

Momentum



JOSEPH BRANT
MEMORIAL HOSPITAL

SHARING THE MOMENTUM OF A NEW ERA OF HEALTH CARE AT



Jo Brant's new Chief of Emergency is focused on improving wait times and customer service

PHOTO BY LEON ROBINSON

It's a given – good customer service matters. Whether buying a new car, staying at a posh hotel, or dining at a new hip restaurant, the type of service you receive will be what you remember most. After all, it's the experience that counts and today's businesses understand that ensuring the customer experience is a positive one is critical. This focus on good service is becoming increasingly important in health care, too, and we're building it as a priority at JBMH.

JBMH's new Chief of Emergency, Dr. Paul Faulkner, along

with Jill Randall, JBMH's new Director, Emergency, Critical Care and Mental Health, are aware of just how important delivering a positive patient experience is, especially in the Emergency Department.

"Research tells us that a patient's health care experience is directly related to their satisfaction with their health care institution and their understanding of the quality of care that it delivers. Researchers have also found that health care is one of the most important consumer-focused service industries. We

believe health care should be delivered with the same drive of providing excellent customer experiences as has been adopted by other industries," says Randall.

Randall points out that good service can affect treatment outcomes.

"The academic literature says that higher levels of patient satisfaction are associated with higher levels of compliance with treatment and an increased likelihood

Continues on page 7



welcome

JBMH is gaining momentum

By Eric Vandewall, JBMH President & CEO



Momentum – the forward force or steady speed of movement, increasing, developing, or being more successful. It's the perfect way to describe what's been happening at Joseph Brant Memorial Hospital since our redevelopment and expansion plans began. Our Project, as well as our commitment to providing safe, high quality health care and exceptional service, continues to gain momentum and it's the reason why we've chosen Momentum as

the name of our new publication.

In partnership with The Burlington Post, we are proud to bring you the first issue of our new community newspaper. Coming to your homes every other month (watch for our next issue coming this September) Momentum features stories about JBMH – our patients, staff, physicians, volunteers, community partners and our programs and services – and will provide timely news and information about the Redevelopment and Expansion Project. Momentum will also provide updates on our Foundation's historic \$60 million Capital Campaign and celebrate the generous support from our donors and sponsors.

In an age when health care faces tremendous challenges, it is important for us to let you know that we are entering a new era of health care at JBMH, one in which we are committed to our vision of *Compassion Care, Exemplary Service, Every Time*. We believe in our vision and we hold true to our values of compassion, accountability, respect and excellence.

This newspaper is our opportunity to share with you the many ways we are living our vision and how we are continuously finding ways to improve the care we provide. At the centre of everything we do is you, our patients, and we are committed to keeping you informed about what's happening today at JBMH and what you can expect in the future.

On July 16th, we had the honour of witnessing City Council's endorsement of the City of Burlington's \$60 million contribution agreement. This agreement signifies a major milestone in our Project and is one of several we have been fortunate to celebrate in the past year, including our 50th anniversary, the beginning construction of the new Halton McMaster Family Health Centre on our site, and the impressive \$12 million already committed to our Capital Campaign.

We hope you enjoy our first issue of Momentum and that you learn about our programs and services, our patients, our partners and our dedicated staff, physicians and volunteers.

update

Construction begins on our Redevelopment and Expansion Project

By Henri Dekker, Director, Redevelopment and Facilities

On July 16th, Burlington City Council approved their \$60 million contribution to the cost of the Redevelopment and Expansion Project, which will be dedicated to supporting the many equipment purchases. We are incredibly appreciative of the support and dedication of our City Council for the hospital and the future of health care in our community.

Construction is underway for Phase I of the Project. In early May, the Ministry of Environment (MOE) building was demolished to make way for the future home of the Halton McMaster Family Health Centre. The building will also house administration space and a parking facility.

We are now beginning to work through the Phase II design process to create the look, feel and functionality of our new six storey tower which includes 76 additional acute care beds, an expanded Cancer Care Clinic, expanded ambulatory care programs, a new ICU, new Operating Rooms, and expanded medical, surgical and outpatient services.

Our new building will incorporate Leadership in Energy and Environmental Design (LEED) technologies. We know the project is not just about building a new hospital, it's also about building a facility that minimizes the impact on the environment, both in the short term during construction, but also in the long run.

We are focusing on the environment we are creating for patients with the design, as it will truly have a lasting impact. We want everyone to know as they walk through our main entrance that they will be treated with exceptional care and innovative services.

We have the opportunity to work closely together with our community to make JBMH a state-of-art facility. We will be



ABOVE: On May 17th, demolition of the former Ministry of Environment (MOE) building began to make way for the new Halton McMaster Family Health Centre. **BELOW:** Artist Rendering of the new JBMH.



engaging you in the coming months to provide your feedback on the hospital design as we continue to move forward in exciting this process.

inside

Welcome to our first edition of **Momentum**, a publication devoted to delivering stories and articles about the innovative, leading practice and compassionate health care we provide at Joseph Brant Memorial Hospital. Publishing every other month, **Momentum** will feature regular columns by our staff, physicians, volunteers, leadership team and department chiefs, providing updates on what's happening at the hospital.

In this issue you'll find stories about our new initiatives, profiles of our outstanding health care professionals, and columns by:

Eric Vandewall – President and CEO, who shares the hospital's successes and milestones as we embark on a new era of health care.

Henri Dekker – Director of Redevelopment will highlight the progress of our Redevelopment and Expansion Project.

Anissa Hilborn – President of the JBMH Foundation share stories of generous support from the community and gives an update about JBMH's \$60 million Capital Campaign

Dr. Arshad Hack – Chief of Family Medicine at JBMH answers community-submitted questions about your physical health and wellbeing over the summer months.

