

# Annual Report 2013-2014

Welcome to our 2013-2014 Annual Report

## Contents

- Annual Report 2013-2014..... 1
  - Welcome to our 2013-2014 Annual Report..... 1
- Opening Message..... 2
- Our Stories ..... 3
  - ON THE COVER..... 3
  - A NEW FACILITY, A NEW PERSPECTIVE, A NEW BEGINNING ..... 4
  - FROM THREE DAYS TO 23 HOURS: ST. JOSEPH’S SHORTENS HOSPITAL STAY FOR PROSTATE CANCER SURGERY PATIENTS..... 7
  - ENHANCING CARE FOR BREAST CARE PATIENTS ..... 9
  - LEARNING TO LIVE IN THE MOMENT ..... 11
  - THE BEST DAY OF THE WEEK..... 13
  - CREATIVE DIVERSIONS BRING CALM ..... 14
  - CARE WITHIN REACH..... 16
  - LEADING WITH PASSION ..... 18
  - RECOVERY IN SIGHT ..... 20
- Treasurer’s Report ..... 23
- Quality and Performance Report ..... 26
- Report on Mission, Spiritual Care and Health Care Ethics..... 27
- Timeline..... 28
- Board of Directors..... 30

## Opening Message

Welcome to St. Joseph's Annual Report to the Community. We hope you will read the stories of our patients and residents in this report and be inspired by their incredible journeys of care and recovery at St. Joseph's. Their stories speak to our commitment to earning the complete confidence of those we serve.

Thank you for your interest and for helping us make a lasting difference.

**Dr. Gillian Kernaghan**

President & CEO

**Margaret McLaughlin**

Chair, Board of Directors



## Our Stories

### ON THE COVER



[Parkwood.](#)

St. Joseph's Parkwood Hospital is one of few hospitals in North America using an intensive new therapy that is having tremendous results in helping people with a spinal cord or acquired brain injury regain lower body strength and, in some cases, even walk again. The Locomotor Training (LT) program uses a body weight support treadmill (BWST) which has a harness that holds the patient upright so therapists can move the patient's limbs. The LT program works on the premise that the nervous system has plasticity and with facilitation of the right movements at a certain level of intensity the brain and nervous system will re-learn how to walk.

The next phase in the LT program is now poised to launch with the introduction of the Lokomat – a robotic system that automatically moves the patient's legs while he or she is on the treadmill. This system is less labour intensive for therapists and can be offered to a wider variety of patients with more severe injuries.

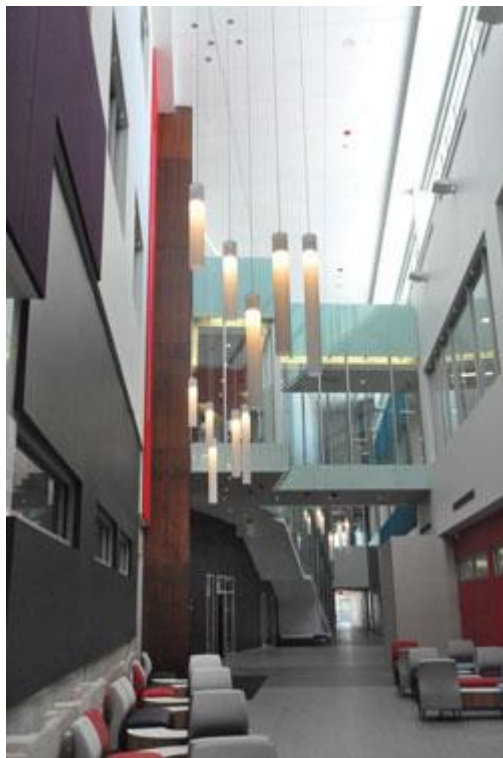
The LT program is just one innovation in rehabilitation at Parkwood that is improving health and instilling hope for those recovering from injury. Find more information on [rehabilitation at](#)

## A NEW FACILITY, A NEW PERSPECTIVE, A NEW BEGINNING

**In June 2013, St. Joseph's closed Regional Mental Health Care St. Thomas and celebrated the grand opening of Southwest Centre for Forensic Mental Health Care.**

The opening of St. Joseph's new Southwest Centre for Forensic Mental Health Care is a pivotal turning point in a long history of mental health care excellence in Elgin County. It represents a tangible marker of growth and achievement, and is a testament to the planning, collaboration and dedication of all those involved in mental health transformation.

