



Supervisor, Corporate Nursing Executive (CNE) and Chair, Medical Advisory Committee (MAC) Report

March 2026

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Strategic and Operational Priorities

February Community Update Meeting

On February 18, 2026, London Health Sciences Centre (LHSC) hosted its monthly Community Update Meeting. The meeting provided updates on various topics including the Women's Minor Procedure Room, Gender Pathways Services, the difference between urgent care and Emergency Department visits, an overview of Nursing Practice Excellence and Innovation, and more. A recording of the February meeting, along with previous Community Update Meetings, is available on the LHSC [website](#).

Organizational Updates

First unrelated donor stem cell transplant at LHSC

LHSC has successfully performed its first unrelated donor stem cell transplant through the Blood and Marrow Transplant Program at the Verspeeten Family Cancer Centre, marking an important milestone for cancer care in the region. The first recipient, Jaci Van Altena, was diagnosed with acute lymphoblastic leukemia while living abroad and returned to Canada for treatment when other therapies were unsuccessful. The team searched international registries containing more than 40 million potential donors to identify a compatible unrelated donor. Van Altena is recovering well and continues to receive follow-up care at LHSC. To read more, [visit the LHSC website](#).

LHSC wins Canadian Blood Services Hospital Challenge for the second consecutive year

[LHSC has won the 2025 Canadian Blood Services Hospital Challenge](#) for the second consecutive year, recognizing the organization for having the highest number of blood donations per capita among participating Ontario hospitals. Between August and October 2025, staff, physicians, learners, volunteers, and community members donated 121 units of blood on behalf of LHSC

through the Canadian Blood Services Partners for Life program, representing a four per cent increase from the previous year. The annual challenge highlights the critical role blood donations play in everyday medical care, including surgeries, cancer treatments and managing chronic diseases, while helping maintain a stable supply for patients who depend on these lifesaving products.

Media and Storytelling

Media coverage and metrics

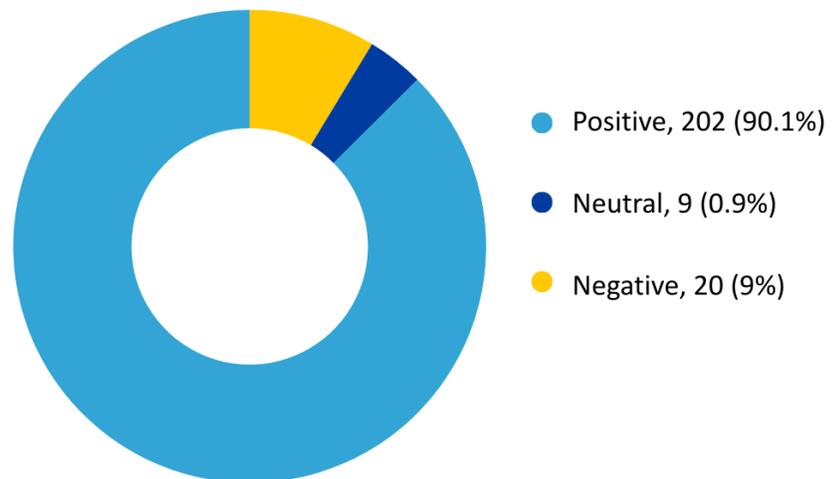
The following highlight metrics from LHSC's January media exposure.

Total news media mentions (media exposure): 224

- Positive – 202 (90.1%)
- Neutral – 2 (0.9%)
- Negative – 20 (9%)

Total Audience Reach (number of people who saw LHSC mentioned in the news): Approximately 151.3 million

Earned media average (how much LHSC would have to spend on ad placement to achieve this type of coverage): Approximately \$609,801



Top Stories by Reach:

- 19.2 million reached:
 - [Why Suishanie Brooks has taken on the role of Black navigator at LHSC](#) - CBC London
- 19.2 million reached:
 - [Former LHSC employee charged with sexual assault at London hospital](#) - CBC London
- 8.7 million reached:
 - [‘I never once doubted that I was going to get past this’: Blood cancer patients welcome new stem cell treatment option at LHSC](#) – CTV London