JBMH's Infection and Prevention and Control Team share the top reasons why cleaning your hands is vital in a hospital setting.

Momentum is produced by the JBMH Corporate Communications Department.

JANELLE EADE,
Corporate Communications Manager

NNEKA ONWUALU, Editor
Corporate Communications Specialist

Photography by:
LEON ROBINSON

To view the online edition visit
www.jbmh.com.

Joseph Brant Memorial Hospital
1230 North Shore Blvd.,
Burlington, Ontario
L7S 1W7
Tel: 905-632-3737

For enquiries please email
corporatecommunications@jbmh.com

exemplary service

Thank you for helping us choose our new patient menu

Nutritious, delicious and made-to-order meals are now available at JBMH – thanks to the power of steam.

In November 2011 staff, physicians, volunteers, board members and guests from the community attended a special Steamplicity taste-testing and menu selection event at the hospital. From the 50 menu options, 17 entrées were chosen. JBMH implemented the new meal program in all patient care areas this past June.

Developed in the United Kingdom in 2005 and introduced in Canada in 2009 by Morrison, which is a division of Compass Group Canada and JBMH's new food service provider, Steamplicity meals are cooked using steam pressure, a healthy cooking method that retains the nutrients naturally found in food. Meals are low in sodium and planned according to Canada's Food Guide with each meal containing a major source of protein, carbohydrate and two servings of vegetables.

Like in a restaurant, Steamplicity meals are made-to-order – patients can order meals according to their tastes and diet

each day.

“A food services staff member takes the daily meal order from the patient at their bedside using a handheld device. Every selection is electronically verified for individual diet compliance. Minutes before a meal is served to a patient, the entrée is pressure cooked in a microwave on the patient care unit. The food is cooked in approximately four to five minutes. A final temperature check is made to ensure the entrée has been cooked to the appropriate temperature, and the meal is immediately served to the patient,” says Sandra Cameron, JBMH Director, Nutrition and Food Services.

With patient safety a priority – regular third-party inspections are conducted to validate that food safety and hygiene protocols are followed – this new meal program is also responsible: as patients select only what they wish to eat, within their dietary restrictions, there is less food left uneaten and wasted. And all plastic and film is recycled.

“JBMH is thrilled to offer this new food service to our patients,” says Florine Lobo, JBMH Vice President Finance



A staff member takes a patient's order right at the bedside.

& Corporate Services and CFO. “The Steamplicity patient meal model is highly innovative and creative. It will provide a significant increase in quality food options for our patients.”

Patient Courtesy Shuttle back for a second straight year

JBMH's Patient Courtesy Shuttle is back! The shuttle provides free transportation for patients, visitors and family members to and from their cars and the hospital's main entrances.

Started as pilot project last summer, the service proved so valuable and feedback was so tremendous that the service is now returning for another year.

“Our parking lot is at capacity many times throughout the week, resulting in limited or no parking for patients close to the main entrances. This sometimes makes it difficult for the elderly or frail to get into the hospital. This complementary service provides our patients easy access to the hospital for their appointments or family visits,” says

Carol Ann Ritcey, Coordinator, JBMH Volunteer Resources.

The volunteer drivers receive training and are fully insured. The shuttle can carry up to 5 passengers at a time. It is serviced and cleaned regularly for safety.

“Patients and families were delighted by the service last year,” says Ritcey. “The volunteer drivers' personable and professional attitude drew incredibly positive feedback.”

Long-time volunteer Doug Hand enjoyed his role as driver last year so much that he is back again for his second term. “We're just delighted to be providing this fantastic customer service program for what we hope will be the second of many more successful years.”



From l-r: JBMH Volunteers and Patient Courtesy Shuttle drivers John Gibson, Al Friday, Herb Teather, June Lovelock, Sylvia Land, Bill Haufschild, Doug Hand, and Rob McLean.

Providing critical dialysis closer to home



From l-r: Jackie Adcock, RN, Critical Care Response Team Coordinator, Dr. Joseph Berlingieri, Intensivist, Dr. Stephanie Robbins, Chief of Medicine and Critical Care.

Critically ill patients with acute renal failure can now get the treatment they need in JBMH's Intensive Care Unit (ICU).

“Being able to provide acute hemodialysis within our ICU allows our patients to remain in their own community, avoids any risks associated with transportation, and keeps them close to the support of their families and friends at a time when they are acutely ill and need that support most,” says Geoff Flannagan, Manager of JBMH's Intensive Care Unit.

The new acute hemodialysis program has the capacity to treat two patients at a time, seven days a week. Since the program began, 10 patients have been treated.

Most patients who end up needing hemodialysis are generally healthy. They develop a sudden, critical illness or infection that causes the kidneys to shut down. These patients usually start off in the Emergency Department and end up moving to the ICU. Luckily, most of these patients who receive

the hemodialysis treatment recover kidney function and are not likely to need future dialysis.

“Every patient is different,” says Flannagan. “This treatment will bridge the patient over a short period of time as normal kidney function is restored.”

The ICU hemodialysis program involves the work of a comprehensive ICU team including physicians, nurses, technologists, kidney specialists (Nephrologists) and Intensivists, physicians who specialize in the care of critically ill patients in the ICU, like Dr. Joe Berlingieri. Dr. Berlingieri credits this program with improving quality, safety and service for JBMH patients and their families.

“The ability to keep patients requiring dialysis in our ICU may effectively reduce their length of stay in hospital. And providing in-house dialysis means a better care experience for our patients who want safe, quality care closer to home.”

quality & safety

JBMH first to implement innovative AMU model of care

Dr. Stephanie Robbins, JBMH's Chief of Medicine and Critical Care was looking for new ways to improve upon the care acute medicine patients receive at JBMH.