This new facility means many things: a space that encourages and facilitates recovery, a sense of community and belonging, and the beginning of a new era of care, says psychiatrist Dr. Craig Beach, Physician Leader, St. Joseph's Forensic Psychiatry Program. "With 233,640-square-feet of contemporary, therapeutic space, the Southwest Centre will make a marked difference in the lives of patients, families and care providers."



*'Downtown' area of the new Southwest Centre*

As a provincial resource, the Southwest Centre provides comprehensive inpatient and outpatient services including: assessment; treatment; outreach; and support to individuals who have a mental illness who have come into contact with the criminal justice system.

"It's a centre that's designed not just to treat mental health issues but to promote healing and recovery so patients can successfully return to their communities," said Premier Kathleen Wynne during the opening ceremony on June 14, 2013. "The centre represents a new perspective on patient care, one that's driven by compassion, respect and hope."

As patients progress in their recovery, they journey through the specially-designed facility—balancing privacy, observation, security and safety, says Dr. Beach. Spaces in the downtown area encourage social interaction and community; areas in the neighborhood promote education and skill building; and the house provides living spaces where privacy and dignity are valued. The building was designed with an abundance of natural light and calming colour

palettes, all helping to facilitate recovery-oriented environments for patients and a welcoming atmosphere for families and visitors.

This vision of care and recovery "has been studied, started, stopped, re-shaped and re-started for more than 30 years," said Dr. Gillian Kergnahan, St. Joseph's President and CEO, at the long-awaited opening. "Now, together, we can truly say, this is the time for mental health care and today marks a major destination point on this journey."

During the grand opening, nearly 1,000 people came to see the new facility and take a guided tour, which provided visitors with a unique opportunity to learn about the building's innovative design and the Forensic Psychiatry Program.



*The opening in June 2013 of St. Joseph's Health Care London's new Southwest Centre for Forensic Mental Health Care in Central Elgin was attended by many dignitaries and nearly 1,000 others who came for tours.*

“The Southwest Centre for Forensic Mental Health Care will truly be a place where hope grows and recovery is possible, giving individuals the skills and confidence to return to successful community living,” says Dr. Beach.

But it's former forensic patient Brett Batten who best describes what Southwest Centre means for the future of forensic mental health care throughout the region.

“When I see this building I am convinced that the individuals who will pass through here will be cared for on many levels. I hope these surroundings remind them that they are not abandoned or forgotten. When I see this building I know my community cares about mental illness. When I see this building I know society has compassion.”

Stop the Stigma, Know the Facts

**Skewed public perceptions of mental illness and what a verdict of ‘not criminally responsible’ really means create unfair obstacles for those needing care.**

St. Joseph's new Southwest Centre for Forensic Mental Health Care provides care for individuals who have a serious mental illness and, as a result, have come into conflict with the law. Patients within a forensic mental health facility have been declared either “unfit to stand trial” or have been found “not criminally responsible” for the crime they have committed on account of a mental disorder.

The term “not criminally responsible,” or NCR is a court verdict stating that, at the time an individual committed an illegal act, he or she was suffering from symptoms of a serious mental illness rendering the individual incapable of appreciating the nature, quality and consequences of the act or of knowing that it was wrong.

When a person is found NCR, he or she is then placed under the disposition of the Ontario Review Board (ORB) and often times ordered to a forensic mental health facility such as St. Joseph's Southwest Centre.

Dr. Craig Beach, Physician Leader of St. Joseph's Forensic Psychiatry Program explains: “If an accused is deemed NCR, he or she is in need of mental health care. It would be inappropriate to imprison the individual because the individual is not guilty of committing a crime.”

It is important to know, adds Dr. Beach, “that most people suffering from a mental illness will never come into contact with the law, and that the vast majority NCR patients have been involved in less serious/non-violent acts as opposed to more serious incidents.”

Patients receiving care and treatment for a mental illness within a forensic facility are often subject to the double stigma of both having a mental illness and coming into conflict with the judicial system. This sheds a further negative shadow on those seeking treatment, which Dr. Beach knows all too well is the result of inaccurate public perceptions.

“Unfortunately, the media has focused on and sensationalized a number of high-profile NCR cases, painting a skewed and inaccurate picture of the relationship between violence and mental illness,” says Dr. Beach. “This further heightens the stigma, which presents another obstacle for people seeking the mental health treatment they need and deserve.”

