

Please note the information in this booklet may not be completely up to date due to the COVID-19 pandemic. Please refer to our website: [www.sjhc.london.on.ca](http://www.sjhc.london.on.ca) for more information including screening information and visiting restrictions.

# A guide to surgery at St. Joseph's Hospital

## Earning your confidence in our care

At St. Joseph's Health Care London our vision is to earn complete confidence in the care we provide our patients and residents. In addition to providing excellent and quality care, we earn confidence through use of our Statement of Patient and Resident Values, developed in consultation with our patient and family councils, as a guide for our teams.

We also show accountability and transparency through regular reporting of our performance in areas such as: hospital acquired infections, surgical safety, hand hygiene and patient satisfaction on our public website at [www.sjhc.london.on.ca/ourperformance](http://www.sjhc.london.on.ca/ourperformance).

## Protecting patients

To help protect the safety of the vulnerable patients in our care we ask patients and visitors to **NOT**:

- Enter our facilities if you are feeling unwell, with symptoms of illness such as new or worsening cough, fever or diarrhea
- Wear perfume or cologne
- Bring latex into the hospital (balloons etc.)
- Smoke on our grounds

**Cell phone use:** Cell phones create interference and can disrupt transmissions between components of medical equipment. Please use your cell phone in designated areas only.

The use of cell phones or other devices for taking photographs or videos of patients and staff is not permitted. Please respect their privacy and refrain from cell phone use.

Please **wash your hands** or use our **alcohol-based hand rub**:

- when you arrive before leaving
- after coughing, sneezing or
- blowing your nose
- when moving from one care area to another

At St. Joseph's we want you to be part of your care team. Please feel comfortable asking your care provider if they washed their hands.

## Reporting changes to health or medical conditions

Any change in your health or medical condition could affect the care we provide to you during your stay in hospital or in preparation for your surgery. Please contact your surgeon's office promptly to let them know of any changes in your health or any new medications that you are taking.

## **Verification of identification**

For your safety you may be asked multiple times to confirm who you are, medical history, such as, allergies, medications, etc. and your procedure. These questions are necessary for individual clinicians to ask as part of your ongoing care.

## **We want your feedback**

Receiving feedback whether positive or negative is important to the team to continually monitor how our processes are working. If you have any concerns or comments that you wish to share with the team, please complete a comment card located in various locations in each of the units or ask a staff member for one. This is another way that we can include you and your family in promoting safety for yourself and others.

## **Alcohol, drugs, medications and substance involvement**

During your pre-surgical screening appointment, you will be asked about your use of alcohol, tobacco, prescription, over the counter medication and non-prescription drugs or psychoactive substances such as marijuana or cocaine. It is extremely important to discuss your use of all psychoactive substances both legal and illegal so that we can plan your care and improve the safety of your surgical experience.

The use of any of these psychoactive substances can possibly interact, sometimes negatively, with anesthesia or affect how we manage your pain or discomfort after surgery. The improper use of medications or non-prescription drugs may also affect your overall wellbeing or specific body systems such as heart or lungs.

Hospital employees must maintain your personal health information as confidential and only those team members that are involved with your care have a right to access this information. The hospital has strict policies to protect your privacy. These policies include the disclosure of information, who is able to disclose and how that happens.

Together, we can try to achieve the best outcomes of your surgery. If you have questions about your privacy please speak with your nurse during your interview.

## **Notes**

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# Preparing for your surgery

Your surgery will be on: \_\_\_\_\_ Please arrive at: \_\_\_\_\_

Please go to our Admitting department located in Zone C, Level 1, C1-300. For turn-by-turn directions to Admitting visit <https://www.sjhc.london.on.ca/areas-of-care/pre-surgical-screening-unit> . There is also a map in the back of this booklet.

