

PRESIDENT AND CEO REPORT TO THE BOARD AND COMMUNITY JUNE 2018

DELIVER EXCELLENT CARE EXPERIENCES AND OUTCOMES

EMERGENCY SERVICES

The Emergency Department is leading a Quality Improvement Group which consists of the Central Ambulance Communications Centre and Middlesex London Paramedic Services. This will be a collaborative working group that will strategize on further ambulance offload improvement opportunities. This group will consist of frontline staff and leaders.

QUALITY AND PERFORMANCE

The Quality & Performance team received notification that all three abstracts submitted on behalf of LHSC to Health Quality Ontario for the 2018 Transformation conference have been accepted. The abstracts are:

- What's up doc? How to effectively communicate performance data with physicians
- Healthcare...a risky business? (linking balanced scorecard reporting to a clinical risk profile)
- That's what they said: Maximizing quality improvement confidence through public engagement (summary of our engagement plan for the development of the 2018-19 QIP)

WORKING TOGETHER TO SERVE OTHERS

PATIENT EXPERIENCE AND RELATIONS

- The Children's Hospital Family Advisory Council concluded its formal year of meetings, forging partnerships with Coordinators across every area of Children's and with the Children's Accreditation team. Preliminary review of council feedback suggests very positive results (mostly "strongly agree" to statements about council efficacy) with "the unity, honesty amongst members and motivation of members to initiate change" highlighted as the council's greatest strengths.
- The Child & Youth Advisory Council also concluded its formal year of meetings which resulted in the implementation of new initiatives including Pet Therapy within B6-100, and a "Welcome to Children's Hospital" video which is featured on TV screens across B-Zone and on the internal and external LHSC websites. The Council is excited for the year ahead, and plans to create another video specific to Surgical Care, to influence the beginning of a Youth Peer Support role in the hospital, and to integrate more fully into Children's Hospital leadership. They have been invited to periodically shadow leadership staff and participate in or co-chair quarterly Leadership meetings and these processes are currently in development.
- The Behaviour Safety Alert (BSA) went live on May 1st throughout the organization. The BSA replaces the Violence Indicator and is a response to the provincial Workplace Violence Prevention in Health Care Progress Report and a settlement with the Ontario Labour

Relations Board. The new process includes behavior screening, trigger identification, care planning and placement of visual indicators. Patient and family advisors were involved in the policy working group and in several focus groups. There continues to be deep concern expressed by many providers (nurses, allied health and physicians) about the sensitivity of the tool and the armbanding of patients related to fears of stigmatization. Consultation is ongoing with stakeholders to refine the process.

HEALTHCARE SYSTEM REGIONAL UPDATES

ENGAGEMENT WITH CHIPPEWAS OF THE THAMES FIRST NATION (COTTFN):

On May 2, the Aboriginal team from the South West Regional Cancer Program met with the COTTFN to discuss planning and engagement for fiscal year 2018-2019.

Commitments were made to the following initiatives:

- Reclaiming Your Wellness prevention and screening event for the community to share information about the three organized screening programs (breast, cervical and colorectal), smoking cessation, and Aboriginal Navigator services
- Lunch & Learn Focus on screening and men's wellness
- Palliative Care Indigenous approaches to end of life and palliative care
- Community Updates The South West Regional Cancer Program will provide monthly communiques to the community to raise awareness of prevention and screening

HEALTHY COMMUNITIES CONFERENCE – CREATING PARTNERSHIPS FOR WELLBEING:

On May 8 and 9, Millie Litt, Manager, South West Regional Cancer Program, and Chantel Antone, Aboriginal Patient Navigator, were invited by the Saugeen First Nation and Grey County Public Health Unit to share in learning about Indigenous health equity. The two day workshop focused on cultural safety and humility, local historical context, reconciliation, community development, and root causes of Indigenous health inequities. This conference was supported by Grey Bruce Public Health Unit, SOAHAC, Grey and Bruce County, and the South West LHIN. Approximately 300 people attended.

UNIVERSITY OF TORONTO - BIENNIAL INDIGENOUS HEALTH CONFERENCE:

On May 24 and 25, Chantel Antone, Aboriginal Patient Navigator, attended the 3rd Biennial Indigenous Health Conference: Walking Together. The six main objectives of this interdisciplinary Health conference provided attendees opportunities to:

- Discuss some of the major health issues for Indigenous peoples in Canada and potential solutions to address them.
- Review how historical factors, such as colonization, have had a significant impact on the current health status of Indigenous peoples.
- Understand how Indigenous ways of knowing with respect to health and well-being can be
 utilized in healthcare approaches for Indigenous peoples and to promote Indigenous
 worldview and knowledge with support of the Knowledge Keeper, Healers and Elders.
- Educate health care providers on cultural competency and safety including frank discussions about systemic racism in healthcare for Indigenous peoples.
- Knowledge translation and dissemination of the most up to date health care research relevant to the health of Indigenous peoples and the formulation of ideas for future community-based research.

• Provide a networking opportunity for Indigenous community members, health care professionals, researchers and policymakers. Engage in respectful discussions on building trust to support the development of networks and partnerships.

The outcomes from this conference are being shared with local care teams and will be used to inform future plans and actions aimed to improve LHSC care delivery for and with Indigenous people in the community.

DEPUTY MINISTER DR. BOB BELL RETIREMENT FROM ONTARIO PUBLIC SECTOR

It was announced on Monday, June 18, 2018 that Dr. Robert Bell plans to retire from the Ontario Public Sector once a replacement for the role has been appointed.

Robert Bell was appointed Deputy Minister of Health and Long-Term Care, effective June 2, 2014 bringing over 40 years of health care experience to this role. Prior to this role, he served as President and Chief Executive Officer of University Health Network for nine years. He was previously the Chief Operating Officer at Princess Margaret Hospital and Chair of both Cancer Care Ontario's Clinical Council and the Cancer Quality Council of Ontario.

Dr. Bell received his Doctor of Medicine from McGill University and a Master of Science from the University of Toronto. He also completed a Fellowship in Orthopaedic Oncology at Massachusetts General Hospital and Harvard University. Dr. Bell is a Fellow of the Royal College of Physicians and Surgeons of Canada, the American College of Surgeons and an Honorary Fellow of the Royal College of Surgeons of Edinburgh.

LHSC IN THE NEWS

MEDIA MONITORING REPORT: MAY 11 – JUNE 10, 2018 SUMMARY

- 2 media releases issued
- 15 stories were posted on the public website
- 86 media stories referenced LHSC and our partners (24 positive, 30 neutral and 32 negative)

HIGHLIGHTS

1. LHSC employee charged

An EEG technician at University Hospital was charged by London Police Service. After a media conference was held at LHSC, negative coverage was broadcasted by <u>CBC</u>, <u>CTV</u>, <u>Global News</u>, <u>London Free Press</u>, <u>Blackburn News</u>, and <u>National Post</u>.

2. A gap in resources for mental health care

Challenged by the volume of patients seeking mental health care, patients and staff spoke about the gap in resources available for acute mental health services. Coverage from <u>CTV</u>, <u>CBC</u>, <u>Stratford Beacon Herald</u> and <u>CBC</u> again, was negative.

3. Clinical trial at LHSC focuses on kidney function

A Lawson research study aimed at people with Chronic Kidney Disease (CKD) put

COMPASSION TEAMWORK CURIOSITY ACCOUNTABILITY

patients at LHSC through a randomized clinic trial to determine if drinking more water would slow the decline in kidney function. The study resulted in positive coverage from CTV, Exchange Magazine and Western News.

Respectfully Submitted,

Paul Woods 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.