In keeping with hospital's vision of high quality, safe care and exceptional service, Dr. Robbins investigated several health care organizations across North America and abroad. It was there that she discovered an evidence-based model of care that originated from Australia and the UK but that had not yet been implemented in Canada – the Acute Medicine Unit or AMU.

The AMU is a dedicated unit within a hospital focused on acute medical care for patients with medical emergencies that have brought them to the Emergency Department (ED), such as chest infections, pneumonia, blood clots, chest pain, stroke, or heart failure. The unit's goal is for these patients to be seen quickly and treated appropriately outside of the ED, benefiting the patient and alleviating pressure on the ED.

"A team of multidisciplinary health care professionals come together to assess the patient's needs so that the patient can be treated and discharged home or to an appropriate care setting as quickly as possible," says Dr. Robbins.

Dr. Robbins knew that this model was just the tool JBMH needed.

In May, thanks to Dr. Robbins leadership and the collaborative efforts of physicians and staff across the organization, JBMH



JBMH's new Acute Medicine Unit utilizes teamwork to care for acutely ill patients.

opened its first ever AMU as a six month pilot project. The unit is located on the hospital's fifth floor.

"Our AMU is designed to improve the quality, safety and efficiency of care for our acute medicine patients. Among the benefits anticipated through this project are improved patient flow, decreased length of stay, enhanced quality of care and improved patient outcomes. Because the project relies upon the multidisciplinary collaboration among specialists, hospitalists, family physicians, and community partners, patients will benefit from safer, faster, more

comprehensive care," Dr. Robbins explains.

AMUs in other parts of the world have been shown to improve the proportion of patients discharged early, therefore decreasing their length of stay. Dr. Robbins anticipates that the introduction of the AMU, along with the hospital's 72 hour Medical Short Stay Unit (MSSU), will bring about the same results.

"The focus of the AMU is to expedite medical and multidisciplinary assessment of the patient so that they can receive the right care, in the right place, at the right time. The Medical Director will liaise with the admitting physicians and the multidisciplinary team

to ensure that patient care is optimized and meeting best practice guidelines," says Melanie Potvin, Administrative Director, Medicine.

"Helping patients to quickly overcome the medical condition that brought them to the hospital allows for better outcomes. An additional benefit of reduced length of hospital stay is increased access to acute inpatient beds for the community, where, the need for acute medicine services is increasing."

Only two months into the project Potvin is seeing some promising results.

"Despite an increase in the number of patients in the ED that require acute care, and a 10 per cent increase in medical patient admissions, the AMU is meeting its quality outcomes. Inpatients receive a comprehensive case review and treatments that help to reduce their length of stay, improving the hospital's ability to care for this patient population. As the team progresses through the pilot, we expect to experience further improvements."

"JBMH is proud to be the first to implement this model of care," says Dr. Robbins.

"We believe that our AMU will improve patient satisfaction as we will be better able to provide rapid assessment, diagnosis and early treatment based on the patient's needs. The addition of the new Unit will make a positive contribution to the management of beds in the hospital and will most importantly lead to better care for our acutely ill patients."

innovation

Bringing high-tech UVC technology to JBMH

JBMH has added an innovative tool to its infection prevention "tool belt" to help eradicate deadly health care-associated infections (HAIs).

In June, JBMH began trialing a Rapid Disinfectant (R-D) in select patient rooms. This new, innovative technology delivers lethal UltraViolet C (UVC) light doses into the environment, destroying any viruses, spores and drug-resistant bacteria.

Gord Savelli, Director, JBMH Hospital Support Services, began researching innovative cleaning methods and found the use of ultraviolet light technology to be a proven success in other areas. "This method is an emerging technology now being introduced to hospital settings. We wanted to try the technology at JBMH because it is fast, efficient, effective and eco-friendly."

After a room is thoroughly cleaned and sterilized by staff, the R-D is then used

as a supplemental cleaning tool to kill any remaining microorganisms. The R-D's unique remote sensors measure how much UVC energy reaches into every corner of a treatment space, measuring, recording and analyzing the disinfection protocol in real time.

The system can also be employed for mass disinfection of IV poles, wheel chairs and blood pressure cuffs.

"UVC is a green technology that requires no harsh chemicals. The units allow us to disinfect more rooms, more thoroughly, in less time. It can also make hand washing more effective by thoroughly disinfecting surfaces and making it less likely for staff and patients to re-contaminate clean hands."

JBMH is currently conducting a 3-month trial to determine the best method of routine use.



JBMH is trialing an innovative cleaning tool that emits lethal UltraViolet C (UVC) into a patient room. UVC helps to destroy viruses, spores and bacteria.

"The UVC light is a tool we are adding to our already stringent decontamination methods, providing a greater certainty that

the number of organisms in the room have been eliminated and the risk of infection is significantly reduced."

Learning to breathe easier in JBMH's COPD program

Grace's Story

When Grace Poulos was diagnosed with emphysema six years ago, the 81-year-old grandmother of five soon found herself on a course of pills, puffers and antibiotics and then on a path of oxygen 24 hours a day, seven days a week. One and half years ago, Grace found herself at JBMH taking a new care path along with receiving a new diagnosis – COPD.

COPD, or chronic obstructive pulmonary disease, is one of the most common lung diseases that make it extremely difficult to breathe. There are two main forms of COPD: chronic bronchitis, which involves a long-term cough with mucus; and emphysema, which involves destruction of the lungs over time. Most people with COPD have a combination of both conditions.