For complete directions a map to our location visit <http://www.sjhc.london.on.ca/directions/st-josephs-hospital>. You will also find information on:

- Parking and accessibility
- Cafeteria services and hours of operation
- Program specific details
- Wi-fi access

<p><b>If using a GPS, type in: 268 Grosvenor St. London ON</b></p>
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## Before surgery checklist

- Arrange for a family member or friend to accompany you on the day of your surgery and to drive you home after your surgery. This person must stay with you in the Surgical Day Care Unit (SDCU) until the admitting nurse speaks with you. A contact number for this person must be provided if they are not waiting in the hospital. *(If you do not have a driver to take you home after surgery, please tell your pre-surgical screening nurse and your surgeon).*
- Children are not permitted in the SDCU.
- You must plan to have a responsible person accompany you home as you are not able to drive for at least 24 hours after anesthetic. It is recommended that you have someone stay with you when you get home and overnight.
- Do the exercises in this information guide (pg. 5) three times on the day before your operation.
- If you require an interpreter, accessible care or have any special needs please inform your pre-surgical screening nurse. Information on accessible care at St. Joseph's can be found on our website at [www.sjhc.london.on.ca/accessibility](http://www.sjhc.london.on.ca/accessibility)
- Remove **all** jewelry including: rings, watches, chains, and piercings. Piercings in the mouth or nose may become dislodged and could end up in your stomach or lungs. Rings can stop blood circulation to fingers or toes and may need to be cut off during surgery for your safety. If you cannot remove your rings, please go to a jeweler before surgery to have them removed.
- If you have forms that need to be completed by the surgeon, please call the surgeon's office to make arrangements for completion prior to your surgery, they are not done on day of surgery.
- Take time to plan ahead for after your surgery. Think about: getting extra groceries or preparing meals ahead and freezing; having all your laundry completed; if you aren't able to drive who will be able to bring you to appointments; who can help you around the house if you have restrictions in what you are able to do; what will you be able to wear.
- After surgery you or your support person will need to take your prescription to a pharmacy, they are not faxed.

## Eating and drinking before surgery

You are encouraged to drink **clear** fluids up to **three (3)** hours before your scheduled surgery time.

**Clear fluids** include water, apple juice, cranberry juice, broth, jello, popsicles/freezies, and black coffee or tea with or without sugar/sweetener. **NO CREAMER OR MILK.**

You may chew gum or consume the occasional mint up to three (3) hours before your scheduled surgery time.

**DO NOT** eat or drink any solid foods and liquids that are not listed above after 12 am (midnight) the night before your surgery. This includes all food, dairy products and orange juice.

**Your surgery will be cancelled if you do not follow these instructions.**

## Medication instructions before surgery – please follow the below medication instructions

**Only take these** medications with **clear fluids** the morning of your operation when you wake up:

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Do not take these medications before surgery:

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Bring these specific medications to hospital on the day of surgery: \_\_\_\_\_

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**DO NOT TAKE:** diabetic pills or insulin the day of surgery - unless told otherwise.

- Bring all inhalers and Nitro spray with you to the hospital even if having day surgery.
- If you will be staying overnight in the hospital after your surgery, bring all prescription medications in their original containers, including inhalers, eye drops and creams.
- **Please note:** we do not administer vitamin and herbal products.

## What not to do before your surgery

- **DO NOT** use creams, lotions, or powders on the area of your operation. If you are having upper body surgery, do not use deodorant on the side of your operation.
- **DO NOT** shave the area of your operation.
- **DO NOT** wear makeup, lipstick, hairspray or perfume/cologne on the day of your surgery.
- **DO NOT** drink alcohol or smoke for at least 24 hours before and after your surgery.

## General tips for surgery preparation

- Shower or bath the night before or morning of your surgery.
- Remove nail polish on fingers and toes.
- Remove contact lenses, hair clips and pins.
- Wear loose fitting clothing to the hospital such as track pants and sturdy shoes such as running shoes, no flip flops.
- For hand/wrist surgery, please bring two pillows for the ride home **and leave them in the car.**
- If you are having arm/hand surgery, your sleeves should be loose and stretchy we recommend an oversize stretchy t-shirt to fit over bulky dressings.
- Ophthalmology patients - please wear a short sleeved, button down shirt or loose fitting shirt.
- Ask your surgeon for information on costs for services or devices you will need for your surgery and after care not covered by the Ontario Health Insurance Plan, such as casts and slings.

## Pre and post-operative exercises

Practice these exercises three times the day before your surgery so you are prepared to do them after your operation.

### Deep breathing exercises – to prevent pneumonia

1. Breathe in through your nose deeply and slowly.
2. Blow out slowly through your mouth.
3. Repeat 10 times. If you get dizzy or lightheaded, pause for a minute, and continue.
4. After your last breath in, give a good cough (using your abdominal muscles) to clear any mucus.
5. After surgery, repeat this exercise every hour while you are awake.

**Leg circulation exercises** – to get your blood circulating smoothly, prevent blood clot formation and restore muscle tone. See information on next page for further information about venous thromboembolism (blood clots).

