South West LHIN

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South West LHIN Exchange Newsletter – March 2017

Video: Residential hospice planning in the South West LHIN

High quality hospice care can offer comfort, dignity and quality of life preceding death for both the individual and their family. Residential hospice is an important element in the continuum of care and key to ensuring that a range of supports are available to enable individuals to die in their place of choice.

Watch Ryan Fraser share his experience with the death of a loved one at St. Joseph's Hospice in London. The LHIN is actively working to ensure every person, no matter who they are, where they live or how much they make, has access to residential hospice.

Recruitment underway for South West LHIN groups to support Patients First

To advance the Patients First Action Plan for Health Care and the South West LHIN Integrated Health Service Plan, the LHIN is creating new committees with a stronger patient/family/caregiver voice – where sub-regions are the focal point for integrated service planning and delivery. The Patient and Family Advisory Committee, Health System Renewal Advisory Committee, and five sub-region integration tables will advise the LHIN on system-wide priorities and drive change locally. These seven groups will be interdependent in order to achieve a common goal of improving health and wellness, patient experience and outcomes, as well as value for money.

We are now seeking members of the public and system thinkers and leaders to be considered for membership in these groups.

Members of the public are being recruited to participate on committees and offer their perspective on health care as patient, family or caregiver.

> The LHIN has long recognized that listening to the patients and their families and their stories can lead to improvements within the health system. Anyone who has been a patient, a family member of a patient, or a caregiver, and who lives within the South West Local LHIN's geography, and who would like to participate in this work, is encouraged to complete an Expression of Interest. The Expression of Interest form, tools and messaging to promote recruitment will be available on our website. An email will follow with additional information.

Health care providers who are system thinkers with broad knowledge of the healthcare system are being recruited to identify, plan and make recommendations for both local and system priorities.

> LHIN staff are working through established LHIN-wide sector tables whenever possible to support the membership recruitment process. LHIN staff will meet with each table to review and confirm a recommended process to nominate representatives for that sector in each sub-region.

What can I do to help?

- Begin identifying nominees who meet the criteria
- Support scheduling of a meeting in your sector with LHIN staff in your sub-region
- Support the LHIN in promoting recruiting members of the public to participate
- Reach out to Sue McCutcheon (sue.mccutcheon@lhins.on.ca) with any questions in advance of your sector's meeting to discuss nominees.

Initial meetings of the sub-region integration tables are expected to take place in June 2017. The Health

System Renewal Advisory Committee as well as the Patient and Family Advisory would hold their first meeting in Fall 2017.

Becoming more sensitive to the emotional and behavioural needs of seniors

For many older patients, a stay in hospital is a difficult experience. Becoming more sensitive to the emotional and behavioural needs of seniors becomes even more crucial as more people age.

As part of the South West LHIN Senior Friendly Hospital Strategy, Grey Bruce Health Services has been funded as the lead agency to develop training on current strategies and best practices designed to create better health outcomes for seniors. This program is designed for all health care providers with an interest in improving care for older adults and has been delivered to all HSP partners in the South West.

Participants are learning more about sensitivity to emotional and behavioural needs and building inclusive strategies, these theories are broken down into three core elements: *See Who I am*, *Connect With Me* and *Involve Me* and group case study work shows the powerful impact of small changes is such as:

- Ensure you address the individual by name,
- Take action to help reduce feelings of loneliness and isolation,
- Respect self-determination
- Assess workload and stress levels of family or caregivers.

The introductory presentation and additional information can be found on St. Joseph's Assess and Restore resource page

Ontario's Local Health Integration Networks have been leading a Senior Friendly Hospital Strategy – an initiative to improve seniors' health and prevent their physical and mental decline in hospital. By acting together, hospitals can improve the experience and outcomes of older adults in Ontario hospitals.

Best practice peer support: Support from someone who has been there

An important part of helping someone through a difficult

situation, peer support is a supportive relationship between people with similar lived experiences. A peer can offer knowledge, emotional, social or practical help to another peer. Peer support is an essential and valued part of a client-centred, recovery-oriented system of mental health and addictions care.

A robust and growing research evidence base shows peer support is associated with reduced hospitalizations for mental health problems, reduced symptom distress, improved social support and improved quality of life.

Wesley Nightingale of Oxford Self Help shares an experience of helping a peer with a housing issue.

“A peer reached out to me about an issue he was having with housing,” Wesley reflects. “We talked about the self-care he was using to cope. I shared my own similar personal experiences.”

Wesley and his peer agreed to meet together with the landlord “My role was not to advocate for him, but to observe and be a friendly face in the room.” Wesley reflects that his peer spoke with confidence and was engaged. After the meeting, Wesley and his peer talked about the issue further, “The peer asked me: ‘What do I do?’ ” Wesley and the peer continued to connect, and his peer had the confidence to take the appropriate action to resolve his housing issue.

Through understanding, empathy and the personal experiences he shared, Wesley was able to support his peer in self-advocating and taking the steps towards resolving the issue.

