



CEO Report to the Board

September 21, 2022



1.0 COVID-19 Developments

- [Provincial/federal updates](#): Young children eligible for first booster shot; Public health guidance updated; Case and contact management guidance updated; Moderna's Omicron vaccine approved; Bivalent COVID-19 booster dose now available in Ontario
- [St. Joseph's updates](#): New vaccine being rolled out to St. Joseph's residents

2.0 Strategy in Action

- [Reaching Out to Our Community](#): DocTalks Podcast launches; Advancing suicide prevention nationally; Patients to guide development of new patient portal app
- [Advancing Excellence in Care Together](#): Improving patient experience, access and flow; Enhancing care for veterans; New simulator helps patients practice car transfers
- [Leading in Research and Innovation](#): The secret super powers of poop; The future of probiotics and fermented foods
- [Leveraging Technology](#): MRI upgrade
- [Empowering People](#): New behaviour change counselling training; Expanded options for employee well-being support

3.0 Other - Finance/Facilities/Operational/Legislation

- More Beds Better Care Act

4.0 Recognition

- Welcome to new senior leaders

5.0 St. Joseph's in the News

6.0 Environmental Scan

1.0 COVID-19 Developments

Provincial and federal updates

Young children eligible for first booster shot

The Ontario government has expanded eligibility for [COVID-19 first booster doses to children aged five to 11](#) to provide an extra layer of protection ahead of the new school year. Effective September 1, parents and caregivers of children aged five to 11 are able to book an appointment for a paediatric COVID-19 booster dose at a recommended interval of at least six months following their most recent dose.

Public health guidance updated

Ontario has [updated public health guidance to manage COVID-19](#) during the respiratory illness season this fall. Some key highlights include:

- Those who have been in contact with someone who has tested positive for COVID-19 no longer need to isolate but should wear a mask for 10 days when in public.
- Those experiencing symptoms of COVID-19 such as fever, cough, or runny nose should stay home from school, work and social events until the fever is gone and symptoms are improving, get a rapid antigen test or, if eligible, a PCR test. They should also wear a mask for 10 days after and avoid non-essential visits to high-risk individuals and settings.

Case and contact management guidance updated

On August 31, 2022, the Ministry of Health issued updates to its [Management of Cases and Contacts of COVID-19 in Ontario](#) guidance materials. Included in these materials are guidelines for workers in the highest risk settings, which includes hospitals, returning to work following exposure to or testing positive for COVID-19. These return-to-work guidelines remain largely unchanged from [previous guidance](#). The most significant changes relate to the elimination of the self-isolation requirements in the event of a worker exposure to COVID-19, providing the worker remains asymptomatic, and a pivot away from using testing as a means of clearance for returning to work in the case of a COVID-19 positive worker. Guidelines for self-isolation for COVID-19 positive workers in highest risk settings remains unchanged.

Moderna's Omicron vaccine approved

[Health Canada has authorized an adapted version of the Moderna Spikevax COVID-19 vaccine.](#)

This vaccine (known as a "bivalent" vaccine) targets the original SARS-CoV-2 virus from 2019 and the Omicron (BA.1) variant, and is authorized for use as a booster dose in individuals 18 years of age or older. This is the first bivalent COVID-19 vaccine authorized in Canada and marks a milestone in Canada's response to COVID-19.

Bivalent COVID-19 booster dose now available in Ontario

Based on guidance from Health Canada and the National Advisory Committee on Immunization, the [Ontario government is offering the bivalent COVID-19 booster dose](#) to all Ontarians aged 18 and over, beginning with the most vulnerable populations. Starting September 12, bivalent COVID-19 booster appointments are available to: individuals aged 70 and over; residents of long-term care homes, retirement homes, and individuals living in other congregate settings that provide assisted-living and health services; First Nation, Inuit and Métis individuals and their non-Indigenous household members aged 18 and over; moderately to severely immunocompromised individuals aged 12 and over; pregnant individuals aged 18 and over; and health care workers aged 18 and over. Individuals can receive the bivalent booster at the recommended interval of at

least six months from their previous dose, regardless of how many boosters they have already received.