### Ankle pumping

1. Point toes of both feet gently away from you.
2. Flex your feet with toes pointing up.
3. Repeat 20 times, four to six times a day.

### Ankle circles

1. Circle your feet around your ankles in each direction 10 times.
2. Repeat four times a day.

### Knee bending

1. Bend each knee, one at a time, sliding foot along the bed toward you and then slide it down.
2. Repeat 10 times for each leg, four times a day.

## **Venous Thromboembolism**

Venous thromboembolism (VTE) is a medical term that includes deep vein thrombosis (DVT) and pulmonary embolism (PE). DVT is a blood clot that forms deep inside the lower leg and blocks the blood flow.

### **Signs and symptoms of DVT:**

- Skin feels warm at the site of the clot
- Veins near the surface of skin appear larger or noticeable at the site of the clot
- Pain, tenderness or swelling in the leg or calf

PE is a blood clot that breaks off from the wall of a vein and travels through the bloodstream to the lungs and blocks the blood flow

### **Signs and symptoms of PE:**

- Dizziness/Fainting
- Sudden sharp chest or upper back pain
- Shortness of breath
- Coughing up blood
- Fast heart beat

### **What can YOU do to prevent the formation of clots?**

- Perform the pre and post-operative exercises such as ankle pumping, ankle circles and knee bending as described in the patient information booklet on page 5
- Get up and walk at least four times a day for 15-20 minutes, increasing daily
- Take medication or wear the stockings as prescribed by your doctor

### **When should I call a doctor?**

- If you have any swelling, redness, tenderness or pain in your leg, call/visit your doctor or your local Emergency department or Urgent Care facility as soon as possible.

### **When should I call 911?**

- If you have any of the following symptoms:
- Trouble breathing
- Sharp unexpected chest pain
- Coughing up blood
- Fast heart beat
- Fainting
- Worsening of symptoms

## Spiritual Care Services

We care for your body, mind and spirit. Spiritual care provides emotional and spiritual support during times of change due to injury, illness, or disability. This may be important to you when approaching surgery.

Information and support are two significant aspects of coping well with changes in your health. The emotional processes of crisis, change and adjustment can involve feelings of uncertainty, fear, disappointment, stress, sadness or anger, as your health changes.

### **At times like this, spiritual care can help by:**

- Listening to you and your family members
- Helping you understand the impact of your illness
- Processing and dealing with your feelings
- Exploring resources, choices, and strengths
- Providing a prayer or ritual, and if you wish,
- Connecting you with emotional and spiritual support resources in your community

When you arrive for your pre-surgical screening appointment, you can ask the nurse to call Spiritual Care, or you may choose to call Spiritual Care yourself at 519-646-6100, pager 10389.

## Anesthesia

Anesthesiology is a branch of medicine dedicated to total care of a patient undergoing surgery or invasive diagnostic procedures.

Anesthesiologists are the only physicians with expert knowledge of the drugs used during surgery to ensure 'sleep' and/or absence of pain. Total care also includes preparing you for surgery, being responsible for pain relief in early recovery as well as managing complications that may result from the procedure. Anesthesiologists are familiar with all medical conditions and their implications for patients and are leaders in ensuring safe surgery. They have experience in giving an anesthetic for all surgical procedures and provide care to all ages.

There are several forms of anesthetic care patients receive at St. Joseph's Hospital: general anesthesia, regional anesthesia and intravenous sedation.

**General anesthesia** is a drug-induced, reversible state of unconsciousness, which provides pain relief and relaxation of muscles, ensuring that patients have no memory of their procedure.

**Regional anesthesia** (a specialty at St. Joseph's Hospital) involves injecting local anesthetics close to a nerve or nerves that supply feeling (and function) to the area of the body involved in the operation. You will often receive sedative medication in addition to your regional anesthetic for your comfort, tailored to your individual needs. Local anesthetic drugs stop nerves from working temporarily, so that no sensation and movement occurs in the area of the body supplied by those nerves.



**Intravenous** (or deep) sedation is used for invasive diagnostic procedures, such as a colonoscopy, to provide superior patient comfort but also allow for rapid recovery and return to full function.

With any type of anesthesia, your comfort and safety are the first priority of your anesthesiologist. You will have the opportunity to meet your anesthesiologist who will review your history and answer any questions that you may have prior to your procedure.