The LHIN’s vision is a connected, seamless system that provides consistent and equitable peer support built on promising practices across the South West LHIN. Through the South West LHIN Peer Support Strategy, the South West LHIN has been working with peer support programs and mental health and addiction providers since December 2015 with a focus on enhancing peer support, through integration, at the sub-region level (Grey Bruce, Huron Perth, London Middlesex, Oxford and Elgin).

Register now: Speakers announced for the 2017 Quality Symposium

We are pleased to announce our lineup of distinguished speakers for the 2017 Quality Symposium. Join us in Stratford on June 1 as we learn to transform, elevate, and adapt ideas that can move us towards our vision of a transformed health care system. A system that is focused on improved quality outcomes for patients.

The Quality Symposium is an annual event that brings together over 400 health care service providers, governors and partners to educate and inspire quality improvement best practices in health care. This event is accessible and free of charge.

Plan to join us on Thursday June 1, 2017 at the Stratford Rotary Complex.

Paula Knight, healthcare executive, cancer survivor and caregiver

Recognized as one of Canada's Top 100 Most Powerful Women by the Women's Executive Network, Paula will share her story and experiences in the health care system both as a patient and caregiver. Paula will also reflect on how those experiences shape the way she approaches her role as Vice-President of People, Strategy and Communications at Cancer Care Ontario.

Roy Lilley, writer, broadcaster, commentator and analyst on health care policy

An established writer, broadcaster and commentator on health and social issues in the UK, Roy has addressed audiences at conferences and seminars throughout the UK and internationally. A regular contributor to the Today Programme, Newsnight and BBC News 24 in England, Roy is the author of more than twenty books on health and health service management. Well known for his direct approach on many social issues, Roy has long advocated for changes in the National Health Service. With an international lens, Roy will explore the opportunities available to the Ontario health care system to propel it forward and arrive at transformation.

Michael Bach CCDP/AP, founder and CEO of the Canadian Centre of Diversity and Inclusion

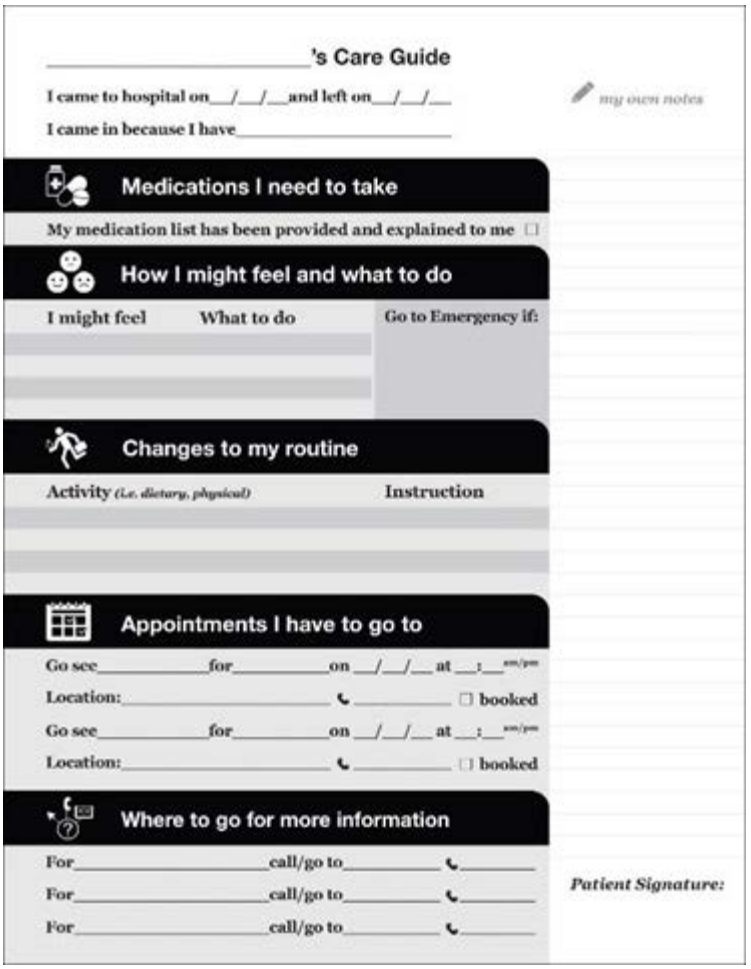
Founder and CEO of the Canadian Centre of Diversity and Inclusion, Michael Bach is recognized both nationally and internationally as a leader and expert in diversity, inclusion and employment equity. Michael is a passionate trailblazer in creating inclusive and diverse workforces. With his witty sense of humour, Michael will speak on elevating those hard-learned best practices and using enablers to make lasting and impactful organizational changes.

Luke Anderson, founder of Stopgap Foundation

Champions are all around us – those who are naturally good at adapting. Luke's message is simple: be the change. Through his stories and experiences, Luke challenges us to find the same inspiration that drove him to his success, to find

success in ourselves and be the change we wish to see. Breaking down barriers is something Luke has been doing since he founded the Stopgap Foundation in 2011. Following an injury to his spinal cord, Luke began his work building brightly colored ramps to provide accessibility to previously inaccessible spaces.

