

**PRESIDENT AND CEO
REPORT TO THE BOARD AND COMMUNITY
APRIL 2019**

DELIVER EXCELLENT CARE EXPERIENCES AND OUTCOMES

INPATIENT MEDICINE PROJECT TO IMPROVE PROLONGED UNNECESSARY CATHETERIZATION

Choosing Wisely Canada's "Lose the Tube" initiative has been launched across Inpatient Medicine at Victoria Hospital (VH.) This patient safety and quality project is intended to assess patients with indwelling urinary catheters on a daily basis using established appropriateness criteria and remove those catheters that are no longer medically necessary in a timely manner. Prolonged catheterization can lead to adverse outcomes for patients, such as catheter-associated urinary tract infections (CAUTI), decreased mobility, increased risk of acute delirium and longer than expected lengths of stay. The goal of the project is to reduce catheter prevalence on all Medicine units by 30%. Baseline prevalence was established at 18%, making the target 13%. Weekly audits indicate 11 consecutive weeks below baseline and an average prevalence of 12%. This new baseline indicates that on a daily basis, approximately four patients being cared for in the Medicine Program at VH no longer have an unnecessary indwelling catheter.

HIP FRACTURE UNIT STUDY TO HELP REDUCE DELIRIUM RATE POSTOPERATIVELY

The new hip fracture unit study is underway in the Ortho Trauma Unit. Four semi-private rooms have been freshly painted with different colours and outfitted with special clocks to help reduce delirium rates postoperatively, which contributes to poor outcomes. The study is the first of its kind in Canada, although previous studies have been completed in the United States and in Europe." These dedicated units allow for coordinated, multidisciplinary care of hip fracture patients. This project aims to test the effect of a dedicated 8 bed hip unit at Victoria Hospital. An estimated 70 hip fracture patients will be enrolled at the dedicated hip unit and compared to 70 patients at University Hospital's standard orthopedic inpatient unit. The primary outcome measure will be average length of stay (ALOS), while secondary outcomes will include rates of delirium, complications, and patient-reported outcomes such as pain, quality of life, and satisfaction.

INJURY PREVENTION DISTRACTED AND IMPAIRED DRIVING SIMULATOR

The Injury Prevention team brought the distracted and impaired driving simulator to students at Western University in February and March. The simulator is a critical education tool as it enables students to experience an interactive "life-like" scenario to aid in their safety education surrounding driving while under the influence of drugs or alcohol and the repercussions of poor decision making. A total of 32 students participated and roughly 20 impact USB clips were handed out. The Impact Universal Serial Busses (USBs) are in the shape of an armband. When you plug in the USB on a computer, it opens to the impact website so they can educate themselves on more content.

ELECTRONIC CANADIAN TRIAGE PROVINCIAL SUPPORT TOOL TO IMPROVE PATIENT SAFETY AND QUALITY OF CARE IN EMERGENCY DEPARTMENTS

The Electronic Canadian Triage and Acuity Scale (eCTAS) went live on Wednesday, March 26 in regional hospital Emergency Departments and the Urgent Care Care (UCC) at St. Joseph's. This is a province initiative supported by Cancer Care Ontario to standardize the way EHR systems across the province triage patients. One of the goals of eCTAS is to improve patient safety and quality of care through the established electronic triage decision support tool. In addition, every ED and UCC will be bench-marked against other sites across Canada.

WORKING TOGETHER TO SERVE OTHERS

MEDICAL SURGICAL INTENSIVE CARE UNIT AND INFECTION PREVENTION AND CONTROL MULTICENTRE TRIAL TO DRIVE QUALITY IMPROVEMENT INITIATIVES

LHSC Medical Surgical Intensive Care Unit at University Hospital and Infection Prevention and Control (IPC) are partnering with critical care units across Southern Ontario to conduct a multi-centre trial evaluating electronic hand hygiene (EHH) monitoring. The study will use real-time feedback of hand hygiene rates to drive quality improvement initiatives which will be evaluated by monitoring rates of blood stream infections.

The study will be conducted in three phases,

1. March - May 2019 IPAC will be collecting baseline data on total hand hygiene opportunities for the MSICU.
2. August -September 2019. The EHH monitoring system will be installed into the existing hand hygiene dispensers in and baseline electronic hand hygiene data will be recorded.
3. November 2019. The research study will begin with real-time monitoring and reporting of EHH rates. The study will continue for 12-18 months.

Hand hygiene is an important element in preventing health care acquired infections. Traditional hand hygiene monitoring relies on manual observation of hand hygiene, which is limited by short periods of observation and long reporting intervals (monthly). EHH reports real-time, objective data, based on recorded activations of hand hygiene dispensers for the entire unit. This data will provide more meaningful feedback for front-line healthcare providers.