It was during that hospital stay that Grace met Lily Spanjevic, Advanced Practice Nurse-Geriatrics-Medicine and was referred to JBMH's COPD rehabilitation and education program offered at the Wellness House on Itabashi Way in Burlington.

"The goal of JBMH's COPD program is to provide education and exercise programs that improve the quality of life and physical function for patients with COPD. Teaching self-management and coping skills also helps to decrease recurrent hospitalizations when patients' symptoms flare up," says Spanjevic.

Patients with moderate and severe COPD are appropriate candidates for this program.

"Patients receive an initial assessment from their family physician or specialist and then are referred to the program. Patients who have been inpatients at JBMH or who have come into the Emergency Department can also be referred to the program."

The COPD program at Wellness House is a comprehensive mix of group education classes, support groups and exercise sessions that last for eight weeks or 20 sessions, two to three times per week (alternating weeks). Education is aimed at symptom management and includes breathing techniques to reduce shortness of breath, energy conservation techniques, and providing awareness of how medication can help to control symptoms. Exercise programs are tailored to meet individual client needs to improve cardiovascular fitness, strength, endurance and flexibility.

Grace credits this mix for helping her cope with her symptoms.

"I feel I gained additional knowledge about COPD and ways of coping. Sessions with outside specialists, (i.e. pharmacists) were very helpful. I enjoyed the exercise sessions and I found the group sessions quite beneficial because they helped me see that I was not alone in dealing with this disease."

While there is no cure for COPD, there are good treatments and measures people can take to manage and minimize symptoms of the disease. Treatment includes quitting smoking, staying away from smoke and air pollution, taking COPD medications such as pills, inhalers (puffers), and supplemental oxygen, and joining a pulmonary rehabilitation program like the one offered through JBMH.

One of the challenges of this disease is that symptoms often develop slowly and some people may not know that they are sick. Symptoms are cough with or without mucus, fatigue, recurrent respiratory infections, shortness of breath that gets worse with mild activity, trouble catching



Grace Poulos learned self-management and coping skills to help her with her COPD at JBMH's Wellness House.

one's breath and constant wheezing. If you find you are experiencing any of these symptoms seek medical attention.

"And don't be afraid to ask questions regarding availability of treatment and information about the disease," adds Grace. "If you are not under a specialist's care, have your doctor recommend someone."

To find out if you have COPD your family physician or specialist may send you for a lung function test called spirometry. This test involves blowing out as hard as possible into a small machine that tests lung capacity. The results can be checked right away, and the test does not involve exercising, drawing blood, or exposure to radiation. Still, X-rays, CT scans or a blood test (called arterial blood gas) to measure the amounts of oxygen and carbon dioxide in the blood, can also be used to detect the disease.

Finding out if you have COPD and seeking treatment right away is critical as serious complications like an irregular heartbeat (arrhythmia), pneumonia, severe weight loss and malnutrition can be life-threatening.

Today, Grace is managing well at home with her husband, Jim, in Burlington. And thanks to the help she received in JBMH's COPD program and the medications she is taking she and Jim are living life as normally and as comfortable as possible.

"I am coping quite well and my husband is a great help. I take my medications every day and I draw on the techniques I learned at Wellness House to help me manage my breathing."

It's these lessons that have helped Grace continue to enjoy time with her husband of 57 years, her daughter and two sons, and three granddaughters and two grandsons.

getting help

The Canadian Lung Association advises that people who already have COPD can have flare-ups (exacerbations) – times when their COPD gets a lot worse. Flare-ups are the main reason COPD patients go to hospital.

Treatment of COPD includes:

- Quitting smoking
- Taking COPD medications to prevent and lessen symptoms
- Making healthy lifestyle and diet changes

and fighting germs to prevent infections (clean hands regularly)

- Preventing and controlling your COPD flare-ups
- Working with your health care team
- Joining a pulmonary rehabilitation program to learn how to breathe better and exercise.

For more information about the COPD Program at JBMH's Wellness House call 905-632-5358.

inspired *People & Teamwork* Getting to know our exceptional staff



Intensive Care Unit

Kalen

Kalen Paulson, Speech Language Pathologist and Professional Practice Chief, Speech Language Pathology, Emergency Department, Intensive Care Unit and Medical Short Stay Unit

What is your role at JBMH?

As a Speech-Language Pathologist working in acute care, I help assess and treat swallowing and communication disorders for our patients. Swallowing difficulties affects approximately 10 per cent of people over 50. Those who have suffered a stroke are even more likely to have swallowing or communication problems. Early identification and management of swallowing impairments is crucial, so it is not unusual to see a Speech-Language Pathologist in the Emergency Department.

I also work closely with our ICU team of physicians, respiratory therapists, nurse educators, and nurses to help patients who have tracheostomies and are unable to speak due to a loss of voice. Through the placement of a specialty speaking valve, our team can restore a patient's ability to communicate with their health care team and family and improve their swallowing.

What is the most rewarding part of your job?

The most rewarding part of my job is ensuring patient safety and working with the support of an excellent team, including nursing, clinical dietitians, physiotherapists, occupational therapists, physicians, radiologists and radiological technicians. When someone has difficulty swallowing, it can be uncomfortable and embarrassing, and can have very serious health consequences, including weight loss, dehydration and pneumonia. When our team can reduce or eliminate these issues for our patients, and keep them eating, I know we have done a great job.

What would you like patients, families and visitors to know about quality, safety and service at JBMH?

Quality and safety are strategic priorities at JBMH. Our team of Speech-Language Pathologists are constantly working on streamlining our services to ensure patients have timely access to high quality services. When our patients require further assessment of a swallowing disorder, our patients have access to video fluoroscopic swallowing studies that Speech-Language Pathologists complete with a Radiologist and Radiological Technician. This study allows us to see how a patient swallows with a moving x-ray. Then our team can plan any diet modifications or treatment strategies that can help a person maintain their ability to eat safely. With the direction and support of our senior team, we have been able to improve the quality of our assessments by standardizing our assessment materials and enhancing our study protocols. Our quality initiatives ensure our patients are safer.