## The day of your surgery

**If you are ill or notice a change in your health before your surgery call your surgeon's office. If you wake up sick the morning of surgery or are unable to come due to weather, please call the Admitting Department at 519-646-6015 and your surgeon's office.**

### What to bring the day of surgery?

- This booklet and all discharge instructions included in the package.
- Containers for dentures, glasses, and contacts.
- Hearing aids
- One family member or friend.
  - Only one visitor allowed at bedside at all times
  - **Please note:** children are not allowed in the Surgical Day Care Unit.
- Your CPAP machine (if you have sleep apnea).
- Your Ontario Health card (or equivalent).

### Do not bring any valuables with you on the day of your surgery.

This can include:

- Jewelry
- Credit cards
- Watches
- Cell phones
- Electronic items
- Large amounts of money
- Designer handbags/clothing

*We do store belongings for patients having day surgery in a locker. For patients being admitted please have your family/friend bring them after you have been admitted to the inpatient unit. St. Joseph's is not responsible for lost or stolen articles.*

## Patient tracking system

We want to keep you informed at every step of your loved one's journey with us, from admission to discharge. Through our patient tracking system we can update you on where your family member/friend is via television monitors located in our main waiting areas. Information posters by each monitor explain the meaning of the updates that appear beside their unique case number. For more information please see the admissions team.

# After your surgery

You must have an adult take you home by car or accompany you in a taxi. St. Joseph's strongly recommends that outpatients have a responsible person to stay with them overnight, however, this is no longer mandatory. It is safer for you to have someone overnight but we recognize that this is not always possible. If your surgeon advises you that you must have someone stay with you overnight because of the nature of your surgery – this will be a requirement of your care. Please discuss any concerns with your care team.

If you have an extended stay, greater than 90 minutes, in the post anesthetic care unit (PACU) you may be escorted into PACU for visits.

## How to care for your surgical site

- Check your dressing for signs of excessive bleeding (slow oozing that completely soaks your bandage within one hour).
- Do not soak your wound/incision in water. If the bandage gets wet, change the dressing, using sterile gauze and tape unless told otherwise. Wash your hands before and after.
- You may need to purchase the dressings and tape required to change your dressing.
- Once your dressing has been removed you may shower and get the incision wet. Soap will not harm your incision. Gently pat the incision dry.
- Do not apply oils, creams, lotions, or powders to your incision, unless instructed.

## What not to do after your surgery

Dizziness, drowsiness, light-headedness are common symptoms after anesthetic.

