



beyond bricks



june 2018



Building^{on a} strong foundation

Most people picture buildings when they think of hospitals. Large structures with that unmistakable “H” fastened to the wall like a beacon.

It’s true that a lot of the work hospitals do occurs inside our buildings. They’re very important to the care we provide. But at Hamilton Health Sciences (HHS), we believe a hospital is much more than a physical space. Instead of looking at our hospital system as a collection of unique places, we see it as a system of people and services with arms reaching far beyond our walls and into the communities we serve.

The foundation we are built on isn’t made of bricks. It’s made of values and strategies that are helping us work toward our goal of a healthier community. *We’ve identified four strategic directions to guide us: pursuing operational excellence, taking an enterprise approach to solve our biggest challenges, focusing more resources on population health, and forging stronger strategic partnerships.*

The stories in this report will show you how we’re putting each of these strategic directions into action.

At a time when our healthcare system is under great pressure, planning for the future is more important than ever. We’re confident our plans will enable us to continue providing excellent care, while finding new and better ways to serve our communities now and in the future.

Rob MacIsaac, President and CEO and Julia Kamula, Chair, Board of Directors

Operational Excellence

We’re aligning our strategy, systems, tools and culture to continuously improve value for patients and families.

Enterprise Approach

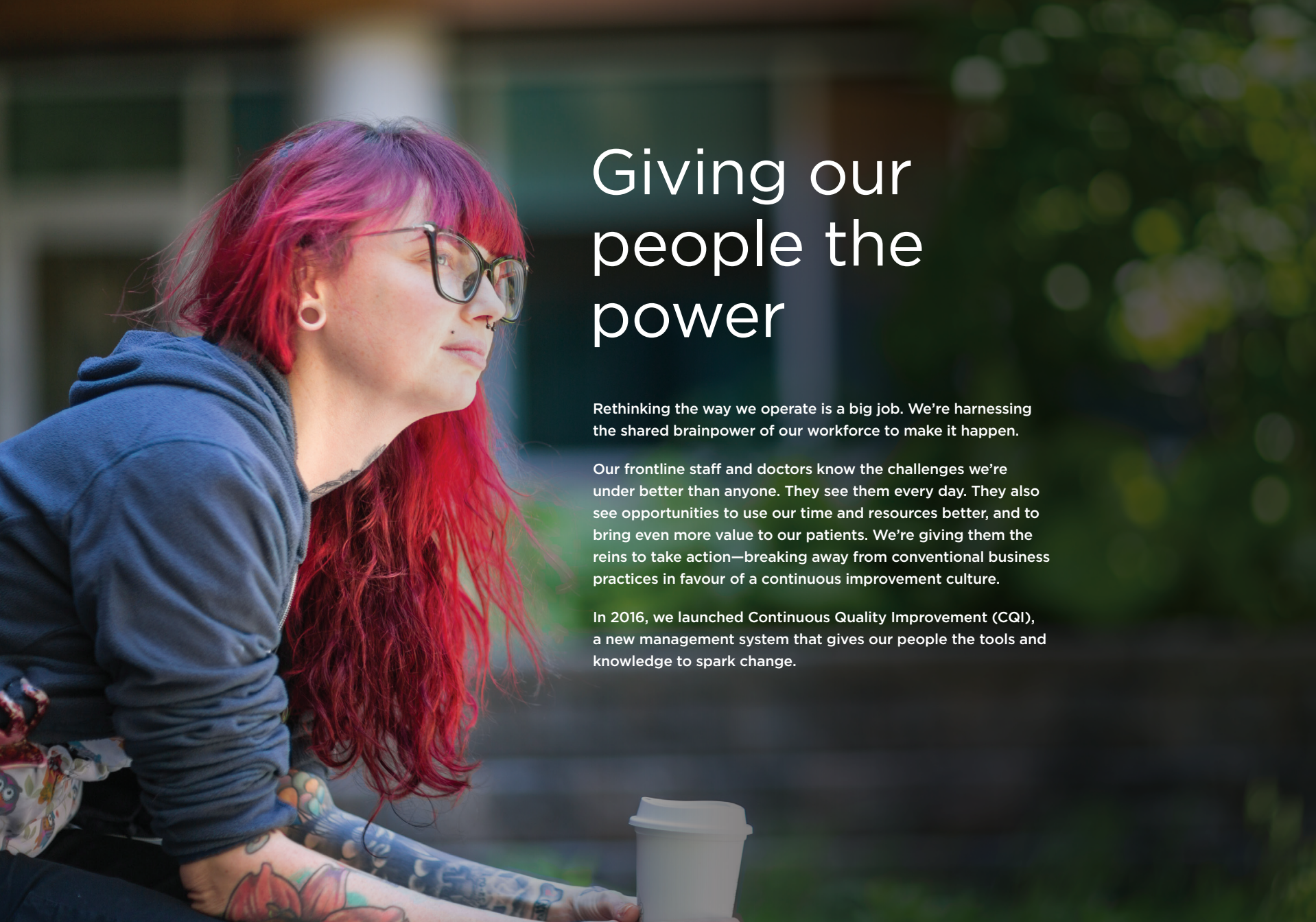
We’re leveraging our collective strengths to think and act as one hospital. We are greater than the sum of our parts.

