Pathology and Laboratory Medicine launched its new internal and external websites on December 19, 2016. The improvements to the websites were based on feedback from focus group sessions with staff, physicians and external clients. The internal site is designed around quick and obvious navigation to key high-use clinical information (e.g. specimen handling requirements, transfusion manual), whereas the external site is designed around capturing new clients into our high-value lines of business (e.g. molecular/genetics diagnostics, trace elements). Branding has been refreshed and the site is a much stronger reflection of the service excellence and superior diagnostic products it is known for.

COMMUNITY HEALTH COLLABORATIVE
In the month of December 2016, the Community Health Collaborative (consisting of key stakeholders in healthcare in London) created a request for support document to be used to solicit potential funders for the creation of a platform for health system innovation. The potential platform will make available relevant health information, including information on the social determinants of health. The platform will seek to integrate and support current work across London & Middlesex and will incorporate a variety of communications channels. As a foundation, the creation of a website will commence to enable the sharing of relevant health information and storytelling.

Regional Stroke Phase 2 Update: The draft directional recommendations were presented to two South West LHIN Committees – one with a clinical mandate (Clinical Quality Table) and one with a financial/funding/QBP implementation mandate (Health System Funding Reform Local Partnership Committee) on December 8th, 2016 and both presentations were well received. High level implementation planning was performed with project teams.

ANNUAL FORUM ON QUALITY IMPROVEMENT IN HEALTHCARE- DECEMBER 2016
Five staff members represented London Health Sciences Centre at the 28th Annual Forum on Quality Improvement in Healthcare, December 4-7, 2016. Those highlighting their Teams’ quality improvement initiatives with Storyboards were: Eamonn Cullen (Portering), Lisa Hawthornthwaite (Patient Experience), Nancy Howes (Physiotherapy), Sara Folias (Southwestern Regional Cancer Care Program), and Nancy Woodcock (Clinical Nutrition).

Highlights from their work included:
- Engagement of Portering staff in infection control, patient experience and access and flow with a by-product of increasing team morale;
- Development of an on-line, supervised physiotherapy program to prepare patients for transplantation, who do not have access to these specialized services in their communities;
• Creation of a regional approach to GI endoscopy services by measuring and improving patient safety, quality, and access to care to ensure availability and sustainability throughout the region;
• Use of patient and family stories at orientation, clinical and service staff sessions, leadership development and corporate meetings to illustrate and discuss patient and family-centred care and the role that everyone plays in creating an optimal patient and family experience;
• Feedback from patients undergoing dialysis, on the effectiveness of a resource provided to them every three months about their lab values.

**LHSC CODE OF CONDUCT**

Guided by the Ontario Human Rights Code and hospital policies pertaining to harassment and discrimination in the workplace, LHSC embraces its legal and ethical responsibility to ensure a collegial and harassment-free workplace and to take action where such behaviour occurs and has developed a Code of Conduct to ensure full compliance.

The purpose of this Code of Conduct is to explain the expected behaviour for everyone who works, studies or volunteers at LHSC. This includes members of the Professional Staff (physicians, dentists and midwives who hold privileges to practice within London’s hospitals), who by virtue of their profession hold a position of authority and, as such, need to recognize this in their interactions.

Upon appointment to the Professional Staff at LHSC, a practitioner enters into a common goal with all team members to maintain the highest quality of patient care and professional conduct. Interactions with all patients, visitors, employees, students, volunteers and colleagues shall be conducted with courtesy, respect and dignity.

This code is also intended to provide direction to address behaviours that do not meet the standards expected at LHSC. The Code of Conduct is not intended to interfere in any way with the discharge of obligations defined in professional codes and regulations. Everyone who works, studies or volunteers at the hospital is expected to support a culture that recognizes the Vision, Mission and Shared Values of LHSC, and to promote a caring environment for patients and one another.

All are expected to refrain from conduct that may reasonably be considered offensive by others or disruptive to the workplace or patient care. Offensive conduct may be written, verbal or behavioural.

Examples of inappropriate conduct include:
- abusive language directed at any individual or group,
- degrading or demeaning comments,
- conduct that would reasonably be considered threatening, expressed or implied,
- inappropriate use of social media such as Twitter and Facebook, or
- creating, sending or storing e-mail that could be considered to be offensive or of a malicious and/or threatening nature.
NOTIFYING OPEN HEART SURGERY PATIENTS OF EXTREMELY LOW RISK OF INFECTION

On January 10, 2017, LHSC notified approximately 2,200 former open heart surgery adult patients of the extremely low risk of infection related to potential exposure to bacteria during their procedure.

Heater-cooler units used in open heart surgery have been linked to a Mycobacterium chimaera infection according to safety alerts issued to hospitals across North America by Health Canada and Public Health Ontario and the Federal Drug Administration (FDA) and Centers for Disease Control (CDC) in the United States.

The risk to patients acquiring this infection is less than one per cent and no LHSC patients have developed a Mycobacterium chimaera infection post open heart surgery.

Patients have received a letter in the mail outlining the signs and symptoms to monitor, and letting them know who to contact should they have any questions or concerns. In addition, an information line has been setup at 1-844-358-1050 and a patient information page has been established on our website.