At St. Joseph’s Southwest Centre, care teams have the day-to-day opportunity to help, and advocate for, some of society’s most vulnerable, marginalized and stigmatized individuals, explains Dr. Beach.

“Through intensive work with our care teams, patients are able to develop the skills and supports needed to successfully reintegrate back into their communities, managing their illness and returning to a full and meaningful life.”

## FROM THREE DAYS TO 23 HOURS: ST. JOSEPH'S SHORTENS HOSPITAL STAY FOR PROSTATE CANCER SURGERY PATIENTS

Twenty years ago patients needing prostate cancer surgery faced a two-week stay in hospital. Today some patients at St. Joseph's Hospital in London are home within 23 hours, and doing well.

In a trial believed to be the first of its kind in Canada, renowned urologist Dr. Stephen Pautler has successfully reduced the length of stay for robot assisted radical prostatectomy (RARP) patients from the current standard of three days to 23 hours, with outpatient surgery being the ultimate goal.

The RARP is a procedure performed using the latest robotic da Vinci Surgical System, a unique platform that allows instruments to be inserted and manipulated through small incision sites, and involves removal of a cancerous prostate gland.



*During surgery, urologist Dr. Stephen Pautler sits at the da Vinci Surgical System's master control station to manipulate the surgical tools attached to robotic arms. Here, he can see three-dimensional, high-definition live images from inside the patient.*

“By performing this surgery robotically, carefully selecting candidates based on their physical fitness and following a specific recovery plan, we have safely discharged patients home sooner than ever before,” says Dr. Pautler. “Patients prefer to recover in the comfort of their own home and with the right support and physiotherapy our patients are having successful outcomes.”

Development of this new process was a collaborative effort among St. Joseph's care team and includes support in the home after surgery through Community Care Access Centre (CCAC).

Long-haul truck driver Jack Caris was back behind the wheel within three weeks of his surgery at St. Joseph's and well enough to take a trip to Europe with his wife soon after.

“I hardly had any pain at all,” says Jack. “I had a friend who was diagnosed with prostate cancer around the same time as I was and he had open surgery instead of robotic surgery and it took him eight weeks to recover.”





*Rose Caris was concerned about caring for her husband so soon after surgery. But with support from Community Care Access Centre (CCAC) and coaching from the St. Joseph's care team, Jack's recovery went smoothly.*

Back on the road and enjoying life, Jack is grateful for the “awesome” care he received from Dr. Pautler, St. Joseph's staff, and the CCAC. At first, his wife Rose was worried about the short hospital stay but with coaching from the St. Joseph's care team and CCAC support, Jack's recovery went smoothly.

“I was concerned when Dr. Pautler said Jack would be home the next day because I knew he would have a catheter for two weeks and I didn't know how to care for him. Everyone at St. Joseph's was very kind and explained everything to us really well, and the CCAC was very supportive.”



## ENHANCING CARE FOR BREAST CARE PATIENTS

It's a designer gown that will never make it to the runway but is a big hit at St. Joseph's Hospital. Inspired by patients and staff, the fine details are dignity, comfort and versatility, making this one-of-a-kind hospital gown haute couture in the Norton Lucille Wolf Breast Care Centre.



*Members of the Breast Care Program team at St. Joseph's Hospital model the new gowns designed specifically for breast care patients.*

The new hospital gown, made specifically for breast care patients, was a collaborative effort of St. Joseph's Health Care London and London Hospital Linen Service (LHLS). After looking at existing products and finding they didn't fit the needs of both patients and the hospital, the two organizations sat down at the drawing board. The goal was a one-size-fits-all gown that was comfortable, respectful and user friendly for patients, functional for both surgery consults and breast imaging, and could hold up to repeated laundering without increasing the hospital's laundering costs.

After months of testing various prototypes and gathering feedback from staff and patients, the final concept went into production. Designed to be worn two different ways to accommodate both mammography and ultrasound scans as well as exams by surgeons, the new gowns are now in use, says Howard Hansford, Site Leader, Diagnostic Imaging Centre at St. Joseph's.

LHLS, which donated much time and expertise on the project and worked with Lac-Mac Ltd. in London to manufacture the gown, "was exceptionally attentive and responsive to our patient needs," adds Howard. "There were many tweaks over several months."