As a Speech-Language Pathologist working at JBMH, my goal is to ensure that our patients receive the right care at the right time with respect to their swallowing and communication needs. Our 72-hour Medical Short Stay Unit (MSSU) also has the support of a Speech-Language Pathologist, as does each inpatient program within our hospital. I would love for patients and visitors to know that the vision statement of our hospital is a goal for every employee here: *Compassionate Care, Exemplary service, Every time.*



Laurie

Laurie Taplin, Registered Respiratory Therapist

What is your role at JBMH?

For the last 20 years, I have been working with patients who have various respiratory health

issues. My role is predominantly in critical care where we are responsible for managing life supporting ventilators. We are also part of the labour and delivery resuscitation team, as well as having many other responsibilities.

What is the most rewarding part of your job?

The most rewarding part of my job is when a former ICU patient comes in to visit. It is so nice to know that thanks to the care they received here that they are now doing so well. I also enjoy working as part of a team that includes so many different health care professionals and support staff who have been loyal employees for many years. We are like one big family and to see their dedication to patient care every day is inspiring.

What would you like patients, families and visitors to know about quality, safety and service at JBMH?

I know that everyone who works at Jo Brant is personally committed to providing the best possible care to our patients. It is truly a community hospital with the best interests of every patient, family member, visitor and staff member always top of mind.

What is your role at JBMH?

As a porter, I transport both patients and equipment throughout the hospital.

What is the most rewarding part of your job?

There is great reward in serving patients. Transporting patients to their rooms or to go for tests can be stressful. I use this time to sensitively employ humour, understanding, compassion or sometimes I sing a little tune to make patients feel more at ease. This is just my way of letting them know I care and I understand what they're going through.

What would you like patients, families and visitors to know about quality, safety and service at JBMH?

Our community should know that at JBMH we have a progressive and brilliant leadership team, insightful and hardworking directors, and the very best health care professionals and support staff. We are collectively focused on providing Burlington and the surrounding communities with the highest quality health care in the safest environment.



John

John Theriault, Porter, Distribution and Environmental Services (DES)

cover story Continued from page 1

JBMH's Emergency Department



customer service

"Health care is one of the most important consumer-focused service industries. We believe health care should be delivered with the same drive of providing excellent customer experiences as has been adopted by other industries."

Jill Randall, Director, Emergency, Critical Care, Mental Health.

of positive outcomes. Optimizing the patient experience is the right thing and our patients deserve it."

With this in mind, JBMH's ED staff and physicians underwent extensive customer service training this past spring.

"Our organizational vision is to provide *Compassionate care, Exemplary service, Every time*," says Randall.

"As part of our focus on making this vision a reality, we want our ED staff and physicians to have the knowledge and tools that they need to deliver a positive patient and family experience. All ED staff and physicians participated in an innovative training program. Using an evidenced-based customer service model, this training has reinforced our staff and physicians commitment to customer service excellence. Whether interacting with patients and their families, the commitment to compassion, accountability, respect and excellence is always top of mind."

And when it comes to good customer service, communication and a personal touch is key, Dr. Faulkner explains.

"How patients are treated, the communication they receive, the personal attention and care, these are all part of the patient experience. We want to ensure that patients are engaged in the care they are receiving at our hospital. We are striving to ensure patients receive full communication of the steps involved in their ED visit, that they are treated respectfully and that their questions are answered."

Why is customer service in the Emergency Department important? Dr. Faulkner says that it's because patients link this type of personal care with their actual medical care to make up the total experience.

"That's why it is important to focus on the entire patient experience and not just the medical component. It's a model of care that we are building upon in the ED and across the entire organization."

With a deep commitment to customer service, JBMH is also working on several quality and safety initiatives with the goal of reducing wait times in the ED and improving patient flow.

"An important determinant of the quality of care that we provide is ensuring that we have the right patient in the right bed at the right time," says Randall.

"In the ED, a full time team leader is responsible for

coordinating the care for our admitted patients, working with members of our bed management team to ensure that patients are prioritized and moved from the ED to the most appropriate patient care unit. Staff from our ED team huddle every day with members from all departments and services



respect

"We are striving to ensure patients receive full communication of the steps involved in their ED visit, that they are treated respectfully and that their questions are answered."

– Dr. Paul Faulkner, Chief of Emergency

to manage our inpatient beds, to identify and eliminate flow challenges and to prioritize the patient's placement. These daily huddles also provide an opportunity for us to review our performance and to identify and implement new initiatives to improve our service."

JBMH has also established a daily performance action team where leaders meet to review the hospital's daily performance then plan and implement initiatives to improve wait times in the ED and identify appropriate care plans for those ready to be discharged.

Like many hospitals across Ontario, JBMH faces challenges in ED wait times. It's a challenge made even more daunting as the hospital treats an aging population in an aging facility, Dr. Faulkner points out.

"It's a challenge to meet the health care needs of our community. We continue to see increasing volumes of visits to the ED from patients who require comprehensive, complex emergency care."

Since joining JBMH, Dr. Faulkner has implemented a number of medical directives to help address ED challenges, including the initiation of early investigations of a patient's needs before the ED physician sees the patient. "By identifying a patient's needs early, we can shorten the time it takes to make a decision on whether that patient needs to be admitted or can go home. We are also working on increasing the number of physician shifts per day to four from the previous two."

JBMH's EMAaT (Emergency Minor Assessment and Treatment) area is also helping ED patients be treated and sent home sooner.