Population Health

We’re making it easier for people to manage their health in the community to preserve hospital space for those who need it most.

Strategic Partnerships

We’re collaborating with partners to realize new opportunities and find solutions to challenges that we can’t tackle alone.



Giving our people the power

Rethinking the way we operate is a big job. We're harnessing the shared brainpower of our workforce to make it happen.

Our frontline staff and doctors know the challenges we're under better than anyone. They see them every day. They also see opportunities to use our time and resources better, and to bring even more value to our patients. We're giving them the reins to take action—breaking away from conventional business practices in favour of a continuous improvement culture.

In 2016, we launched Continuous Quality Improvement (CQI), a new management system that gives our people the tools and knowledge to spark change.

Better without boundaries.

Many staff-led improvements are being shared across HHS. This means less work is duplicated, and more people benefit.

Since then, we've implemented nearly 2,000 staff-driven improvements. Our people are enhancing patient care and safety every day.

Improvements like:

Colour coding mobility devices: Physiotherapists on our stroke rehabilitation unit wanted to spend less time looking for information and more time getting patients moving. They created a simple, colour-coded tracking system for walkers and wheelchairs. Now everyone can see at a glance how much help a patient needs to walk or wheel.

Reducing sticky situations: Cost savings and greater comfort for patients? That's a win-win! A nurse on our pediatric cancer unit sourced a new adhesive remover for bandage changes that's more effective and less expensive. Other units are following suit.

Caring for our own: The death of a patient is difficult for everyone. Nurses on our adult inpatient cancer unit created a system to make sure they have time to grieve as well. Through a buddy system, staff can take the time they need before returning to care for their other patients.



The people make the place

St. Peter's Hospital

is home to four unique programs including behavioural health, rehabilitation, medically complex, and palliative care.



When you don't have walls to lean on, you lean on each other. And you grow stronger because of it.

We learned that the hard way this past fall on a quiet Sunday morning at St. Peter's Hospital. Patients had eaten breakfast. Nurses were making the rounds with medication.

Then the fire alarm began to sound.

At first, most people thought it was a drill. It was not. It was a very real fire that tested the character of our staff and the strength of our community partnerships.

Those on duty calmly and efficiently moved patients to a safe area of the building. Others came in on their days off to pitch in. Community partners flocked to offer their support. Neighbouring businesses donated food and drink. Almost 100 patients were relocated, both within

and outside HHS while smoke-damaged areas of the hospital were repaired. Many staff moved alongside them to smooth the transition.

The hard work didn't stop there. Teams worked overtime to repair the damaged areas on a strict timeline. Within four weeks, relocated patients were able to move back in.

This experience confirmed how deeply we can rely on each other to rise to a challenge, and on our partners in the extended health system and community to brace us in times of need.

Everyone who works or has received care at St. Peter's Hospital says it's a special place. That couldn't be truer. But the fire proved it's the people who make it so. In the face of a disaster, we saw that its caring spirit extends well beyond its doors. ■

We're building pathways

between our services to connect patients with the care they need.



The right care in the right place at the right time

A life raft is most effective when it's at your fingertips when trouble strikes—not when you have to swim through cold and choppy water to reach it. That's why we're making it easier for people to access the urgent care they need, when they need it.