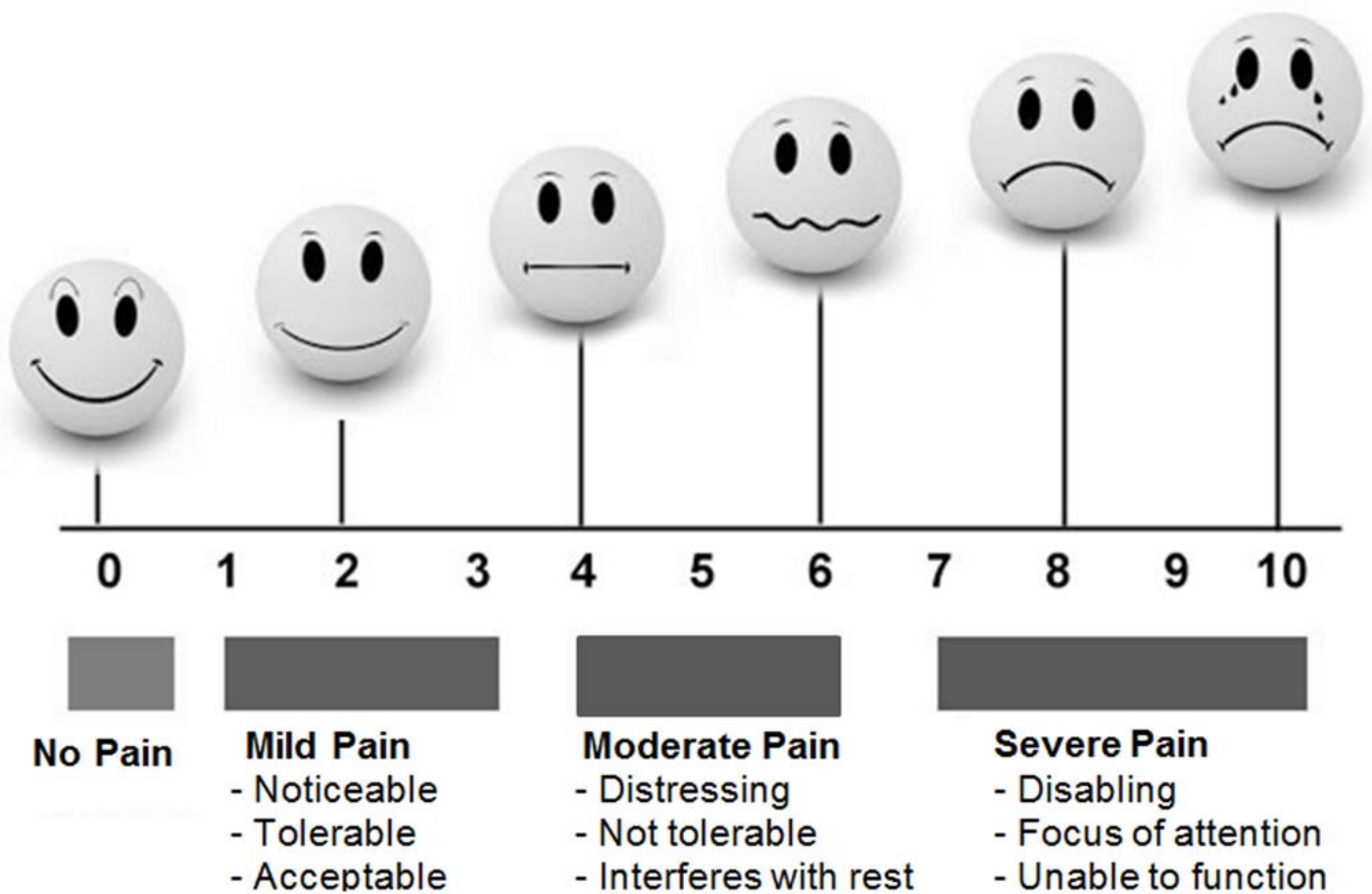
### For at least 24 hours after your surgery do not:

- Drive a vehicle of any kind or do any tasks that require skill, coordination, and judgment. (Note: if you have had limb surgery, do not drive until you are advised by your surgeon.) Anesthesia and pain medication impair your judgment and reactions
- Operate machinery or power tools
- Handle dangerous items like hot grease, boiling water
- Drink alcohol or take sedatives/tranquilizers
- Smoke
- Make important personal or business decisions, or sign important documents
- Take part in sports, perform heavy work, or lift heavy objects

## Pain assessment tool

The graphic below is the pain assessment tool you will see often during your stay at St. Joseph's. Your nurses will ask you to rate your pain on a scale of 0 to 10 using the pictures and words in the pain assessment tool as a guide. Your pain will be managed by medication prescribed by your physician. The medication may be given to you through intravenous, by pills or other routes depending on the type of surgery you had.

Once you have gone home after surgery, it's important to monitor your level of pain and use the pain assessment tool to give yourself a score. You should be in the range of 0-3. The goal is to be able to maintain normal daily activities while taking your pain medication. Remember to take your prescribed pain pills regularly as directed to keep your pain level in check.



## **Common side effects after surgery and what to do:**

### **Nausea and vomiting**

Severe pain after surgery can cause nausea. Help control your pain by following the instructions below:

- Remember to take your prescription pain medication with food.
- Reduce your prescription pain medication use when able.
- Prevent dehydration by eating ice chips or taking frequent small sips of water, weak tea, or clear flat soda (every 15-20 minutes).
- When vomiting has stopped, try a bland diet for the next 24 hours (soda crackers, Jell-O, popsicles, toast, eggs, rice, and chicken).
- Avoid dairy products, caffeine, alcohol, nicotine, and fatty or highly spicy foods.
- Decrease motion.
- Use an anti-nausea medication, Dimenhydrinate (Gravol) by mouth or rectum (suppository) 20 to 30 minutes before taking pain medication (can be bought without a prescription).
- Contact your surgeon if you cannot keep any fluids down for 24 hours even with the use of Dimenhydrinate (Gravol).