Measuring organizational goals and identifying areas for improvement are a key part of improving patient outcomes in the ED. As part of its Quality Improvement Plan (QIP) JBMH has made reducing ED wait times a priority.

"In alignment with our organizational priorities, we monitor our performance on various processes and patient satisfaction measures and believe in accountability and transparency. We are committed to working with all partners in our system to build on our great work and to identify and implement future improvement opportunities. We can't do it alone but know that we share a common commitment to evaluating and improving our system for our patients and their families," Dr. Faulkner explains.

With all of the quality, safety and service initiatives being put in place, JBMH's Chief of Emergency knows one thing for sure – JBMH's ED is changing.

"Our goal is to be a top performing emergency department, recognized in our community and beyond for achieving our targets and for demonstrating a culture of quality, safety and service excellence. We are confident, with the help of our leaders, partners, patients and staff, that together we can continue to build a department that meets the current and future needs of our community."

community

Shoppers learn about the signs and symptoms of stroke



JBMH staff, volunteers and stroke survivors helped spread the message about the signs and symptoms of stroke at JBMH's information booth in Burlington Mall.

On June 26th, shoppers at Burlington Mall got a lot more than they bargained for – they received free information about the signs and symptoms of stroke at JBMH's community outreach information booth.

Every June, the health care community takes part in activities to promote stroke month. This year, the Central South Stroke Network, of which JBMH is a part, decided to promote stroke awareness through display booths at local malls. JBMH's booth in Burlington Mall displayed large signs about the signs of stroke, printed materials and erasers labelled "Stroke? Call 911" while staff, volunteers and stroke survivors told passing shoppers about the Heart and Stroke Foundation's theme of "Erase the effects of stroke."

"Time is of the essence when it comes to surviving a stroke," says deHueck. "Our goal was to draw attention to the signs and symptoms of a stroke and help people

understand why they should dial 9-1-1 immediately. Community outreach is critical, considering that one out of every six people throughout the world will have a stroke. If we are able to reach just one person who will know the signs and symptoms of stroke and that calling 9-1-1 for immediate care are the first steps, then we've succeeded in raising awareness and potentially saved a life."

"We encourage patients and their families to call 9-1-1 rather than driving to the hospital in the event of a stroke. Paramedics can assess patients and ensure that a patient is quickly transported to a centre with the resources to provide the right treatment," says Jill Randall, JBMH Director – Emergency, Critical Care, Mental Health.

JBMH provides comprehensive stroke care, which includes the administration of tPA, a special clot-busting medication, to patients who meet the treatment criteria. Additional care includes stroke

prevention education, acute care, in-patient rehabilitation and outpatient speech language therapy. JBMH's Wellness House, an adult day program, provides community rehabilitation and additional post-stroke programming.

"JBMH works very closely with our regional and district centres to ensure that we are providing best practice stroke care and to ensure consistency of processes across the region," Randall says. "We work in collaboration with our community partners in order to try to facilitate a smoother transition for patients from hospital to community."

Care for stroke patients also involves a collaborative approach, Randall adds.

"Our team includes physicians, nurses, physiotherapists, occupational therapists, speech language pathologists, dietitians, pharmacists, social workers and recreation therapists. Our trained stroke survivor

volunteers are also an important part of the team. Through our volunteer stroke visitation program, volunteers share their experiences and can relate to our inpatients in a unique way."

As part of this collaborative care by our JBMH team, a stroke alert system has been implemented in the Emergency Department. The system helps ensure the quick identification of candidates for time-sensitive tPA drug administration. The hospital has opened a Stroke Unit on one of the acute medical units. Research has shown that patients cared for on a stroke unit have fewer complications, less disability and improved survival.

"Stroke has a devastating effect on not only the patient but also the family," says deHueck. "Our team understands the importance of providing compassionate and evidence-based care to ensure the best possible outcome for our patients."

learning environment

Nurses review and explore best practices to benefit our patients

Joseph Brant Memorial Hospital is a learning environment where frontline staff, particularly nurses, play a vital role in helping to develop, nurture and mentor their fellow health care professionals.

We asked Nancy Della Maestra, RN, Operating Room, Post Anesthetic Care Unit, Endoscopy and Outpatient Procedure Unit about her role as a Professional Practice Educator (PPE) in the OR:

How do you define a Professional Practice Educator?

A Professional Practice Educator demonstrates effective leadership by advancing the practice of nurses by helping them to practice according to the highest professional standards. The educator provides

clinical support and ongoing education and development programs that provide hands-on learning opportunities at both the patient care unit and individual level. The educator acts as a resource person, role model, problem solver, confidant and advisor on nursing practice issues. The educator is also responsible for arranging orientation of new staff members, coordinating student placements, updating policies and procedures, and working on corporate initiatives and projects with fellow PPEs and other health care professionals to improve patient care.

As an educator, what role do you play in your department?

My role is to review and explore best practices for the Operating Room, Post-

Anaesthetic Care Unit, Endoscopy Unit and Outpatient Procedure Unit. These are highly specialized areas where nurses are committed to ongoing education and training and JBMH is very supportive of these initiatives.

How does peer mentoring benefit frontline workers?

Peer mentoring offers support to staff who can benefit from an expert's experience and guidance. Many new grads or experienced nurses who have made a career move to a new patient care area can benefit by being paired with an experienced nurse who can share their knowledge and skills.



Nancy Della Maestra, RN, Professional Practice Educator, Operating Room, Post Anesthetic Care Unit, Endoscopy and Outpatient Procedure Unit

ask the doctor

Dr. Arshad Hack answers your questions on how to beat the heat

Q What are the most common health problems or injuries that you see in the Emergency Department over the summer months?