The bathrobe-style gowns are thicker than the usual hospital garb, explains Pauline Bessegato, Coordinator, breast surgery. "Denim blue in colour with a pink trim, they are also much more attractive and add a spa-like touch for patients who may be feeling stressed and anxious."

"St. Joseph's has always been a key partner of LHLS and we want to help the hospital in its mission of care," says Brendan O'Neill, Manager, Corporate Development, LHLS. "It was such a great opportunity for us to work with patients and staff and produce something that we could potentially bring to all our customers."

About 560 gowns are used at the Norton and Lucille Wolf Breast Care Centre each week. LHLS is hoping to add the innovative design to its product line so that it's available to hospitals across Southwestern Ontario. Adorned with patient-centred care, the custom gowns may well become a classic.

## Planting Seeds, Improving Breast Care

The planting of tiny seeds is sprouting some big results for breast care patients at St. Joseph's Hospital. The radioactive seeds, which have very low radioactivity, are reducing the wait for breast cancer surgery.

Before breast care patients undergo surgery for a biopsy or to remove a tumor, a radiologist locates the tumor so that the surgeon knows exactly where to operate, explains Dr. Anat Kornecki, Medical Director, Breast Imaging, St. Joseph's Breast Care Program. "Traditionally, this has been done by marking the spot with a wire that is inserted into the breast. Patients must have the wire localization done the same day as the surgery or the afternoon prior and surgeries have to be carefully scheduled around this procedure."

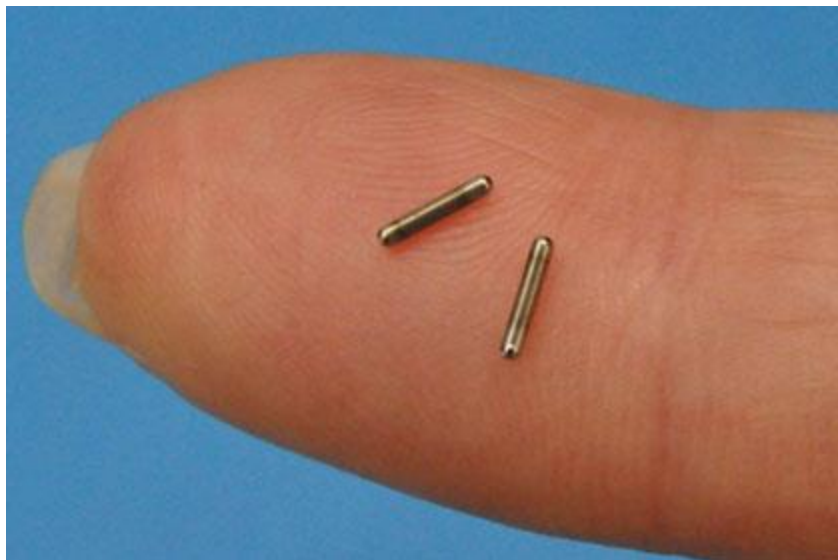
In fall 2013, the Breast Care Program began trialing the use of radioactive seeds called I-125 seeds. These tiny seeds, no bigger than a caraway seed, replace the wire. The amount of radiation absorbed by each patient from the radioactive seeds is less than what is in their environment (e.g. soil, atmosphere).

"The tiny capsules contain a small amount of radioactive material and can be implanted up to two weeks in advance of the surgery," says breast surgeon Dr. Leslie Scott. "This allows for greater flexibility in scheduling surgeries and therefore increased access for breast cancer patients. During the operation, the surgeon locates the seed using a hand held probe."

With the success of the pilot, the seeds are now being used by five of the six breast surgeons and about 85 per cent of patients undergoing a biopsy or breast cancer surgery. It's hoped the use of the seeds will be expanded further.

At the same time, St. Joseph's has begun using a "digital specimen radiography system" in the operating room, says Dr. Kornecki.

The system is a type of digital x-ray machine used to image the specimen to see whether the edges of the biopsy are visibly clear of the cancer. With the system located in the operating room, specimens can now be imaged on the spot, eliminating the need to bring them to radiology. This also enhances efficiency and contributes to improved access and shorter wait times for patients.