- 8.7 million reached:
 - [Police appeal for other victims to come forward after personal support worker charged with sexual assault](#) – CTV London
- 8.7 million reached:
 - [How gut bacteria could make cancer immunotherapy more effective](#) – CTV Montreal

Coverage Analysis:

The Communications and Public Engagement team facilitated three proactive stories, including a feature on [LHSC's Black Health Navigator program and](#) a story about [LHSC's expanded stem cell transplant program to unrelated donors and recipients](#), which was covered by CTV London and Rogers TV London. Last month's story about [fecal microbiota transplant clinical trials](#) by researchers at London Health Sciences Centre Research Institute (LHSCRI), Lawson Research Institute of St. Joseph's Health Care London, and Centre de recherche du Centre hospitalier de l'Université de Montréal (CRCHUM) also continued to receive coverage. The team responded to 14 reactive inquiries during the month of February, including requests for comment relating to a sexual assault investigation involving a former LHSC employee.

Social media

The Communications and Public Engagement team posted 19 pieces of content across LHSC's social media platforms in February. The content featured staff and patient stories as well as hospital initiatives.

Total social media followers (across all platforms): 95,071 (+676 new followers, +0.72%)

*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: 437,862

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

Total social media engagements: 16,353

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

Top social media posts by engagement included:

1. A patient story about the first stem cell transplant from an unrelated donor at LHSC | [Facebook](#), [Instagram](#)
2. Q&A with Dr. Tatiana Jevremovic about her experience supporting Canada's figure skating at the Winter Olympics | [Facebook](#), [Instagram](#), [LinkedIn](#)
3. A group photo celebrating LHSC winning the Canadian Blood Services Hospital Challenge | [Facebook](#), [Instagram](#), [LinkedIn](#)

Social media analysis

February's social media activity reflected a strong audience connection to personal stories from patients and staff, as well as the impact of cancer care at LHSC. Our top-performing post featured Jaci VanAltena's cancer journey and her experience receiving the first stem cell transplant from an unrelated donor at LHSC. The story resonated with thousands on Facebook and Instagram, reaching more than 50,000 people and prompting many to share congratulatory messages and words of support in the comments.

Followers also enjoyed a behind-the-scenes Q&A with Dr. Tatiana Jevremovic, a primary care sport and exercise medicine physician at LHSC and Western University's Fowler Kennedy Sport Medicine Clinic, who shared her experience supporting Canada's figure skating team at the Winter Olympics as Chief Medical Advisor for Skate Canada. Content on London Health Sciences Centre Research Institute continues to see positive engagement and growth. We are currently sitting at 4,654 followers across all platforms and have generated over 18,000 impressions in February.

LHSCRI research is helping shape our understanding of cancer

To mark the International Day of Women and Girls in Science, London Health Sciences Centre Research Institute (LHSCRI) [highlighted postdoctoral associate Frederikke Larsen](#), whose research is advancing understanding of how normal gut cells transform into cancer cells. Originally from Denmark, Larsen now studies gut stem cells, inflammation and the biological pathways that can lead to colorectal cancer. Her work focuses on uncovering the mechanisms that cause healthy cells to become cancerous, a foundational step that could help inform future treatments.

From London to Milan: Dr. Tatiana Jevremovic's time at the 2026 Winter Olympic Games

Dr. Tatiana Jevremovic, a primary care sport and exercise medicine physician at LHSC and Western University's Fowler Kennedy Sport Medicine Clinic, [recently supported Team Canada's figure skating team at the 2026 Winter Olympic Games](#) in Milano Cortina. Serving as Chief Medical Advisor for Skate Canada, she provided on-site medical care, injury management, and performance support to help athletes stay healthy and competition-ready throughout the Games. Her role involved attending practices and competitions, monitoring athlete health, and collaborating with a broader medical team to ensure skaters had the resources needed to perform at their best.

