



# **MONTHLY CEO EXTERNAL LANDSCAPE REPORT**

**BOARD OF DIRECTORS  
MARCH 2024**

The past month included several important external announcements as we shared how Team LHSC is advancing our 2023-2027 Strategic Plan. It also included a number of health care funding announcements from government and external partners.



## Media and public engagement

### Media coverage

The Communications and Public Engagement team issued four proactive media stories in February, including three media pitches and one media advisory. We received 10 reactive media requests.

The following metrics highlight total media activity:

#### **February 2024**

Total news media mentions (media exposure): 121

- Positive: 99 (82%)
- Neutral: 22 (18%)
- Negative: 0 (0%)

**Total potential reach** (number of people who saw LHSC mentioned in the news): 65M

**Earned media value** (how much LHSC would have to spend on ad placement to achieve this type of coverage): \$597,000

**Key phrases and trending key words** most frequently associated with LHSC in media hits between February 1-29 included: *patients, funding*

Top stories by reach in February included:

- [Volunteers sew fidget aprons for seniors | CTV News](#)
- [London, Ont. sonographer shares experience serving remote, Arctic community - London | Globalnews.ca](#)
- [Male breast cancer: A survivor works to remove the 'shame and stigma' | Global National](#)
- [London Health Sciences Centre hosts first Indigenous career fair - London | Globalnews.ca](#)
- [In the shower one day he felt a lump in his breast | Toronto Star](#)

## Impact on LHSC

Effective storytelling, media relations and earned media assists in successfully telling LHSC stories, building trust with the communities we serve and enhancing LHSC's reputation locally, regionally and nationally.

A steady cadence of proactive media stories in February, including national and provincial coverage of our male breast cancer story, resulted in positive media coverage.

We also continue to see that LHSC is leading the way in becoming its own news outlet. This month [Global News](#) embedded LHSC's YouTube video sharing [Brian's breast cancer story](#) in their report on the Global National website.

## Social media

The Communications and Public Engagement team posted 28 pieces of content across LHSC's social media platforms this month (Facebook, Instagram, LinkedIn, X). Content included a combination of patient stories, staff stories, recruitment initiatives and hospital news, all of which garnered positive sentiment and engagement for the month of February.

### **February 2024**

**Total social media followers (across all platforms):** 67,973 (+947 new followers, +1.4%)

*\*Number of stakeholders/members of the public that see and have the potential to engage with LHSC's stories on a regular basis.*

**Total social media impressions:** 291,551

*\*Number of times posts across all LHSC social media platforms appeared on someone's screen*

**Total social media engagements:** 10,680

*\*Number of people who liked, commented or shared LHSC's content/stories on social media*

### **Top social media posts by engagement in February included:**

- [Babies born at LHSC in 2023 | Instagram](#)
- [NICU team welcoming triplets | Re-share CHF post on Facebook](#)
- [Black History Month feature: Hilreth Jackson | Instagram](#)
- [Mayor Josh Morgan and Deputy Mayor Shawn Lewis visit | LinkedIn](#)

## Impact on LHSC

To celebrate the [6,069 babies born at LHSC 2023](#), a video was created and shared across all social media platforms to thank patients for placing their trust in our staff members. The community responded positively to this content and quickly became our highest-engaged post in the last 12 months and our second most-watched reel of all time. This positive engagement demonstrates the strength of our human-interest stories, especially the ones where community members can easily relate and share their own positive patient experiences.

Audience preference for our human-interest stories was also proven with strong engagement on a post we re-shared from Children’s Health Foundation. [The post highlighted several NICU team members](#) who were getting ready to welcome premature triplets. Many comments were left from parents sharing gratitude and reflecting on their own positive patient experiences with LHSC's NICU team. In addition, this post continues to demonstrate that re-sharing content from partner agencies is a meaningful and effective way to promote collaboration and ensure stories are seen by a wider audience.

February was Black History Month and the Communications and Public Engagement team collaborated with the Office of Inclusion and Social Accountability to share a series of videos that featured four different staff members, speaking about their experience as a Black health care worker. [Hilreth Jackson’s video](#) – the first in the series – saw high engagement across all platforms. Users appreciated Hilreth’s candor and how she spoke on her personal experiences of enduring discrimination, racism and bias throughout her career.

[Mayor Josh Morgan and Deputy Mayor Shawn Lewis](#) toured Victoria Hospital on February 7. The post was well received by audiences, specifically on LinkedIn, as this network was encouraged by the collaboration between hospital and city partners. Audiences appreciated learning more about the vital role that LHSC plays in the community’s health care landscape and how City of London leaders play a role in this important collaboration.