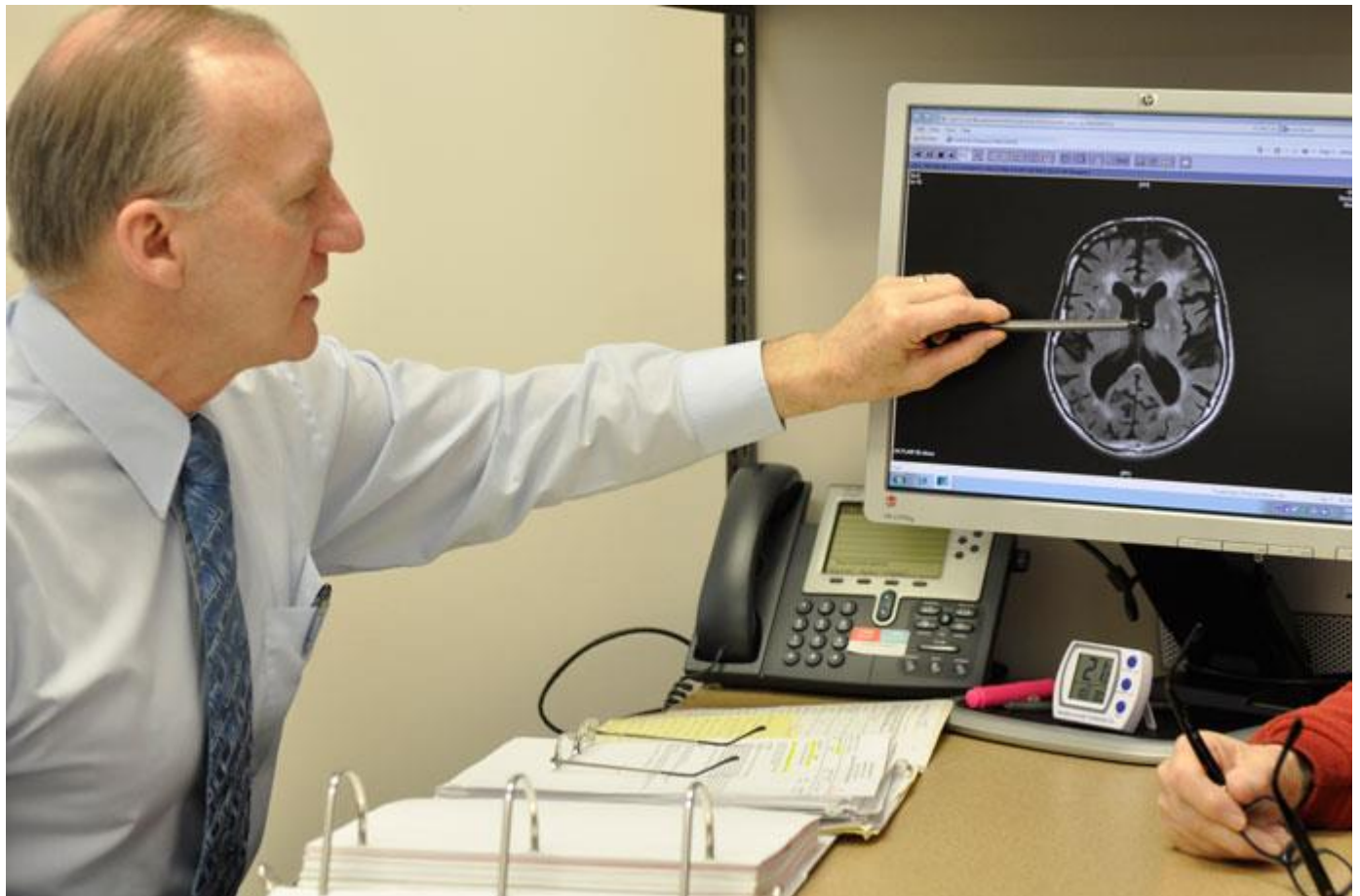
*This photo is of unused, unsterilized seeds radioactive seeds, called I-125 seeds.*

## LEARNING TO LIVE IN THE MOMENT

**St. Joseph's Centre for Cognitive Vitality and Brain Health takes a collaborative approach to care.**

A few years ago at age 70, Joel Glynn found himself forgetting birthdays, his grandkids names and eventually even conversations he'd had only that morning. "I'd remember that I'd had a discussion," he says, "but ask me what was talked about during that conversation and I couldn't tell you."

Joel and his wife Barbara realized it wasn't the usual forgetfulness that comes with aging. He was referred to the Aging Brain and Memory Clinic at St. Joseph's Parkwood Hospital for cognitive testing, where he was diagnosed with an early form of Alzheimer's disease. Geriatrician Dr. Michael Borrie explained what was happening, what the future might hold and prescribed medication intended to help stabilize his memory for as long as possible. But something else caught Dr. Borrie's attention that also required treatment—Joel was suffering from depression brought on by his memory loss.