‘Junk DNA’ could hold clues to how colorectal cancer arises, study suggests

A new study from researchers at LHSCRI and Western University suggests that so-called “junk DNA,” or sections of the genome that do not code for proteins, may play an important role in how colorectal cancer develops. The research found that these non-coding DNA regions can influence how genes linked to cancer are regulated, potentially contributing to the early biological changes that allow cancer cells to form and grow. By examining patterns in these overlooked parts of the genome, the team uncovered new clues about the mechanisms driving colorectal cancer, offering insights that could eventually support earlier detection and the development of more targeted therapies. Learn more about this important research [on the LHSCRI website](#).

Helping to build a research culture through Western's B.L.U.E. program

Recently, [LHSCRI highlighted Isaac Mpinda](#), a PhD candidate in sociology at Western University whose work is helping expand a culture of research across LHSC. Through Western’s Black Leaders University Experience (B.L.U.E.) program, Mpinda is completing a placement at LHSCRI where he collaborates with LHSC leaders to develop educational tools and resources to help staff across all professions engage in research and quality improvement initiatives. His work aims to make research more accessible so that more health-care professionals can contribute to innovation and improved patient care.

Dr. Jenny Thain is on a mission to transform hip fracture care and mentor the next generation

As the geriatric lead for the Hip Fracture program at LHSC, Dr. Jenny Thain has helped implement an orthogeriatric model of care to improve outcomes for patients with fragility fractures. Beyond LHSC, Dr. Thain also plays a key provincial leadership role as Ontario Health’s Clinical Lead for Hip Fracture, where she supports the implementation of provincial quality standards and shares best practices to strengthen care across the health system. Alongside her clinical and system leadership work, she is deeply committed to education and mentorship, helping train residents and fellows who will continue advancing bone health and fracture care in the future. Learn more about Dr. Jenny Thain [on the LHSC website](#).

Transforming care for patients with rare diseases

For International Women’s Day, LHSCRI [celebrated the work of Dr. Tugce Balci](#), Associate Scientist at LHSCRI and Geneticist at LHSC, whose research is advancing genetic discovery for children with rare diseases. Her work focuses on identifying new genetic diagnoses, particularly in epilepsy, to help improve access to targeted life-changing care for patients.

External Landscape

Strengthening how care teams share information

Recently, the federal government introduced new legislation to improve how health information is shared across Canada. The goal is to allow health-care teams to safely access the right patient information at the right time. For nurses and PSWs, better-connected systems support safer care, smoother transitions between services, and clearer communication across hospital and community settings. Secure digital tools also reduce paperwork and support team-based care across medicine, emergency services, critical care, and neurological programs. [Learn more on the Government of Canada website.](#)

Expanding the nursing workforce in primary care

The [Ontario government announced](#) a \$30 million investment to expand the primary care workforce. This funding includes upskilling over 1,400 registered nurses, adding new nurse practitioner education seats, and increasing training for physician assistants. This investment supports stronger connections between hospitals and community care. When primary care teams grow, hospitals can focus more closely on acute and complex needs. Expanded nursing roles in the community also help improve access, continuity of care, and patient flow across the system.

Ontario Health implements changes to consent management in the Electronic Health Record

Ontario Health has announced updates to how consent is managed within the provincial Electronic Health Record (EHR), aimed at simplifying how patients control access to their personal health information and how providers manage consent directives. Beginning February 13, 2026, patients requesting restrictions on their health information will have two options:

blocking access to all records within a specific EHR repository or applying a global restriction across all current and future repositories. Existing consent directives will be updated to align with this new model by April 30, 2026. The changes also clarify when health-care providers may override a consent directive, such as with a patient's express consent or in situations involving a significant risk of serious harm. Ontario Health says the updated model is intended to strengthen privacy protections while creating a more consistent and manageable consent process across the health system.