St. Joseph's COVID-19 Updates

New vaccine being rolled out to St. Joseph's residents

Working with the Middlesex-London Health Unit (MLHU), St. Joseph's has received its first supply of the new COVID-19 bivalent Moderna Spikevax vaccine. Mount Hope Centre for Long Term Care residents and Veterans Care Program residents at Parkwood Institute are prioritized to receive these first vaccines. Vaccination began the week of September 19.

Effective September 12, health care workers are eligible to receive their vaccinations and all staff are being encouraged to schedule an appointment at a MLHU vaccination clinic.

The bivalent vaccine targets the original COVID-19 virus as well as Omicron variant B.1.1.519, which was the variant experienced in January 2022. The bivalent vaccine has demonstrated better antibody response against Omicron infections than the original vaccine, and can help prevent severe illness, hospitalization and possibly prevent the risks of developing long-COVID.

2.0 Strategy in Action

Reaching Out to Our Community

DocTalks Podcast launches

St. Joseph's all-new DocTalks Podcast has hit the airwaves. The series, which launched September 7, features St. Joseph's experts sharing their knowledge on topics that will resonate with the community. Listeners can tune into the podcast for free on their computer or smart device through established platforms like Apple Podcast and Spotify. Hosted by award-winning London journalist [Jan Gillespie](#), each episode features a trending health care conversation, including insights on leading-edge treatments and research. Season one will feature eight episodes released every three weeks from September 7 until January 31, 2023. The episodes focus on a wide variety of topics, from the latest in erectile dysfunction, dementia and diabetes, to what's new in prostate cancer and urinary incontinence in women. Visit [St. Joseph's website](#) to tune into the latest episodes or to subscribe to the DocTalks Podcast.

The podcast is a spin off from St. Joseph's original DocTalks lecture series. This series continues. Past recordings can be found on [St. Joseph's YouTube channel](#) and announcements of upcoming talks are available on [St. Joseph's website](#).

Advancing suicide prevention nationally

The project lead for St. Joseph's [Zero Suicide initiative](#), Shauna Graf, who is also on St. Joseph's Quality, Strategy and Innovation team, was invited by the Mental Health Commission of Canada to join the National Collaborative on Suicide Prevention (NCSP). The NCSP is a pan-Canadian group of organizations united to prevent suicide and promote life. The collaborative engages its member organizations to facilitate discussion and knowledge exchange about suicide prevention; to catalyze opportunities for shared work; and to yield a collective voice to amplify suicide prevention messaging. Shauna will be representing the work of St. Joseph's, discussing our Zero Suicide toolkit and potential for future collaborations.

Patients to guide development of new patient portal app

St. Joseph's Care Partnership Office is providing consultation services to a working group within the joint virtual care team of St. Joseph's and London Health Sciences Centre regarding the initiation and leadership of a "co-design" group of patient partners from both hospital systems. These patient partners will be guiding and completing work to advance the development of a new patient portal app system for London and the region. The Care Partnership Office will be providing ongoing consultation services as the project progresses.

In other care partnership news, St. Joseph's care partner Brenda Martin will be a speaker at a webinar hosted by the Ontario Caregivers Association on September 22. In partnership with Ontario Health, this webinar, titled Tools for Better Transitions Between Hospital and Home, will provide caregivers with information, resources to support patient transitions between hospital and home. Alongside presenter Dr. Karen Okrainec, clinician-scientist and assistant professor at University Health Network and the University of Toronto, Brenda and another family caregiver will share their lived experiences on transitions between hospital and home.

Advancing Excellence in Care Together

Improving patient experience, access and flow

As previously reported, St. Joseph's Urgent Care Centre (UCC) created a waiting space for patients in Zone B, Level 0, in the seating area off the main corridor between Zones B and C. The purpose of this decant area, which opened in November 2021, was to address the patient experience, access and flow during a time of extremely high patient volumes in the UCC. The centre was increasingly experiencing gridlock when the exam beds were filled and the UCC waiting room reached capacity based on infection control protocols. This resulted in a pause on triaging patients until a care spot was available. Both staff and patients were distressed with these long waits and delay to triage, and the number of code blue calls were increasing at Grosvenor Entrance 2.