*With his colleagues at the Centre for Cognitive Vitality and Brain Health, Parkwood Hospital geriatrician Dr. Michael Borrie is playing a key role to advance dementia care and research.*

The struggle with concentration and following conversations was particularly upsetting for the Londoner, causing him to withdraw. Joel was shutting down. "He was sleeping an awful lot and he wasn't himself," says Barbara. "It's hard for my husband to accept that he'll never get better ... that there's no cure for Alzheimer's."

Dr. Borrie referred Joel to his colleague, Dr. Amer Burhan, a geriatric neuropsychiatrist in the neuropsychiatry clinic at St. Joseph's Regional Mental Health Care London.



“Without treating depression, dementia can be a double whammy for individuals with memory difficulties,” says Dr. Burhan. “Being able to function, to enjoy what you do have despite the forgetfulness, is key. Not being able to remember is hard enough, but depression robs people of the opportunity to enjoy what they can recall.”



*Geriatric neuropsychiatrist Dr. Amer Burhan displays the transcranial magnetic stimulation equipment at St. Joseph's Regional Mental Health Care London.*

With the support of friends and family, Joel is learning to accept and manage his disease and is focusing on living in the moment, one day at a time. He is also helping to advance research, having participated in a study looking at the potential of transcranial magnetic stimulation to enhance brain activity and improve cognitive scores.

“We can't stop Alzheimer's but, together, Dr. Borrie and I can work to optimize Joel's cognitive function, explore ways of slowing the underlying illness and improve his quality of life by treating the depression,” explains Dr. Burhan.

Through the Centre for Cognitive Vitality and Brain Health, collective efforts of clinicians and researchers from various disciplines are coming together to focus on the needs of patients experiencing the



debilitating effects of dementia, stroke, neurological injury, traumatic brain injury and mental illness.

Excited by the possibilities, Dr. Borrie says working alongside cognitive neurology specialists and neuropsychiatry experts such as Dr. Burhan “immediately enhances our assessment capabilities, giving patients and caregivers a much better sense of the condition, its progression, and thereby, our response to it.”

*By working together, experts at St. Joseph's Parkwood Hospital and*

*Regional Mental Health Care London were able to help Joel Glynn by treating his memory loss and the depression that accompanied it, allowing him and his wife, Barbara, to enjoy life one day at a time.*

## THE BEST DAY OF THE WEEK

**For Cory, cooking has been an important part of his recovery from mental illness.**

A delicious aroma is filling the house on Steele Street, drawing its occupants into the newly renovated kitchen where Cory, who has recently discovered his passion for cooking and baking, is preparing a meal, excited to serve up the latest recipe to his house mates.

It's Monday at St. Joseph's St. Steele Street Rehabilitation Residence in St. Thomas, where Cory is one of nine people living and receiving mental health rehabilitation therapy. And it's his night to cook dinner

"Monday is my favorite day," he says with a grin. "I like cooking and baking for my house mates – it puts a smile on people's faces. Before I came to Steele Street, I didn't even realize I was good at it. It has really helped me to build self-esteem and confidence."

Cory, 26, has been in and out of hospital since age 21, struggling with the difficulties of managing both a mental illness and an addiction to alcohol. The seven months he has spent at the group home, however, have already made a huge difference in his rehabilitation and recovery.

Through the Illness Management Recovery Program at the residence, Cory is learning tools and building skills he'll need when he gets back out on his own and living independently in the community.

"It's not just the cooking abilities that I'm discovering," says Cory. "I'm finding myself here. I'm learning communication skills I didn't have—how to be social, how to feel civilized. I couldn't even speak at family functions before, not unless it was a one-on-one conversation."



*One of nine residents at St. Joseph's Steele Street rehabilitation residence, Cory is learning about himself, his talents and abilities on his road to recovery—including some impressive skills in the kitchen.*

Now he's a full and willing participant in the daily and weekly activities at the group home. "Cory has made leaps and bounds in his journey here," says occupational therapist, Jackie McAdams. "I love to watch him in the kitchen, giving cooking tips to the others and collaborating on new recipes to try. He's found a special talent."