We're reorganizing treatment pathways so they follow a natural and connected route that's easy for people to understand, and integrating services to make care more personal and less transactional.

As part of this shift, we've created a new program called RESSCU—Rapid Evaluation and Symptom Support Cancer Unit. This nurse practitioner-led service gives people receiving cancer treatment direct access to a highly-trained team to help them manage their symptoms, and the side effects of their treatment.

"It's one stop with staff who have the knowledge and skills to care for these patients and their unique needs," says Angela Djuric Paulin, who led the team that implemented the project. "It's well integrated with our cancer clinics, so there's a sense of familiarity and more personalized care."

For Russell Crooks, who recently finished chemotherapy and radiation, this lifeline makes the waves of nausea and pain a little more bearable. He doesn't have to retell his story every time he visits. They already know.

"The nurses are super in the RESSCU centre," he says.

Tailored care allows more people to get the treatment they need in the unit, rather than being admitted to the hospital. It also gives them an alternative to visiting the emergency department. The program is closely linked to Oncology Day Services where patients can receive extended care outside RESSCU's operating hours. These factors can lead to better health and reduce hospital gridlock.

The majority of people seen during RESSCU's pilot phase were treated by the team then discharged home. They receive a follow-up phone call within 48 hours to check on their symptoms. Many patients, like Russell, say RESSCU has improved their hospital experience and given them more confidence in the healthcare system.

Plans are in place to improve and expand RESSCU so more patients can benefit from this innovative model. ■

Better care with our whole heart

As the go-to centre for heart care in our region, we take on complex cases and use cutting edge techniques. But, we haven't lost our human touch. As a community hospital and regional centre of excellence, we provide the best of both worlds to our patients.

Ask Jenny and Gerald Kennedy of St. Catharines. The mother-son pair credit the team at Hamilton General Hospital (HGH) with saving their lives more times than they can count.

Our cardiac, vascular, and stroke

programs take on some of the most complex cases in Ontario.

20 years ago, when now 81-year-old Jenny met Dr. Madhu Natarajan, she was having trouble breathing and was sent to HGH for a heart X-ray. Dr. Natarajan put stents in her blood vessels to increase blood flow.

Years later, Jenny went into heart failure. No one—not even a renowned specialist in Toronto—would take on the risky surgery that might extend her life. Then she met Dr. Victor Chu, a heart surgeon at HGH. He performed a minimally invasive Transcatheter Aortic Valve Implantation (TAVI) on Jenny to put a new valve in her failing heart. “They’ve saved my life many times,” she says.

Fast forward to 2018.

Jenny brought her son, Gerald, to their local hospital for a heart X-ray to diagnose the cause behind his worsening health. When they walked into the waiting area, she looked up at the appointment board.

There was Dr. Natarajan's name. Jenny's long-trusted doctor would be caring for her son.

“Jenny recognized me right away,” says Dr. Natarajan “Through a partnership with Niagara Health, heart doctors from HHS rotate through shifts in the heart investigation unit in St. Catharines. It was my turn that day, and I was glad to be a familiar face for the Kennedys.”

Gerald needed urgent surgery that could only be done at HGH. Dr. Natarajan connected with his team back in Hamilton and arranged it immediately.

Within 24 hours, he was on an operating table having quadruple bypass surgery.

Gerald is recovering well. Both he and Jenny are forever grateful to their team at HHS for giving them more years together.

“We wouldn't be here without them. They are so talented, but they are also so kind. They're our angels,” Jenny says.



Superior stroke care

- We are among provincial leaders in the quick delivery of clot-busting medication and life-saving clot retrieval therapy.
- We have integrated stroke care in Hamilton and Niagara North West, so everyone is treated on a dedicated stroke unit and has the best chance at optimal recovery.
- We have increased the amount of specialized, one-on-one, rehabilitation stroke patients receive by almost 80% in the last two years.

Cardiac and vascular

- We lead integrated services within our Local Health Integration Network for vascular surgery and heart investigation, improving access to world class care for people across our region.
- Our heart surgery program is the largest in the province, completing 1,731 cases last year.
- Three quarters of our TAVI patients go home just one day after their procedure.

Healthy Relationships

We're collaborating with community partners to provide great care—in sickness and in health.