## Working together to improve ambulance offload times

Over the last three months, we have achieved a [reduction in ambulance offload times](#) across both of our adult Emergency Departments by nearly 70 per cent compared to the same period last year. At University Hospital, we have seen a 71 per cent decrease, while at Victoria Hospital, we have achieved a 67 per cent reduction. Through this work and other capacity management strategies, we have moved from 67th to 3rd for best emergency department wait times in the province at Victoria Hospital, and from 68th to 22nd at University Hospital (as of January 2024). This news was shared proactively with our media partners, resulting in positive local and national coverage through [The London Free Press](#), [Global News \(National\)](#), [CBC News](#), [CTV News](#), and [London News Today \(Blackburn News\)](#).



### Impact on LHSC

The progress we are seeing reflects the dedication and hard work put in by every member of Team LHSC and demonstrates progress against our strategic plan. Specifically, these results support our strategic priority of advancing excellence through continuous improvement and have a direct impact on ensuring those in our community receive emergency care when they need it.

## Changing the lives of homeless Londoners

Six months ago, LHSC and London Cares jointly opened 25 highly supportive housing units at 362 Dundas Street. Early results are showing that residents have [already experienced inspiring outcomes](#), including fewer visits to the emergency department, fewer overdoses, decreasing time in the survival sex trade, and more connection to family members and wrap-around supports. These results were shared through a story with The London Free Press and are a testament to what can be accomplished by working together with our community partners to change how we deliver care to marginalized Londoners.

### Impact on LHSC

Through the priorities outlined in our Strategic Plan, LHSC is committed to partnering in new ways to deliver care that will meet the diverse needs of the community while also providing access to critical health resources. This initiative also advances London's Health and Homelessness Whole of Community System Response.

## LHSC ultrasound technologist supports patients 4,000 km away from home

Dani Jackson, an ultrasound technologist at LHSC, took the opportunity to [provide care for patients in the Beaufort Delta region](#) of Northwest Territories, a remote area situated 4,000 km away from London within the Arctic Circle. This opportunity allowed her to enhance her skills and expertise and provided valuable insights into the unique challenges of serving remote communities. Through the partnership between LHSC and Inuvik Regional Hospital, Dani spent three weeks conducting ultrasounds for pregnant individuals as well as those dealing with abdominal pain, pelvic pain and breast cancer. Review coverage by [Global News](#), [The London Free Press](#) and [CBC News \(London Morning with Andrew Brown\)](#).

### Impact on LHSC

Through partnerships like the one between LHSC and Inuvik Regional Hospital, new avenues for collaboration are emerging. These partnerships pave the way for shared learning, cross-cultural exchange, and the development of new approaches to health care delivery and access, especially for marginalized populations in remote areas.

## LHSC patient raises awareness for male breast cancer

Brian Lynch, an LHSC patient is [creating awareness about male breast cancer](#) by sharing his personal journey. It's the most diagnosed cancer in women and it can also affect men. Brian started advocating for more education, awareness and support for men diagnosed with breast cancer. In October 2021, Brian started the Bottoni Project, named after his surgeon and project partner, Dr. David Bottoni. Together, they created an annual charity motorcycle ride called the Bottoni Ride to raise money for the campaign. This story was shared with media and covered by [Global News \(National\)](#), [The Toronto Star](#), and [CTV News](#).



### Impact on LHSC

This story showcases LHSC's commitment to patient-driven initiatives. Garnering widespread media coverage further amplifies our reputation as a leader in patient-centered care and community engagement.



## External landscape

### Canada’s deputy health ministers to consider plan to increase organ donations

Canada’s deputy health ministers are advancing efforts to improve organ donation and transplantation, including the development of a national reporting system expected to be operational by the end of the year. This system aims to address a lack of national data, optimize organ allocation, and coordinate efforts across provinces and territories to enhance transplant rates. With standardized data collection, the goal is to identify missed donation opportunities and improve equitable access to potentially life-saving treatments.

#### Impact on LHSC

LHSC is home to the Multi-Organ Transplant Program at University Hospital. The implementation of a national reporting system would improve organ allocation, increasing transplant rates and facilitating more equitable access to life-saving treatments for patients in need.

### Ontario physicians respond to forecast on family physician shortage

The Ontario Medical Association (OMA) has [raised concerns](#) about the growing shortage of family physicians in Ontario, a problem expected to worsen in the next two years. [The Ontario College of Physicians’ latest forecast](#) reveals that 2.3 million Ontarians currently lack a family physician, with projections indicating this number could double to 4.4 million by 2026.