### **Constipation**

- Increase dietary fiber to 20-35g daily, (fruits, vegetables, bran, prunes).
- Drink at least six to eight (eight oz.) glasses of fluids daily, (water, milk, juices (prune, orange), and soup).
- Eat a variety of fruits and vegetables when able.
- Reduce sugar and fat intake.
- Reduce use of pain medications when possible.
- Increase daily activity gradually, starting with 15-20 minute walks in your home every two hours while awake.
- Maintain normal bowel routine. Don't rush having a bowel movement.
- Use stool softeners when needed, as directed by your surgeon (Colace, Soffax).
- If your bowels have not moved in two days after surgery, use a mild laxative (Milk of Magnesia).

### **Sore throat, hoarseness, cough**

Patients can experience a sore throat, hoarseness or cough after surgery caused by irritation to the back of the throat by the breathing tube that was used for the operation. Sore throats usually last one or two days after surgery.

To ease these symptoms, you can:

- Use Chloraseptic throat lozenges or over-the-counter antiseptic sprays – consult your Pharmacist.
- Increase fluids (cool liquids, ice chips, popsicles) tea with honey may help soothe.

- Warm salt water gargle (one teaspoon of salt in an eight oz. glass of warm water). Do not swallow.
- Avoid spicy foods or acidic juices (orange, tomato).
- Avoid smoke.
- Humidifier use may be helpful.
- If your symptoms do not improve or get worse, call your family doctor or primary care provider.

## Warning signs to watch for

Call your surgeon; go to the nearest emergency department or the Urgent Care Centre at St. Joseph's Hospital if you have any of the following symptoms:

- Redness, swelling, or drainage from your wound.
- Fever of 38.5C (101F) or greater, or chills, lasting longer than 24 hours.
- An increase in pain that is not relieved by your pain medication.
- Vomiting lasting longer than 24 hours without relief from Dimenhydrinate (Gravol).

**IF YOU NEED IMMEDIATE ASSISTANCE - CALL 911.**

## Eating and drinking after surgery

After your surgery you should begin with eating light foods such as crackers, Jell-O and soup. Increase gradually to a normal diet. If you are not nauseated 24 hours after surgery you can begin your regular diet, unless advised otherwise.

Avoid spicy, greasy, fried foods and large portions for 24 hours as they can cause gas, indigestion, and heartburn. Drink six to eight (eight oz) glasses of fluid daily, taking small sips often. Good choices include ginger ale and water.

*Please note:* follow the directions above unless you have received specific instructions from your surgeon

## Activity after surgery

No matter what type of procedure you have, remember, surgery can have significant mental and physical effects. You will tire easily after your surgery so ensure that you rest for the remainder of the day and give your body and mind a chance to heal.

- Increase activity gradually. Start with short 15-20-minute activities like walking every two hours while you are awake for the first one to three days.
- Getting up for meals is a good introductory activity.
- Limit naps to 30 to 60 minutes a day so that your night time routine is not affected.
- Sexual activity may be resumed when comfort permits, unless told otherwise by your surgeon.

# Patients with diabetes

## Patients on insulin - before surgery

Have these items available at home:

- Testing material for blood glucose
- Gravol (Dimenhydrinate) for nausea, vomiting
- Tylenol (Acetaminophen) for pain, fever
- Variety of liquids and foods (see next page)

Before you go to bed the evening before your surgery, test your blood sugar. If your blood sugar is below five have a snack of carbohydrate and protein.

## Day of surgery

- Test your blood sugar the morning of your surgery.
- If you have low blood sugar (four mmol/L or lower) in the morning, or during the night, take one tablespoon of honey or 15 grams of glucose tablets (check label for how many are needed).
- Take medications as instructed with a sip of water when you get up.
- DO NOT TAKE ANY INSULIN at home the morning of your operation, unless specifically told by the physician.
- Bring your insulin with you to the hospital.

## Call your doctor if:

- Your blood glucose stays higher than your normal range or lower than four mmol/L
- You are unable to keep liquids or solids down
- You have a fever (temperature over 38.5 °C or 101 °F)
- You have diarrhea or are vomiting

## After your surgery

- Do not stop insulin.
- Check your blood sugar as per your regular routine, or as directed.
- If unable to eat or drink normally (see care information on next page)
- Follow the discharge instruction sheet provided.

## Diabetics – what to do when you are feeling unwell

When you've had surgery, your blood glucose level can change a lot as a result of the added stress. This can cause problems such as high blood sugars and ketoacidosis. Knowing what to do when you are sick can help you keep your blood glucose under control.

**Medication:** Do not stop taking your diabetes pills or insulin when you are ill. Always check with your physician before changing your medication.