We are monitoring the situation very closely and will continue to follow Health Canada’s guidance and direction related to the use of heater-cooler units.

EXEMPLARY COMMUNITY PARTNERSHIPS

CHILDREN’S HEALTH FOUNDATION (CHF) PRESIDENT & CEO SEARCH:
The search is well underway and CHF is hopeful a new President and CEO will be in place at the Foundation before the start of the next fiscal year. Communication between the recruiter and our health care partner leads – Jackie Schleifer Taylor for Children’s Hospital, Victor Han for CHRI and John LaPorta for Thames Valley Children Centre have helped provide valued feedback to support the search committee in their selection process.

LOW CANCER SCREENING RATES IN ELGIN COUNTY- ST. THOMAS REGION
On Thursday, December 1, Dr. Jan Owen, Regional Primary Care Lead at the South West Regional Cancer Program, together with Debbie Bullas-Rubini, Public Health Nurse at the Elgin St. Thomas Public Health Unit, hosted a lunch & learn presentation to staff at the East Elgin Family Health Team in Aylmer. The purpose of the meeting was to better understand the unique challenges/barriers that are contributing to the low cancer screening rates in that area of the region. The meeting was attended by approximately 15 staff, including physicians, nurses and frontline administration. The meeting was informative, and provided an overview of some of the challenges in reaching the Amish/Mennonite communities. Concepts and ideas gained from this process will be incorporated into work plans for 2017/18.
ONTARIO CANCER SCREENING PERFORMANCE REPORT:
In early December, Cancer Care Ontario released the Ontario Cancer Screening Performance Report, which highlights the strengths and future directions of Ontario’s cancer screening programs. The report has a special focus on screening participation and retention, as well as a feature on Ontarians who are overdue for screening.

Unlike previous program reports, which focused on individual screening programs, this report presents data for the Ontario Breast Screening Program, Ontario Cervical Screening Program and ColonCancerCheck. The report also presents LHIN-level data on key performance indicators. View the report, and key findings: [www.cancercare.on.ca/cancerscreeningreport](http://www.cancercare.on.ca/cancerscreeningreport).

TWO NEW ONTARIO BREAST SCREENING PROGRAM (OBSP) SITES IN THE SOUTH WEST:
On December 6, Hanover & District Hospital and South Bruce Grey Health Centre’s Kincardine Site became affiliated with the OBSP. This work is part of the Quality Management Partnership (QMP), collaboration between Cancer Care Ontario and the College of Physicians and Surgeons of Ontario. The QMP was developed to support physicians and facilities to enhance the quality of care and improve patient safety, increase the consistency in the quality of care provided across facilities, and improve public confidence by increasing accountability and transparency. As part of the QMP in Ontario, all screening and diagnostic mammography sites in the province are required to participate in the OBSP. This step will ensure that all mammography facilities in Ontario attain the same quality standards. Kincardine and Hanover are the final two sites in the South West to become affiliated with the OBSP.

LHSC IN THE NEWS
MEDIA MONITORING REPORT: NOVEMBER 15 – JANUARY 14, 2016

SUMMARY
- 3 media release and 3 media advisory was issued
- 30 stories were posted on the public website
- 107 media stories referenced LHSC and our partners (78 positive, 28 neutral, 1 negative)

HIGHLIGHTS

1. **Media release for President's Awards**
   A media release was sent to local media on December 8 announcing the recipients of the 2016 President’s Awards and details of the reception.

2. **New drug for children with spinal muscular atrophy**
   A newly developed drug has great potential to help children with spinal muscular atrophy. Dr. Craig Campbell was interviewed by CTV about the positive treatment results we are seeing with this new drug.

3. **Blood infections rare but dangerous**
   After the death of a young girl in Yellowknife, CBC ran a story about blood infections. Dr.
Michael Silverman was quoted explaining the difficulties of treating these rare, but dangerous infections.

4. LHSC among 18 hospitals receiving funding
   At a press conference at LHSC, London North Centre MPP, Deb Matthews, announced that LHSC was among eighteen Ontario hospitals receiving additional funding from the government to help improve access and wait times. Positive coverage from AM980.

5. LHSC welcomes New Year’s baby
   The first baby born in London in 2017 was a baby girl born at LHSC to Rachel Nanton and Jeff High at 3:10 a.m. Positive coverage from London Free Press, CTV News, Bell Radio and Blackburn Radio.

6. LHSC notifying open heart surgery patients of extremely low risk of infection
   LHSC notified approximately 2,200 former open heart surgery adult patients of the extremely low risk of infection related to potential exposure to bacteria during their procedure. Neutral coverage from London Free Press, CTV News, CBC Radio and 1290 CJBK.

Respectfully Submitted,

Murray Glendining,
President and CEO

Our Mission
An academic hospital, committed to improving health and delivering value for citizens of London, the South West Region and beyond. Building on our tradition of leadership, stewardship and partnership, we champion patient-centred care, with a spirit of inquiry and discovery, and a commitment to life-long learning.