The Ontario Medical Association (OMA) attributes the shortage to various factors including demographic changes and an increasing volume of patients and paperwork, leading to burnout among physicians. Suggestions for addressing the crisis include immediate funding, creating more family health teams, and long-term planning to address the shortage.

#### Impact on LHSC

Primary care partnerships are critical to our work at LHSC. As we advance integrated care and Ontario Health Teams, addressing the shortage of primary care providers will be a collective effort from across the health system.

## **Proposed regulatory amendments under the *Fixing Long-Term Care Act, 2021***

Ontario's Ministry of Long-Term Care has [proposed amendments](#) to Regulation 246/22 under the *Fixing Long-Term Care Act, 2021*, focusing on staffing, pandemic recovery, and technical clarifications. Some of these proposed amendments include:

- Revising staffing qualifications;
- Allowing nursing students to work as externs;
- Enabling Registered Practical Nurses to conduct Resident Assessment Instrument-Minimum Data Set assessments;
- Broadening provisions for pandemic management;
- Involving Residents' and Family Councils in visitor policy reviews; and
- Making technical amendments for administrative efficiencies.

The proposed changes aim to improve care quality and streamline processes, with most amendments anticipated to take effect from July 1, 2024.

### **Impact on LHSC**

LHSC closely collaborates with local long-term care homes to ensure seamless patient transitions tailored to individual needs, resulting in improved outcomes, reduced readmissions, and enhanced community health-care quality. We will continue to advance our partnerships with long-term care as these amendments are implemented.

## **Modernization of mark-up payment framework under Ontario Drug Benefit Program**

The Ministry of Health is [proposing amendments](#) to Ontario Regulation 201/96 to modernize the mark-up payment framework under the Ontario Drug Benefit Program. These changes introduce a multi-tiered mark-up structure based on drug costs to ensure program sustainability, primarily affecting hospital-affiliated outpatient pharmacies processing higher-cost claims.

### **Impact on LHSC**

The impact on hospitals will be minimal to neutral, primarily affecting hospital-affiliated outpatient pharmacies that process higher-cost claims. The changes are designed to balance the fiscal dynamics within the pharmaceutical sector, particularly considering the rising number of high-cost drugs.

## Provincial government proposes designation requirements for Ontario Health Teams

On February 23, 2024, the provincial government posted a regulatory proposal which sets out the proposed requirements that must be met to be eligible for Ontario Health Team designation. Pursuant to the *Connecting Care Act, 2019* (CCA), Ontario Health Teams must be designated in order for an Ontario Health Team to be eligible to receive health and non-health service funding from Ontario Health to provide integrated services and to enter into an accountability agreement with Ontario Health. There are currently 58 “approved” Ontario Health Teams. These Ontario Health Teams have not been designated but have been given approval to use the term “Ontario Health Team (OHT)” while they work towards potential designation.

### Impact on LHSC

LHSC is a partner in the Middlesex London Ontario Health Team. We will work with our partners and Ontario Health as these changes are implemented.

## Health Report Manager Task Force: Recommendations

OntarioMD established a [Health Report Manager \(HRM\) Experience Improvement Task Force](#) to examine the issue of administrative burden, which contributes to burnout among family physicians, and is cited as being a top concern leading clinicians to leave practice. The Task Force released a set of recommendations to sending facilities, primarily hospitals, that would help reduce the excess time and effort spent on clerical tasks by family doctors.

The Task Force’s recommendations are currently being piloted at some hospitals and will inform the impact of the adopted standards. However, hospitals may begin assessing their current alignment to the [HRM sending facilities standards](#) and seek opportunities to implement the priority service standards.

### Impact on LHSC

The Task Force’s recommendations and the potential adoption of HRM sending facilities standards could streamline administrative processes, improve physician satisfaction, and enhance the delivery of health care services within hospitals across the province, including LHSC.

## **Provincial government and Ontario Medical Association reach compensation agreement**

On March 1, 2024, the Government of Ontario and the Ontario Medical Association (OMA) announced that they reached an agreement on the implementation of the final year of the current physician services agreement (PSA). As part of this agreement, Ontario doctors will receive a 2.8 per cent compensation increase in 2023-24 for services provided as part of the publicly funded health care system. The province and the Ontario Medical Association (OMA) have also reached an agreement that will see an expedited arbitration of the first year of the next physician services agreement, which will provide clarity for physicians in 2024-25.

### **Impact on LHSC**

LHSC's physicians are critical members of our team. This agreement between the Government of Ontario and the Ontario Medical Association provides updated provincial compensation for these team members.