**Monitoring:** Test your blood glucose at least every four hours while awake.

**Liquids:** Drinking liquids is very important, especially if you are losing fluids due to fever, vomiting, or diarrhea. Let your blood glucose be your guide to choosing liquids. If your blood glucose is over 14 mmol/L, drink carbohydrate-free liquids like water, broth or bouillon, sugar-free/caffeine-free soda, or decaffeinated tea that won't raise your blood glucose. If your blood glucose is low, drink carbohydrate-containing liquids like regular soda, milk or fruit juices.

**Food:** If you can't eat your usual meals, have one serving of food containing 15 grams of carbohydrate every hour while awake. If you are not able to eat solid foods, take carbohydrates in liquid form (i.e. juice).

## Type 1 diabetes

If your blood sugars are above 14 mmol/L – test your ketones using urine ketone test strips or a blood ketone testing meter. When you show ketones, it indicates you need more insulin and you need to drink water or sugar free fluids. If a moderate or large amount of ketones register on the test strip, ketoacidosis is present and treatment is required immediately. Refer to the chart below for guidance.

### Special procedures

Some tests and procedures require changes in your diabetes management. For example: any test where dye is injected, will require you to stop taking your metformin pills. Your doctor will tell you when it is safe to restart the metformin.

Some procedures require you to maintain a restricted or fluid diet.

Please read the information provided and ask about specific instructions when the test or procedure is booked.

Foods and liquids that contain approx. 15 grams (or One CARB choice) of carbohydrate include:

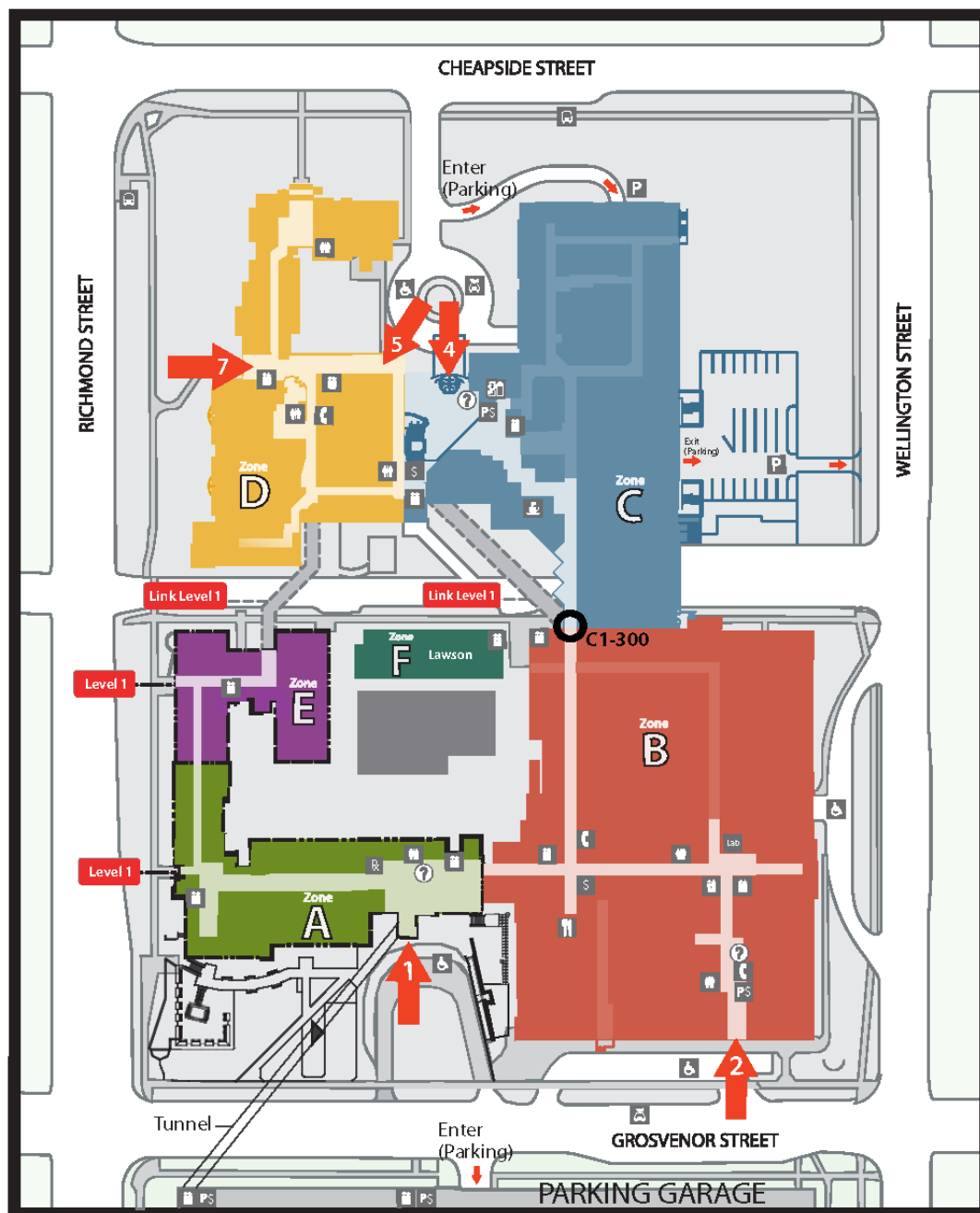
1 cup (250 ml) Gatorade  
 ½ cup apple juice  
 1/3 cup grape juice  
 ¾ cup orange juice  
 ½ cup cranberry juice  
 ¾ cup pop\*