A We see a variety of potentially serious medical conditions in the hospital over the summer, including dehydration, respiratory issues such as acute asthma attacks, fractures, head traumas, anaphylactic reactions, cardiac events, gastroenteritis, and water-related injuries. I encourage everyone to be smart this summer and protect themselves. A few tips to help you stay safe and out of the Emergency Department are:

- Drink water and other rehydrating beverages such as electrolyte sports drinks, which have salt and sugar in them throughout the day.
- Wear a hat and stay in the shade on hot days.
- Keep your asthma medications with you at all times and follow up with your family physician if you find you are using your inhalers more often than usual.
- Wear a helmet and other protective body equipment when doing physical activities.
- Keep an up-to-date EpiPen with you at all times if you have anaphylactic allergies.
- Take time to rest. Do not overexert yourself, and if your body does not feel right, consult your family physician or go to the Emergency Department.
- To avoid tummy problems, do not eat food, especially meat or mayonnaise/cream based food that has been left out too long in the heat. Also, be sure that the meat you barbecue has been cooked to the right internal temperature.

Q What is heatstroke and is it dangerous?

A Heatstroke is a term that is used when one's body temperature rises out of the normal range of 36-37.5°C. In these situations, the body is not able to effectively cool itself through sweating. If you believe you or your loved is suffering from heatstroke be sure to drink water, get to a cool environment and/or seek medical attention.

Q The summer heat certainly started early this year, with the City

issuing heat and HUMIDEX advisories that made it especially dangerous for the elderly. What steps can be taken to ensure they stay safe and avoid a trip to the Emergency Department?

A When the relative humidity outside is 75 per cent or greater and the HUMIDEX is high, it becomes difficult for the body to cool itself effectively. At times like these, it's crucial that people of all ages maintain their fluid intake, stay in the shade or inside and wear a hat if they are going to be in direct sun. Those most vulnerable to heat, like the elderly, should stay inside in an air-conditioned environment.

Q I have a really bad sunburn. What should I do?

A Sunburns are caused by damaging UV radiation from the sunlight. It occurs in 30 per cent of adults and 70 per cent of children and adolescents over the course of the summer. Prevent sunburns by using appropriate SPF sunscreen and reapply often. If you do get a bad sunburn, stay out of the sun until your skin heals. Using a Non-Steroidal Anti-Inflammatory (NSAID) as soon as you notice the pain can provide relief. These include over-the-counter medications such as Advil, Aleve or Ibuprophen. Many people use topical agents such as aloe creams, numbing agents and cool compresses that can provide some relief. It's important to note that sunburns can lead to heatstroke, so if you are experiencing symptoms such as fever, headache, confusion, nausea, vomiting or fainting, go to the Emergency Department.

Q My son has bumped his head playing outside. Should I take him to the Emergency Department, walk-in clinic or to our family physician?

A This is a very common scenario without an easy answer as each case will differ. It is always best if the child is seen by a medical professional, especially if he or she is under the age of six months, a fall occurred from five feet or higher or if trauma was a result of a high-velocity object or force. It is important to observe symptoms in your child such as loss of consciousness, recurrent vomiting, persistent headaches that worsen with time, seizure, lack of coordination or confusion. Parents know



Dr. Arshad Hack is a family physician in Burlington, the Chief of the Department of Family Medicine at Joseph Brant Memorial Hospital, and Associate Clinical Professor at McMaster University in the Department of Family Medicine.

their kids the best. If you are concerned, go to the Emergency Department.

Q Why do we get a cold or the flu during the summer?

A Although most infections occur during the winter months when we are indoors and more likely to pass viruses back and forth, the same process can occur through the course of the summer. The term "cold" is a misnomer, as it does not really have anything to do at all with the cold weather. Rather, it is a compilation of symptoms that are usually the result of a viral infection such as influenza, adenovirus or rhinovirus. The most effective way to prevent the spread of infection is to wash your hands with soap and water and be sure to keep hand sanitizer with you.

Do you have questions you'd like to ask the doctor?

Send your questions to Dr. Arshad Hack at corporatecommunications@jbmh.com with **"Ask the Doctor"** in the subject line.

safety

Get the "dirt" on cleaning your hands while in the hospital

Brought to you by JBMH's Infection and Prevention Control Team

Did you know that hands spread up to 80 per cent of germs and common infectious diseases like the common cold and the flu? Bacteria or germs can be picked up from door knobs or elevator buttons that have been touched by someone who is sick. The germs get picked up on your hands and then you may rub your eyes, nose or mouth causing you to become sick.

Cleaning your hands is one of the best ways to stop the spread of infections, especially in a hospital.

Hand cleaning can be done in two methods:

1. Alcohol Hand Rub provided by the hospital.

This can be used when your hands are not visibly soiled. The hand rub is accessible in many areas of the hospital, including the lobby, by the elevators and at the patient rooms. In hospitals this is the number one way to clean your hands.

2. Soap and water using the soap dispensers at the sink found in the public bathrooms. The sinks found in patient rooms are dedicated for patients' use only.

When should you clean your hands?

- Before eating or feeding the elderly or children, including breastfeeding
- After using the washroom

- After changing diapers or helping someone use the washroom
- After sneezing, coughing or blowing your nose
- After touching shared books, newspapers or magazines
- Before and after visiting someone in the hospital
- After touching items that do not belong to the patient you are visiting
- After coming into contact with body fluids such as blood or urine.

When you come to the hospital hand cleaning is everyone's job including you!

foundation

Making history with the JBMH Capital Campaign

By Anissa Hilborn, JBMH Foundation President

It is an exciting time at Joseph Brant Memorial Hospital. We are breaking ground on our Redevelopment and Expansion Project so we can continue to provide innovative, leading practice and exemplary health care to our community.

