

**PRESIDENT AND CEO
REPORT TO THE BOARD AND COMMUNITY
FEBRUARY 2017**

PERFORMANCE EXCELLENCE/CONTINUOUS IMPROVEMENT

ONTARIO FERTILITY PROGRAM

The Ontario Ministry of Health and Long Term Care initiated funding for a new Fertility Program in December 2015, in order to help eligible Ontarians of any sex, gender, sexual orientation or family status who suffer from infertility to build their families. London Health Sciences Centre's Fertility Clinic received additional funding as a result of this program to assist us to serve a greater volume of fertility patients. In November 2016 the MOHLTC reviewed the ability of each of the funded centres to achieve the annual volumes by March 31, 2017, and as a result, redirected unspent funds to those centres that are deemed capable of performing additional fertility treatment cycles. Through this process, the London Health Sciences Centre Fertility Program's funding Agreement for 2016 - 2017 was amended to add \$430,500 to support 50 additional funded In Vitro Fertilization (IVF) cycles. This incremental funding will reduce the wait time for families who are waiting for fertility treatments in London and the region.

C17 COUNCIL CHILDREN'S CANCERS AND BLOOD DISORDERS

A longstanding challenge in conducting childhood research has been the wide range of unique cancers, many of which occur infrequently, meaning that statistically significant research and often not be conducted within even the largest cancer centres due to the low patient volumes to study. This reality led to the development of collaborative research networks in North America within which the group works today on behalf of children with cancer. Internationally Childrens Hospital LHSC is a member of the Children's Oncology Group, which is the largest pediatric cancer research group in the world bringing together expertise in both clinical and research spheres.

In Canada, facing the challenge of geography and wishing to connect together Canadians working in the field of pediatric hematology oncology, the C17 organization was formed to recognize and expand the opportunities for progress by developing a strong collaboration between the 17 academic childhood cancer centres in Canada. The focus of C17 covers all of the domains of academic health care – research, education and guideline development. This organization has evolved over time and has recently become part of “Sosido community” which is an online knowledge sharing platform. Sosido bridges the silos of center, discipline and specialty to allow sharing of published research and practical clinical experience allowing access for all healthcare professionals to be more connected, raise their profiles and stay on top of the latest research.

The C17 Council is an organization that is led by the institutionally appointed heads of the seventeen pediatric hematology, oncology, and stem cell transplant programs across Canada.

They represent the interests of children and adolescents with cancer and blood disorders and act as an authoritative Canadian voice. The C17 Council has a strong record of accomplishment and has developed a clear strategy for continuing its mission to improve health outcomes and quality of life for children and adolescents in Canada with cancer and blood disorders. This has enabled the development of online educational resources, the collaboration for development of clinical guidelines, and has provided the administrative oversight and support for clinical trials for childhood cancer in Canada.

Representing LHSC's Children's Hospital and the division of Paediatric Haematology-Oncology on the C17 Council is Dr. Lawrence Jardin. Recently, the Children's Hospital Division of Paediatric Haematology-Oncology has been named as a Phase I site by the C17 Council. There are very few of these sites in Canada and this is a tribute to our haematologist-oncologists and to their very talented team. This will enable state-of-the-art research and clinical care to occur in London providing for care as close to home as safely possible. This endeavor is led by Dr. Alexander Zorzi, a Western University – Schulich Medicine alumnus.

PORTERING DEPARTMENT

They're the friendly faces you see in the halls every day. They're the caring men and women who are the eyes, ears and feet on the ground at LHSC. They're porters and they provide a vital service. Responsible for ensuring that a vast variety of people and items travel from point A to point B in a safe and timely fashion, porters transport precious cargo across both hospital sites and throughout all clinical areas at LHSC.

There are 127 porters and 11 dispatchers between University and Victoria Hospital. Porters transport patients, stretchers, wheelchairs, beds, carts, specimens, linens, charts, samples, medications and other miscellaneous supplies. When portering dispatch receives a request for service, the call is entered into a computer system, which then pages the next available porter. Though speed of service is highly important, priority is always given to the needs of people and patients before equipment.

Just to share the scope of work the sites completed the following over the last quarter (September 1, 2016 to December 31, 2016).

UH Porters completed 71478 transports at an average of 12.6 minutes response time.

VH Porters completed 80533 transports at an average of 18.6 minutes response time.

In an interview with the Manager of Portering, Victoria Hospital Suzanne Schwab indicated that the number one shared value in the department is showing kindness and compassion. "The type of care that porters provide is linked to their ability to interact with patients on a personal level as they facilitate their transfer around the hospital."

Often, what makes the difference for someone is to know that they are heard and cared for. Porters operate at a high level of self-awareness and are empathetic and compassionate. They make a very real difference in the patient experience at LHSC."

<https://youtu.be/VUDicvKI6PI>

LHSC STAFF AND PHYSICIAN FEEDBACK SURVEY

The Excellent Care for All Act (ECFAA) requires health care organizations to conduct surveys of employees and other service providers every two years. The surveys must measure satisfaction with their experience, as well as perceptions about the quality of care provided by the organization.

LHSC viewed this year's survey as particularly important, as it continues to focus on enhancing communication and engagement and building further on continuous quality improvement. All leaders encouraged staff and physicians to voice their opinions through the survey and noted our organization's commitment respond to the feedback received in order to improve communication, develop a positive work culture, enhance patient care and other work, etc.