HEALTH-CARE SYSTEM REGIONAL UPDATES

COGNITIVE BEHAVIOURAL THERAPY FOR PSYCHOSIS AND TRANSITIONAL AGE DIALECTICAL BEHAVIOURAL THERAPY SESSIONS

The London Health Sciences Centre (LHSC) Mental Health Care Program, in collaboration with Grey Bruce Health Services (GBHS), put forward a joint submission to the South West Local Health Integration (SW LHIN) Falls Economic funds to offer training and skill development for the Early Psychosis Intervention Program. The submission was accepted in January and plans were put in place to offer the LHSC Mental Health Care Program staff from the Inpatient Units, Ambulatory Services plus our community partners, system-wide training on Cognitive Behavioral Therapy (CBT) for Psychosis and Transitional Age Dialectical Behavior Therapy (DBT). The funding was to be used by March 31, 2019. In collaboration with Grey Bruce Trainers and outside consultant experts we were able to offer a two day workshop on CBT for Psychosis on March 18 and 19 and

a one day DBT workshop on March 26. There were a total of 74 staff attendees to these two sessions and due to high demand, a second two day CBT session was arranged for April 8 and 9. The evaluation feedback from the staff was overwhelmingly positive. This training provided staff with relevant learning and skill develop to increase their capacity to provide quality, evidenced informed care to the patients.

EMOTIONAL INTELLIGENCE WORKSHOP TO SUPPORT TILLSONBURG DISTRICT MEMORIAL HOSPITAL LEADERS

LHSC’s People and Culture program delivered an Emotional Intelligence (EI) workshop to 25 leaders at Tillsonburg District Memorial Hospital to support building the EI capability of leaders.

- LHSC has well-established and robust emotional intelligence programming that has been offered in the organization for over a decade. It is embedded within the LHSC leadership culture with approximately 85% of our leaders having taking our foundational EI development workshops. EI/Assertiveness is a leadership competency, and there are also minimum standards related to emotional intelligence when hiring for leaders
- Emotional intelligence is not as well established in other health-care organizations in the region. Facilitating the TDMH workshop provided an opportunity for LHSC to share our knowledge and experience to support TDMH in their EI journey
- Why EI? With the recognition that effective leaders are those that self-aware, have the ability to self-manage, empathize and connect with their teams, this 7-hour workshop explored the frameworks for emotional intelligence and provided a model for their leaders to enhance their interpersonal influence style. Participating leaders also developed an Intentional Change Plan to support individual behaviour change
- Intact leadership team learning of EI supports understanding of a common language and framework at TDMH, supporting enhanced approaches to team resiliency, conflict resolution capabilities and decision-making effectiveness at all levels of leadership
- Post-workshop sustainability support/coaching to the CEO and HR Director on how to further embed and cultivate emotional intelligence practices and tools into the day-to-day practices of their leadership team

INFORMATION TECHNOLOGY INFRASTRUCTURE AND SUPPORT SERVICES PARTNERSHIP

Effective April 1, 2019 LHSC and St. Joseph’s have entered into a new partnership with South Huron Hospital Association (SHHA) in Exeter to share information technology infrastructure and support services. This allows Information Technology Services to utilize and share the skills and expertise of staff across the region in a cost effective and efficient manner that will support SHHA staff and ultimately the patients they care for in that region. One of the greatest opportunities is to collectively strengthen a standard approach to cyber security.

LHSC IN THE NEWS

Media Monitoring Report: March 11 – April 10, 2019

SUMMARY

- 18 stories were posted on the public website
- 93 media stories referenced LHSC and our partners (75 positive, 15 neutral and 3 negative)
- 14 media inquiries were managed

HIGHLIGHTS

1. Canon Medical brings new CT scanners to London

In an effort to advance medical imaging technology research and improve patient care, London Health Sciences Centre, St. Joseph's Health Care London, Western University and Lawson Health Research Institute partnered with Canon Medical to bring a fleet of new CT scanners to the city. Positive coverage from [CBC](#), [CTV](#), [London Free Press](#) and [Blackburn News](#).

2. Inside LHSC's Multi-Organ Transplant Program

An inside look at transplantation at LHSC brought a feature story from [London Free Press](#), which was reprinted in the [Stratford Beacon Herald](#), and the [Woodstock Sentinel Review](#). The positive coverage pieced together stats, survivor stories and the history of LHSC's multi-organ transplant program.

3. Resignation of five LHSC psychiatrists

After a handful of psychiatrists resigned from LHSC, [CBC](#) spoke about the effects on the mental health care program amidst a mental health crisis. Sources spoke about problems within the department and issues with funding. Coverage was negative.

Respectfully Submitted,

Paul Woods
President and CEO

Our Mission

LHSC is a leading academic health organization committed to collaborating with patients, families and system partners to:

- Deliver excellent care experiences and outcomes;
- Educate the health-care providers of tomorrow; and
- Advance new discoveries and innovations that optimize the health and wellbeing of those we serve