With capacity for 40 patients, the decant waiting area is staffed by a registered nurse and a clinical receptionist assistant to monitor patient safety and ensure patients return to the UCC when it's their time to be seen. It is opened when the UCC main waiting area is at capacity and the unit is full, which usually occurs within two hours of the UCC opening its doors at 8 am. Patients are triaged and registered before being sent to this waiting area.

As an update, the addition of the decant area has resulted in excellent outcomes:

- With the decant waiting area available, patients can be triaged quickly, which enables the unit to know who needs to be prioritized according to the Canadian Triage and Acuity Scale
- With improved patient flow, patients are being triaged at unprecedented rates with an average 120 patients in six hours. (This would be equivalent to an emergency department seeing 480 patients in 24 hours).
- There has been a sustained significant decrease in code blue calls at Grosvenor Entrance 2, from an average of 15 codes a month from July 2021-October 2021 to an average of four codes per month November 2021- June 2022.

Enhancing care for veterans

Two recent initiatives in the Veterans Care Program at Parkwood Institute are enhancing care for our veterans:

- Recognizing a need to improve programming for the “younger” veterans whose interests and experiences differ from our veterans who served during WW2 and the Korean War, the social work and therapeutic recreation teams worked together to develop a recreational group for these six individuals, ages 62 to 70 years. Called Let’s Talk Rec, the recreational group is providing an interactive opportunity for these veterans to gain knowledge and understanding about recreation and leisure and how it relates to their overall well-being. As well, the veterans’ specific interests and needs are being explored to enhance the Veterans Care Program resources and/or expand our reach into community. This fall, activities planned for the group include a Western Mustangs Football game and the musical ‘Chicago’ playing in Stratford. Also being explored are opportunities that could be provided by local senior centres, and having the veterans involved in the planning of outings and events that specifically relate to them.

It’s hoped that the group will build community among the younger veterans through their shared experiences. To date, it has been very well received by the younger residents and is having a positive impact on their mental health and well-being.

- The Veterans Care Program has introduced the role of communicative disorder assistant (CDA). The CDA works with our veterans on all three units under the supervision of the speech language pathologist to support resident communication-related needs. These needs could include, but are not limited to, word-finding, hearing deficits, and comprehension of messages. Common diagnosis associated with communication deficits among the veterans include stroke-related dysphasia, Parkinson’s disease, dementia and general hearing loss. The CDA provides therapy and communication-related treatments, and helps manage hearing-related equipment (i.e. hearing aids and audioports). The CDA has also been a great resource in assessing communication needs in group settings. For example, after attending and observing a resident council meeting, the CDA made several recommendations on how to make the meetings more accessible to residents, particularly those with hearing difficulties. Live captioning was suggested, which is the process of having a staff member type what is being said in real time on a Smartboard screen for residents to read.

New simulator helps patients practice car transfers

Getting in and out of a vehicle is often taken for granted in daily life, but after injury or illness patients need to practice safe methods and gain awareness of safe positioning and mobility limitations for vehicle transfers. The ability to get in and out of a vehicle safely improves quality of life for our patients, allowing them to engage in meaningful activities and stay social connected.

St. Joseph’s, the occupational therapists with Specialized Geriatric Services (SGS) advocated for the purchase of a car transfer simulator to support rehab training with vehicle transfers. The TRAN-SIT® Car Transfer Simulator was recently delivered and installed on the SGS inpatient unit. It provides the following benefits:

- **Functional training:** Previously, the therapists had to be creative in using an armless chair and a box to simulate lifting legs into the vehicle. However, it was difficult for patients with cognitive impairment



to appreciate what they were attempting to replicate, and the training did not always translate well to the real situation. The simulator has a tilt steering wheel, fully functional passenger and driver doors, and raises or lowers to match each patient's own vehicle type. It can simulate sedans, SUVs, vans, and trucks.

- **Useful for all patients:** The therapists are able to use the simulator with the majority of SGS patients as most patients leave Parkwood Institute in a vehicle. As well, patients often have follow-up appointments and need to be able to enter/exit vehicles post discharge for a variety of reasons. Family and friends are often concerned about car transfers and safely supporting a patient following discharge.
- **Convenient:** Therapists no longer have to coordinate with a patient's family or friends to find a day and time to practice the transfer in their own vehicle outside. Additionally, the simulator allows patients to practice inside, away from the elements, making it safer and easier to practice and review the transfer techniques multiple times, which increases long-term safety and builds confidence.

