable hydromorphone beyond the regulated use approved by Health Canada. MacDonald's research helped make the case to health officials that the drug was effective for addiction treatment in certain, more severe cases.

"My hope is that [the Health Canada approval] will bring expansion, and that it will support health authorities and other provincial jurisdictions to start implementing these programs," said MacDonald.

[CBC News, May 16, 2019](#)

## St. Joseph's in the News

---

[Early intervention key for postpartum women at risk for bipolar disorder](#), Helio, April 23, 2019

[London-area hospital trio eye Ontario health team application](#), London Free Press, April 24, 2019

[London, Ont. researchers confirm new method of HIV transmission and provide prevention technique](#), Global News/980 CFPL, April 25, 2019

[London studies highlight overlooked HIV risk among injection drug users](#), London Free Press, April 25, 2019

[Discovery in London leads to reduction of HIV transmissions among drug users](#), CTV London, April 25, 2019

[HIV transmission has a new method and can be stopped](#), Medical Herald, April 26, 2019

[Transition support program may aid young adults with type 1 diabetes](#), Physician's Weekly, April 27, 2019

[Studies verify novel method of HIV transmission among injection drug users and effective prevention](#), News Medical Lifesciences, April 26, 2019

[Transition support program may aid young adults with type 1 diabetes](#), Medical Express, April 29, 2019

[Researchers verify new method of HIV transmission among injection drug users and effective prevention technique](#), MDLinx, April 29, 2019

[Research day highlights latest London health explorations](#), London Free Press, April 30, 2019

[A culture of compassion: How timeless principles of kindness and empathy become powerful tools for confronting today's most pressing healthcare challenges](#), Healthcare Management Forum, 2019, Vol. 32(3)

[Students begin month of ONERUN events in support of cancer patient care programs in London](#), Global News/980 CFPL, May 3, 2019

[Diabetic teens fall back to old habits after transition care, study says](#), London Free Press, May 3, 2019

[Londoners to lace up in support of spinal cord injury research](#), CBC London, May 4, 2019

[CorHealth Ontario marks first national heart failure awareness week with Ontario's integrated heart failure care roadmap](#), CorHealth Ontario, May 6, 2019

[London doctor serves up straight goods on food allergies online](#), London Free Press, May 7, 2019

[London 'ahead of the curve' in mental health care](#), London Free Press, May 7, 2019

[Breakfast of Champions highlights mental health impact on family](#), CTV London, May 7, 2019

[Researchers find viral peptides essential to natural HIV control](#), Global Market New 24, May 8, 2019

[Early Dream Lottery ticket sales on pace to outdo last year](#), London Free Press, May 9, 2019

[Interview with registered nurse Shauna Graf and Director of Professional Practice Amanda Thibeault on National Nursing week](#), Newstalk 1290 CJBK (podcast, 1:30 mark), May 10, 2019

[French-inspired Dream Lottery home unveiled in southwest London](#), Global News/980 CFPL, May 9, 2019

[Motorcyclists to honour fallen London soldier, raise funds for veteran care at Parkwood Institute](#), Global News/980 CFPL, May 10, 2019

[What Ontario's geriatrician shortage means for its aging population](#), TVO, May 13, 2019

[Food allergies on the rise, along with misinformation](#), CTV London, May 13, 2019

[Area health-care providers take first step for system overhaul](#), London Free Press (also published in the Woodstock Sentinel-Review and St. Thomas Times-Journal), May 16, 2019

[Why doctors now warn against routinely treating mild thyroid issues](#), CBC News, May 17, 2019

[Dream home's industrial strength wins fans](#), London Free Press, May 17, 2019