Our Geriatric Education and Research in Aging Sciences (GERAS) Centre has teamed up with the YMCA to set people like Annette Atwood up for successful recovery after surgery. Their research study, Fit Joints, gives participants a customized pre-surgery program. The goal? Quicker recovery, less discomfort, and better mobility. Post surgery, Annette's hip replacement is healing well and she's still making a splash!



Niagara Region Public Health and West Lincoln Memorial Hospital have partnered to bring public health nurses into the hospital to educate parents-to-be. We're setting parents up for success by connecting them with the services and supports they need to raise happy, healthy kids.

To provide equitable access to cancer screening and services, our Regional Cancer Program collaborates with leaders in Six Nations of the Grand River and Mississaugas of the New Credit First Nation. We're working together to understand how we can make services more accessible along the whole spectrum of cancer care—from screening to survivorship. A big win: Last year, over 100 residents were screened on our Mobile Cancer Screening Coach.



In the past four years

the number of hours contributed by our volunteer patient advisors has increased **ten fold**.

This dedicated and growing group is involved in projects ranging from our Accreditation Steering Committee to the expansion of our stem cell program.



Speaking from experience

The best health care is built by people who've been there. People like Martha Winhall.

Martha has been a patient advisor at Hamilton Health Sciences for three years. She volunteered because she wanted to share what she learned caring for her father at the end of his life, to help improve the hospital experience for future patients and families.

Martha advises on end-of-life initiatives at HHS. Most recently, she's been contributing to a project on improving end-of-life communication. The team she's working with has created a toolkit to guide and encourage conversations about mortality between older adults, their families, and their healthcare teams.

"Our goal is to identify valuable tools that will reduce unwanted treatments and ensure that patient voices are heard," says Dr. John You, an internist at HHS. "Guidance

from patient advisors is crucial to this work."

Involving patient advisors like Martha ensures that their viewpoint is front-and-centre. They bring experience from far beyond the walls of our hospitals to shape what happens within them.

"I help shift the conversation back to the patient perspective," says Martha.

The toolkit is being piloted at Hamilton General Hospital and in several other healthcare settings across Canada. Dr. You and his team hope to expand the communication system across HHS as a routine part of patient care.

Martha has devoted many hours of her already busy life to this project. Knowing that future patients will benefit from her shared experience makes it all worthwhile.

"I have found it to be extraordinarily rewarding," she says. ■



Reaching across borders to improve care

We're looking beyond our walls to become the safest hospital in Canada.

McMaster Children's Hospital (MCH) has joined the Children's Hospitals Solutions for Patient Safety Network—a group of more than 130 pediatric hospitals from across North America who are working together to reduce preventable harm and ensure care is as safe as possible for our hospitalized children.

We've committed to a 50 per cent reduction in hospital acquired harm at MCH by the end of 2018. To accomplish this, we've standardized methods, and increased patient and family education, reinforcing that everyone plays an important role in keeping our youngest patients safe! ■

Information knows no boundaries



Your health. Your information. At your fingertips. For people like Calum, this is a game changer.

This smiley 11-year old is the only kid in Canada with a rare condition that affects his muscles and breathing. He needs round-the-clock nursing care, and his mom, Leslie, spends a lot of time organizing his health records so everyone on his team has the information they need.

Later this year, Calum, and patients across Southern Ontario, will have access to their health records online through a secure digital platform called MyChart. The platform provides patients and families with secure, real-time access to records, test results, and communications. HHS is leading the broadest regional deployment of MyChart in Ontario.

This technology empowers patients and families to take further control of their care, and improves connectivity across the entire healthcare team. Calum's mom Leslie will no longer have to do the heavy lifting.



A new era in digital health

MyChart is one of many initiatives in our Digital Health Plan. This plan outlines the digital solutions we're implementing at HHS to improve our operations and services, and meet the evolving needs of the patients and families we serve.

We're working on:

- Developing flexible digital infrastructure that will grow with us, like a patient-friendly website with quick access to services and information.
- Improving patient safety with technology that reduces human error, including electronic medication verification systems.
- Analyzing real-time data to help us make clinical decisions using the best possible evidence.
- Enhancing the patient experience with online booking systems and virtual communication tools.
- Partnering with companies to find innovative ways to bring more value to our patients and families.

For summarized financial statements, visit hamiltonhealthsciences.ca/2018report