Leading in Research and Innovation

The secret super powers of poop

St. Joseph's is promoting the need for fecal donors in London to support leading-edge fecal microbiota transplant treatment for *Clostridioides difficile* (*C. difficile*) as well as research into this new frontier in medicine.

At St. Joseph's, fecal transplants are now routine treatment for debilitating and life-threatening *C. difficile* – the major cause of antibiotic-associated diarrhea. The treatment makes it possible for people to recover from this destructive infection and holds tremendous potential in the care of various other serious diseases. The success rate of fecal transplants performed by the Infectious Diseases Care Program is a staggering 96 per cent. The program is one of few centres performing the procedure as part of routine care for *C. difficile*, and it's the only program in Ontario – one of only two in Canada - administering the treatment via capsules. Dr. Michael Silverman, Medical Director of the Infectious Diseases Care Program, is a pioneer in fecal transplantation and his team has played a key role in the treatment becoming the standard of best practice for *C. difficile* across Canada and the USA. Limiting this life-changing treatment, however, is a serious shortage of donors. At times, there have been no eligible donors and the team has had to stop treating vulnerable patients.

In a media pitch and via social media, St. Joseph's and Lawson Health Research Institute are educating the public on how and why fecal transplants are done, their promising potential to treat an array of illnesses, the patient and donor experience, and the donation process. The hope is to generate new donors for this exciting and expanding area of research, and to save lives. Read more on [St. Joseph's website](#).

The future of probiotics and fermented foods

In the past 20 years, [Western Heads East](#)-related research has resulted in 110 publications, more than \$2 million in funding and a track record of success, helping to transform lives both within partner communities in Africa and at home in Canada through Western University students and local partnerships. On September 21, Lawson Health Research Institute scientist Dr. Gregor Reid (PhD), professor emeritus, and Jeremy Burton (PhD), Deputy Director of the Canadian Centre for Human Microbiome and Probiotics located at St. Joseph's Hospital, will host the first of a four-part Western Heads East 20th anniversary webinar series. Dr. Reid will present on why probiotic supplemented fermented food can make a difference to Africa and Canada. Dr. Burton will

address the microbiome and its potential to help cure disease such as multiple sclerosis and cancer. The discussion will include how isolating food-grade bacteria can lead to fermented products. Learn more on [Western's website](#).

Leveraging technology

MRI upgrade

In a creative solution, St. Joseph's two MRI machines are being upgraded without the need to replace the core magnet component of the MRI machine, avoiding a time consuming and complex process of switching out the machines, and months of downtime. One upgrade has been completed and the second one is scheduled for November 2022.

As background, both MRI machines are aging having been installed 10 years ago. There is a plan to move MRI imaging from Zone B, Level 5, to Zone D, Level 0, in the vicinity of the Medical Imaging Centre, but this project has been delayed and is not expected to be completed until 2027. At the same time, infrastructure on Level 5 cannot support moving to a more advanced MRI unit. A solution was needed to keep technology up to date yet didn't impact the infrastructure of on Level 5. Working collaboratively with Siemens, a solution was found.

Siemens' MAGNETOM Sola Fit allows for a full upgrade of the electrical and image reconstruction computer components of the MRI unit and leaves the core magnet component in place. This is accomplished in four weeks while a full replacement of the unit – which requires a crane lift through the roof - would take four months for each machine. Cost is also significantly reduced with the upgrade about 60 per cent of the cost of a new unit.

Most important, at a time of significant patient backlogs due to the pandemic, downtime is minimized and patients served by St. Joseph's continue to receive the latest and best in MRI imaging. With Sola Fit, the magnets are upgraded to a Sola 1.5 T platform, which significantly increases image quality and diagnostic abilities. The upgraded MRIs are also faster, which will result in seven per cent more patients scanned per year. This equates to 728 more patients served each year, 3,640 patients over five years, with no incremental costs.

St. Joseph's continues to plan for the development of the new MRI space and the installation of a 3T magnet. The Sola Fit solution bridges the equipment replacement gap between today and development of this new space in 2027.