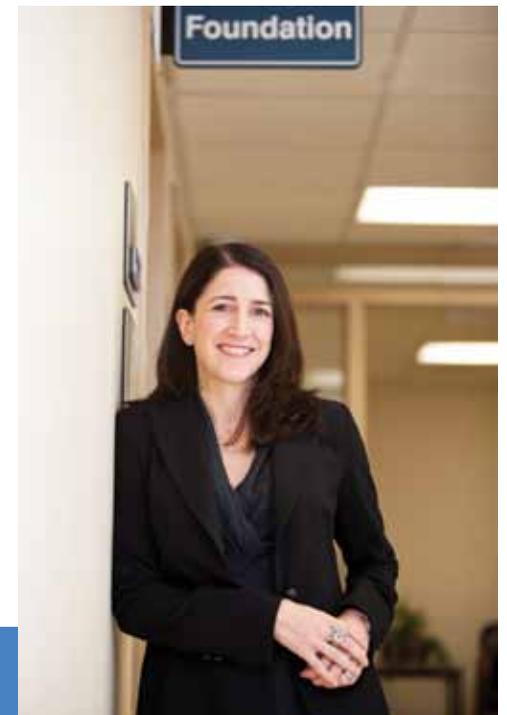
To support this Project, the Foundation is committed to raising \$60 million in a Capital Campaign, the largest campaign in the hospital and community's history. Our team of volunteers, Foundation Board of Directors, Campaign Cabinet, Ambassadors Council, and staff members are diligently working with generous donors, community groups and event teams to help us achieve our goal.

We wish to thank all of our partners and community members

who have given generously in support of the hospital. We appreciate your gifts, support and belief in JBMH.

In this edition of Momentum, we have included a snapshot of some of the events we have recently celebrated at the hospital, including the successful 12th Annual Crystal Ball (see page 11) and two generous donations received from community organizations and events.

In the coming months you will see more updates about our Capital Campaign for the JBMH Redevelopment and Expansion Project, as well as more news about our amazing volunteers, donors, sponsors and community partners.



"The JBMH Foundation is committed to raising \$60 million for the JBMH Redevelopment and Expansion Project."

thank you

JB 2 Day Men's Invitational hits the golf course for JBMH



The JB 2-Day Men's Invitational Golf Tournament in Niagara Falls.

On June 14th and 15th, dozens of gentlemen left their boardrooms, offices and sales floors to join together on the golf course in support of Joseph Brant Memorial Hospital.

The JB 2-Day Men's Invitational Golf Tournament has grown into a hugely successful tournament thanks to the support of many leaders from the Burlington community. This year, the tournament was held in Niagara Falls and in two days raised approximately \$180,000 for JBMH. Funds from previous years have supported men's health initiatives and equipment needs within the hospital. The tournament is now raising funds to support its \$1 million pledge to the Capital Campaign to support the JBMH Redevelopment and Expansion Project.

The JB 2 Day Committee includes: Clement Messere, Bryan "Red" Latimer, Dan Desrochers, Dave Livemore, Hugh Loomans, Joe Kennedy, Joe Donnell, Michael DeGroote, Ray Colasimone, Steve Duffield, Trevor Fackrel, Wayne Heslop and assistance from JBMH Foundation staff.

To date, the JB 2 Day has raised over \$1.5 million for JBMH. A sincere thank you to the tournament organizers and participants for your support of JBMH.

Cogeco supports JBMH Capital Campaign



From l-r: Anissa Hilborn, Mario Joannette, Glenda Lloyd, Brian Torsney, Louise St-Pierre, Claudette Paquin, Brent Scowen, Tim Caddigan.

On June 27th, JBMH announced a generous gift of \$408,600 received from Cogeco for the \$60 million Capital Campaign. The gift represents a gift-in-kind contribution of TVCogeco services and a financial gift of \$150,000. Promotional videos, PSAs and on-air updates on TVCogeco will provide the Burlington community with a valuable source of information about the hospital's Redevelopment and Expansion Project.

A sincere thank you to Cogeco for your generous support of JBMH.



YES, I wish to support quality care at Joseph Brant Memorial Hospital!

Name _____
 Address _____
 City _____ Prov. _____
 Tel. (Bus.) _____ (Home) _____
 Email _____

I/we wish to make a gift of:

\$35 \$50 \$100 \$250 Other: \$ _____

*all donations of \$20.00 or more will receive a charitable tax receipt

Payment Options (please check one)

- By cheque** (cheque payable to Joseph Brant Memorial Hospital Foundation)
 By credit card (provide credit card details below)

OR Make your donation online today by visiting: www.jbmh.com

Credit Card Information

- Visa MasterCard American Express

Card Number _____

Expiry Date _____

Signature _____

Charitable Registration Number: 10271 4151 RR0001



Please send your donation to: Joseph Brant Memorial Hospital Foundation, 1230 North Shore Blvd., Burlington, ON L7S 1W7

Thank You for supporting Joseph Brant Memorial Hospital Foundation!

Crystal Ball raised over \$295,000 for Joseph Brant Memorial Hospital

The Joseph Brant Memorial Hospital Foundation's 12th Annual Crystal Ball on May 26th was a tremendous success! The flagship Mercedes-Benz Burlington dealership provided a modern and elegant venue for the gala that raised over \$295,000 which will go directly towards supporting our hospital's most critical needs. The proceeds from this year's Crystal Ball will ensure that JBMH can continue to care for the needs of every patient – not only today, but for years to come.

NEW BEGINNINGS
AT THE 12TH ANNUAL
Crystal Ball



Thank you!

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