PODS: Simple discharge summaries that give structure to the discharge conversation



A new discharge tool shows promise for hospitals looking to prevent readmissions.

When St. Thomas Elgin General Hospital noted they were experiencing higher readmission rates in 2014, the hospital began an initiative to increase the number of people seeing their primary care provider within seven days of a hospital discharge.

The results were compelling. Since October 2015, 90 per cent of discharge summaries are sent from the hospital to primary care within 48 hours; 82 per cent of patients have a scheduled follow up appointment; and a reduced variation in actual to expected readmission.

The hospital is now exploring how PODS or Patient Oriented Discharge Summaries presents an opportunity to build on this initiative's success. While in its early stages, it's possible that if successful the summaries could be spread to other hospitals in the LHIN, to further improve health outcomes and patient experience in the South West LHIN.

Communicating important health information in a clear way to patients on discharge seems straightforward but is often challenging. Patient Oriented Discharge Summaries (PODS) give structure to the discharge conversation.

"PODS help bring the residents and clinicians to the patient's bedside to have a meaningful conversation about their care and about planning their discharge," says Dr. Allan Gob, Assistant Professor of Medicine at Western University and Hematologist at the London Health Sciences Centre. Dr. Gob would says he would like to see PODS used more broadly.

PODS were developed in 2014 in Toronto by University Health Network (UHN) OpenLab with the support of The Toronto Central LHIN after UHN noted similar readmission issues as St. Thomas had.

Patient Oriented Discharge Summaries simplify the information, language and design of discharge summaries so patient knows what is wrong and what they have to do. The summaries contain five elements: medication instructions; follow up appointments with phone numbers; normal expected symptoms, danger signs and what to do; lifestyle changes and when to resume activities; and, information and resources to have handy.

Helping staff empower and engage patients during difficult encounters

When the Middlesex Hospital Alliance wanted to improve client satisfaction, they focused on communication. In an effort to find new ways to enhance the experience for patients and their families at their hospital sites, the Middlesex Hospital Alliance approached South West Self Management Program to administer the Treating Patients with C.A.R.E workshop for all their clinical and non-clinical staff.

"Our staff deliver excellent customer service," said Steph Ouellet, Vice President, Strategic Partnerships, for the Middlesex Hospital Alliance. "However, we wanted to raise the bar and equip our staff with additional tools to be prepared to have the various kinds of conversations that may come about day-to-day."

After reviewing several customer service models, in August 2015 Ouellet approached South West Self Management Program to host a workshop for their staff.

The South West Self Management Program is offered by the South West CCAC in partnership with the South West LHIN. The goal of the program is to have a coordinated approach to support clients, caregivers and health care providers with self management.

"The way we communicate and the words we use add to the patient experience," said Andrea Martin, Program Manager at the South West Self Management Program. "We want to help professionals ensure patients are having a good experience."

Treating Patients with C.A.R.E is a free workshop that provides a conceptual model and specific techniques

that guide all staff members -- receptionists, nurses, medical assistants, business office clerks, maintenance workers (literally anyone who comes in contact with patients) – to communicate in ways that will enhance satisfaction and encourage patient partnership. Participants use their own experiences in health care to identify staff actions that make a difference. Essential skills are organized into a four-point model: Connect, Appreciate, Respond, and Empower (C.A.R.E.).

“Leadership support is extremely important for the success of this training,” said Sally Boyle, Program Lead, South West Self Management Program. “If leadership sees the value in this training, others will as well.”

The Middlesex Hospital Alliance made the C.A.R.E. training mandatory for all staff at Four Counties Health Services and Strathroy Middlesex General Hospital. From August 2015 to March 2016, 24 workshops were conducted and 449 clinical and non-clinical staff were trained.

“It’s not just about active listening, it’s how you empower the client or patient to work with you,” said Ouellet. “It’s a fantastic workshop that brought everything together and helped the staff hone their skills and think about different ways to empower patients and engage with them during difficult encounters.”

To learn more about this workshop or to hold a workshop within your organization, contact the South West Self Management Program

Thank you to our partners for your submissions for the 2017 Quality Awards

The South West LHIN would like to thank all our health care partners who applied for the 2017 South West LHIN Quality Awards. There were 19 applications submitted this year. Consistent with last year, two awards will be distributed in 2017. One award will recognize a small/medium size quality improvement project, and the other award will recognize a large scale quality improvement project.

Small/Medium Quality Improvement Projects are smaller in scope (address local problems), involve fewer stakeholders and often carried out within the resources of the participating organizations.

Large Quality Improvement Initiatives are larger in scope, typically LHIN-wide initiatives with greater complexity, involving multiple stakeholders and are usually funded projects.

The awards will be handed out at the 2017 Quality Symposium on June 1, 2017, in Stratford.