Empowering people

New behaviour change counselling training

For patients living with one or more chronic conditions, it's well known that reducing morbidity and mortality and improving quality of life rely fundamentally on behaviour change and enhanced adherence to a range of health behaviours. Central to achieving this is the quality of clinician-patient communication and relationships, and clinicians' skills in facilitating patients' health behaviour change.

To enhance our ability to provide this important aspect of patient-centred care, a new behaviour change counselling training program is being offered to chronic disease prevention and management program staff and physicians who are directly engaged in behaviour change counselling in their daily work with patients. The program will focus on communication skills and

behaviour change techniques that can transform clinician-patient relationships and optimize efforts in chronic disease self-management and health behaviour change.

The training is being provided over the next two years supported by the Behaviour Change Institute (BCI) based in Halifax. Dr. Michael Vallis, clinical psychologist and lead of the BCI, has introduced BCI training programs into organizations across Canada and internationally. The goal over next two years is to train the targeted clinical staff and physicians within Medicine Services' chronic disease programs and to establish a community of practice among these health care providers. The first training group will launch on October 3, 2022 and will finish in December 2022, with additional training groups continuing to come on board.

Expanded options for employee well-being support

Homewood Health, St. Joseph's Employee and Family Assistance Program provider, has launched a new digital platform called Homewood Pathfinder. Pathfinder is an online tool to help staff and their family members manage their well-being. This new platform replaces the previous Homewood portal and offers expanded digital options. A unique feature called 'Meet Now' provides the ability to meet with an online counsellor immediately or the option to schedule at a later date

3.0 Other - Finance/Facilities/Operational/Legislation

More Beds Better Care Act

On August 18, 2022, the provincial government introduced More Beds, Better Care Act, 2022 (formerly Bill 7), which received Royal Assent on August 31, 2022. The act aims to facilitate the admission of eligible patients, who are clinically determined as needing an alternate level of care (ALC), into long-term care homes while they wait for placement in a preferred home. Effective September 21, 2022, the remaining provisions of the Act will come into force. In addition, changes to the regulations under the Fixing Long-Term Care Act, 2021 (O. Reg. 484/22) and the Public Hospitals Act (O. Reg. 485/22, O. Reg. 486/22) will come into effect. These regulations will provide added clarity and specific requirements enabling and supporting the changes outlined in the legislation. A [summary of all regulation changes](#) provides more information.

The Ontario Hospital Association (OHA) has developed a [backgrounder](#) with additional details and context related to these regulatory amendments. You can also refer to the OHA's [Bill 7 backgrounder](#).

4.0 Recognition

Welcome to new senior leaders

St. Joseph's welcomes the following individuals to the Senior Leadership Team, each of whom bring tremendous skill, passion and vision to their new roles:

- **John French:** John has been appointed to the role of Clinical Diagnostics Executive and joins the Senior Leadership Team at St. Joseph's and Executive Leadership Team at London Health Sciences Centre to advance care in the context of an increasingly multidimensional and evolving health system. He will lead Medical Imaging and Pathology and Laboratory Medicine and manage strategy and operations, ensuring optimum efficiency and effectiveness. Beginning his career as a radiation therapist, John has more than 17 years of progressive leadership experience. He has served in senior level roles at Provincial Health Services Authority – BC Cancer Agency and, most recently, as

Executive Director, Provincial Diagnostic Imaging Program at Shared Health Manitoba. He is also an accomplished researcher and sought-after speaker who has published extensively. John has proven himself to be a change agent for improving health care delivery and outcomes.