This hospital-wide effort resulted in a response rate of 62% - a notable increase from prior surveys. All staff and physicians are commended for taking the time to share their feedback and opinions which will provide a wealth of information on where our strengths lie, and where there are opportunities for improvement that require action plans to address. The survey results are now being analyzed and will be shared – together with any action plans to address the feedback - with leaders, staff and professional staff in the spring of 2017.

EXEMPLARY COMMUNITY PARTNERSHIPS**COMMUNITY HEALTH COLLABORATIVE (CHC):**

LHSC is a member of the CHC –a collaborative of many partners across the continuum of health, education and social services that impact population health in London and Middlesex. CHC partners believe that, by leveraging our collective strengths, we can better utilize system resources to create positive change for healthier communities.

One area of CHC focus has been the myriad mental health challenges in London and Middlesex. Recently, the CHC's Mental Health & Addictions Working Group organized the MINDS (Mental Health System Incubator for Disruptive Solutions) session held January 16, 2017 with the objective of bringing key stakeholders together to tackle complex mental health and addiction challenges. The MINDS group is composed of regional experts in mental health and addictions. At the session held in January the MINDS group agreed to focus on two complex challenges; i) Transitional Age Youth Mental Health, and ii) Housing. The MINDS group will now develop, implement and test solutions to these two focus areas using a social innovation lab model. The labs will function over a 3 year period, during which the CHC's Mental Health & Addictions Working Group will serve as expert advisors.

HEALTHCARE SYSTEM REGIONAL UPDATES

HEALTH QUALITY ONTARIO (HQO) NEWSLETTERS

Each month, HQO helps to keep the healthcare professionals and members of the public stay informed through a newsletter about how Health Quality Ontario, in partnership with patients, providers, system leaders and organizations, is making our health system healthier. To read the latest news from Health Quality Ontario, their newsletters are available on their website at the following link.

<http://createsend.com/t/i-A4F3F0C5D5343592>

ONTARIO MEDICAL ASSOCIATION

On February 6th, 2017 it was announced that at the recent special meeting of the Council of the Ontario Medical Association (OMA), delegates passed a motion expressing a lack of confidence in the leadership of the OMA Board's Executive Committee. The delegates voted not to remove the individual Executive Committee members from the Board. After careful consideration of the sentiment of the OMA's elected representative body, and discussion with the Board, the Executive Committee determined that it was in the best interest of the OMA for the Executive Committee to resign from their offices and from the Executive Committee, effective immediately. They will remain on the Board of Directors. It was cited that the Directors have a wealth of experience and knowledge that would be a significant loss to the OMA if they were to leave the Board.

The media release further noted that the Executive Committee is making this choice in the hope that this will help unify doctors and advance the interests of the profession at this critical juncture.

DELIVERY OF CARE FRAMEWORK DEVELOP FOR HEAD AND NECK CANCER CARE IN THE REGION UPDATE

The London Health Sciences Centre (LHSC) is a designated site for head and neck cancer, gynecology cancer, thoracic cancer surgery, and HPB cancer surgery. These designations are appointed by Cancer Care Ontario (CCO) according to a set of organizational standards and guidelines for each lead program. Erie St Clair and Waterloo Wellington regions do not have lead programs in these areas and rely on LHSC for service provision. Windsor is a recognized affiliate site with LHSC in the areas of thoracic, gynecology and head and neck cancer. The South West Regional Cancer Program (SWRCP), which oversees the delivery of cancer services across the SouthWest LHIN on behalf of CCO is working to build stronger relationships between the Erie St. Clair and Waterloo Wellington regions and organizations within the South West LHIN. This will ensure a clear understanding and application of guidelines for care, standards and transitions of care, between the regional cancer programs. The development of a framework to guide this work is underway. A joint meeting was held on January 18, 2017 between key leadership representatives from Erie St. Clair Regional Cancer Program, Windsor Regional Hospital, SWRCP, LHSC, Department of Otolaryngology, and the provincial surgical and radiation treatment leads from Cancer Care Ontario. The purpose of this meeting was to garner support for the development of a formal framework for the delivery of Head and Neck Cancer Care, with a view to adopt this framework more broadly in other clinical areas over

time. Support was received to move forward and this framework is currently under development and will be presented back to this leadership group for full endorsement and implementation early in Q1 of 17/18.

LHSC IN THE NEWS

MEDIA MONITORING REPORT: JANUARY 15 –FEBRUARY 14, 2017

SUMMARY

- **1** media release was issued
- **18** stories were posted on the public website
- **58** media stories referenced LHSC and our partners (56 positive, 2 neutral, 0 negative)

HIGHLIGHTS

1. **LHSC first in Ontario to implant Canadian heart valve device**
On November 15, 2016, the cardiac team at LHSC implanted the Neovasc Tiara transcatheter device to correct a leaky mitral valve. Positive coverage from [CTV News](#) and 1069 The X.
2. **London leading in organ donation**
London leads province in organ donations and number of registered organ donors. There were 35 deceased donors at LHSC in 2016, an 84% increase over 2015. Positive coverage from the [London Free Press](#).

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.