1 cup chicken noodle soup  
 1 cup cream soup, use water  
 1/3 cup regular Jell-O  
 ½ cup cooked cereal  
 ½ cup plain ice cream

\*not diet especially ginger ale

Blood glucose levels (mmol/L)	Ketone bodies in urine*	Symptoms**	Suggested actions
13 – 15	– or +	+	Measure your blood glucose level every six hours. Drink 250 ml of water every hour. Take 10% extra rapid insulin or use your sliding scale or Correction Factor.
15 – 20	++ or +++	++ or +++	Measure your blood glucose level every four hours. Drink 250 ml of water every hour. Take 10-20% extra rapid insulin every four hours. Contact your doctor or go to the hospital if there is no improvement and/or if symptoms of diabetic acidosis appear.
> 20	– or +++ or ++++	++++	Go to the hospital.
*+ = traces = 0.5 mmol/L      **+ =excessive thirst and urination ++ = small = 1.5 mmol/L      ++ =diarrhea and nausea +++ = moderate = 4.0 mmol/L      +++ =nausea, vomiting and diarrhea ++++ = large = 8.0-16.0 mmol/L      ++++ =nausea, vomiting, diarrhea, with/without ketone bodies			

# Map of St. Joseph's Hospital



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**Level 0**

**Legend**

- Information
- Accessible
- Elevators
- Washroom
- Telephone
- Parking
- Bus Stop
- Taxi Drop off and Pickup Area
- Cafeteria
- Gift Shop
- On the Go / Tim Hortons
- Parking Pay Station
- ATM
- Lab Test Centre
- Prescription Shop

— Indicates entrance is on level 1

- Grosvenor Entrance 1
- Grosvenor Entrance 2
- Cheapside Entrance 4
- Cheapside Entrance 5
- Richmond Entrance 7



# St. Joseph's Statement of Patient and Resident Values

We are diligent about finding new ways to improve the care we provide patients and residents. We are committed to excellent care and as part of our strategic plan we focus on providing an exceptional patient experience. When you walk through our doors we want you to know we value you as an individual - and hope our care surpasses your expectations.

The *Excellent Care for All Act, Bill 46*, was passed by legislature in June 2010 to ensure health care providers continually improve patient care. The intent of Bill 46 is to make health care providers accountable for improving patient care and enhancing the patient experience.

Under this new legislation, all hospitals must have a patient statement of values to help hospitals continue to put patients first by declaring what patients can expect from their health care organizations.

With feedback from patient, resident and family councils we developed the Statement of Patient and Resident Values.

## **Respect**

- for my privacy
- that I am part of my own care team along with the family support I see fit
- for my time – waiting for appointments; waiting for call bells to be answered; not rushing my time with the doctor and team; receiving results in a timely way

## **Compassionate, Caring People**

- who demonstrate genuine caring, recognizing that I am a person, not a diagnosis, case or number
- who work as well-coordinated teams
- with my best interests at the heart of all they do

## **Quality, Safe Care**

- provided by highly qualified staff supported by the best technology
- with the capacity to be flexible and act quickly when needed and the information I need before,
- during and after my visit or stay
- continuity across St. Joseph's teams and the health care system