- **Dr. Sandra Northcott:** Dr. Northcott has been appointed Interim Vice President of Medical and Academic Affairs for St. Joseph's. With Dr. Bill Sischek's retirement, Dr. Northcott will assume the interim role for St. Joseph's while recruitment is underway for a permanent replacement. Dr. Northcott has worked as a psychiatrist within Parkwood Institute's Mental Health Care Program since 2015. She has also held several leadership positions throughout that time, both within our Mental Health Care Program and jointly through the Department of Psychiatry at Western University, including; Medical Director, St. Joseph's Treatment and Rehabilitation Program from 2015 to 2017; Mental Health Care Site Chief from 2017 to 2019; and interim Co-Chief of Psychiatry for the majority of 2018. Dr. Northcott will also remain in her role of Associate Dean – Learner Experience, at Western's Schulich School of Medicine and Dentistry, a position she has held since 2019.
- **Andrew Davidson:** Andrew has been appointed as Vice President, Human Resources (HR). An accomplished HR executive with progressive leadership experience, Andrew is passionate about the health care system having held leadership roles in acute care, retirement and long-term care, home and community care, and Ontario Health. He brings deep knowledge and expertise in building people strategies that support organizational priorities and has demonstrated an exceptional ability to forge and maintain trusting and long-term relationships with senior teams, leadership, management, front line staff, physicians and union leaders. Andrew joins us from the Centre for Addiction and Mental Health (CAMH) where he was the Interim Vice President, People and Experience. Prior to joining CAMH, Andrew was the Vice President, People, Culture and Development, at Ontario Health West where he provided executive leadership at the Waterloo Wellington Local Health Integration Network through the amalgamation of the Community Care Access Centres and subsequent sub-regions. Previously, Andrew held several HR leadership roles at Joseph Brant Hospital, William Osler Health System and Chartwell Seniors Housing.

5.0 St. Joseph's in the News

[Sexual violence: what's happening in London, Ontario?](#), Le Devoir, September 3, 2022

[Western staff, once vocal COVID vaccine supporters, say: No more](#), London Free Press, September 11, 2022

[Fecal philanthropist donates poop to save lives](#), CBC London, September 15, 2022

[Life-changing C. difficile treatment in need of poop donors, London, Ont. hospital says](#), Global News, September 14, 2022

[Your poop could save lives...here's how](#), CBC London, Afternoon Drive, September 14, 2022

[The scoop on poop: London hospital looking for donors](#), London Free Press, September 15, 2022

[Early success but internal concerns a year after London police team up with healthcare workers](#), Newstalk 1290, September 15, 2022

[As a tool to help those in crisis, COAST program gets positive early review](#), CBC News, September 16, 2022

[Fired executive files \\$650K lawsuit against St. Joseph's hospital](#), London Free Press, September 19, 2022

[No relief in sight: Region's ER wait woes continue as fall nears](#), London Free Press, September 20, 2022

6.0 Environmental Scan

[Some racialized groups had higher mortality rates from COVID-19, StatsCan analysis of 2020 data finds](#), CBC News, August 30, 2022

[Nationwide 3-digit suicide prevention hotline launching next year, CRTC says](#), CBC News, August 31, 2022

[With health care in spotlight, some Ontario nursing programs see record applications](#), Global News, September 1, 2022

[Ontario Science Advisory Table gets new home, new mandate](#), Toronto Sun, September 1, 2022

['Not a way to handle the pandemic': Science table members disagree with scrapping 5-day COVID-19 isolation](#), CBC News, September 2, 2022

[Ontario Science Table calls for provincial strategy to manage long COVID](#), Global News, September 7, 2022

[Ontario gives OK for nursing college to expedite international nurse registration](#), CTV News, September 7, 2022

[Nearly 1 in 5 Canadians say they have tested positive for COVID-19: Statistics Canada](#), CTV News, September 7, 2022

[6M Canadians don't have a family doctor, a third of them have been looking for over a year: report](#), CTV News, September 8, 2022

[The Doug Ford government said the health system wasn't in crisis. Here's what the data shows](#), Toronto Star, September 10, 2022

[Health unit extends hours as rollout of bivalent booster doses gets underway at its mass and community vaccination clinics](#), Middlesex-London Health Unit, September 12, 2022

[Agrimex vaccination clinic moving to new Western Fair location by month's end](#), Middlesex-London Health Unit, September 13, 2022

[Majority of Canadians have now caught COVID — so what does that mean for the future?](#), CBC News, September 14, 2022

[Hospital patients awaiting long-term care spot can be moved up to 150 km](#), London Free Press, September 14, 2022

[More than 1 in 5 residents in long-term care given antipsychotics without a diagnosis, data shows](#), CBC News, September 14, 2022

[OMA proposes three immediate solutions for Ontario's health-care system](#), Ontario Medical Association, September 15, 2022