Cory stresses that there are many important factors to recovery, including support systems, the proper medication and asking questions. "If you don't ask questions, you won't get the answers. You've got to want to know your sickness. If you don't know what you're suffering from, then how can you recover?"

One thing he looks forward to most is using the many skills and tools learned at Steele Street to build on relationships with his family members—sharing a meal, sharing conversation, sharing support.

"I've made it my goal, when I have my own place, to have my grandmother over and my dad, my sister, my mom, put on a good meal for them and talk and say 'Listen, this is how I'm doing.'"

## CREATIVE DIVERSIONS BRING CALM

**What started as a research project has come to mean so much more to Nina Walchyshyn.**

Through a St. Joseph's President's Grant for Innovation, Veterans Arts at Parkwood Hospital offered art classes, called Creative Diversions, to clients from Parkwood's Operational Stress Injury Clinic (OSIC). The OSIC provides specialized mental health services to individuals with psychological injuries related to traumatic events in their military service.

"With international studies showing that making art can help to alleviate psychological trauma for veterans, through this grant we hoped to help clients express positive feelings and difficult emotions, and gain insight into their OSI symptoms," explains Ann Pigott, Veterans Arts Coordinator.

For Nina participating in the Creative Diversions classes had a profound impact on her life. A veteran of the Canadian Forces Nina, 55, says, "Making art is like a panacea for your mind – it's the emotional canvas we paint our lives on."

The students found the classes a way to get together and feel safe. "When we first started the classes, many of us had to leave the room every 15 minutes or so to relieve our anxiety," Nina explains. "But as we grew more comfortable with others in our class and with the instructors, we began to let our guard down and just be ourselves. These art classes were a life saver for many of us because they broke the bonds that were keeping us isolated physically and in our mind."

Two Creative Diversions sessions were offered, with each session offering two-hour classes once a week for eight weeks. With participation open to all OSIC clients, the students came with a broad range of military experience and ages ranging from the those recently returning from Afghanistan, to veterans in their 80s.

"Making art helped me go into a calm, quiet place in my head, and to come out feeling refreshed and relaxed with a different perspective on life," says Nina.

The students could choose to work alone or in a group, and the art medium they wanted to work in – from ceramics, to painting, to sculpting.

An evaluation showed the Creative Diversions classes exceeded most participants' expectations, supported social interaction in a comfortable environment, and encouraged creative self-expression.

"Through this program I discovered I have this innate ability with art," says Nina. Since completing the

Veterans Arts program she has painted two canvasses and has an idea for another sculpture.



"Art is what I do now – it is a very important and necessary part of my healing and my life."

*Nina, left, creating a sculpture with Veterans Arts instructors Kevin Curtis-Norcross and Bev McNaughton, says, "The instructors treated us with great respect, sympathy and empathy."*

## Funding Innovation

The President's Grants for Innovation, established in 2011 by Dr. Gillian Kernaghan, President and CEO of St. Joseph's, are available to all front line staff, volunteers and professional staff for an innovative idea that will improve quality. Twice a year, all are invited to present their ideas to a panel – a kinder and gentler version of Dragon's Den. Up to \$10,000 in one time funding is awarded to successful submissions.

To date, 20 innovative ideas have been awarded funding to help make creative concepts a reality, including the Creative Diversions project. In 2013-2014, four projects were chosen to receive funding. They include:

- **Interactive learning:** Creation of simulation experiences for mental health staff that are designed to enhance the skills needed to fully engage in the recovery model of hope.
- **Early detection, better care:** Implementation of a project that will trial electronic motion analysis (actigraphy) to measure behavioural symptoms, particularly agitation in dementia, in a more efficient, accurate, detailed, and objective way. The goal is better clinical outcomes through early detection and management, including reducing the risk of falls and aggression.
- **Screening for osteoporosis:** Creation of a post-fracture clinic at St. Joseph's Hospital aimed at improving detection of osteoporosis. All individuals over age 50 treated at a hospital in London for a non-traumatic fracture will be referred to the clinic, assessed for osteoporosis, educated about bone health, and prescribed appropriate care. Currently, only about 15 per cent of people with osteoporosis who have had a fracture get the treatment they need to prevent the often significant consequences of the disease.
- **Education at the click of a mouse:** Creation of an extensive, central educational e-resource for those living with acquired brain injury (ABI) and health care providers working with these individuals.



## CARE WITHIN REACH

### **Parkwood Hospital's operational stress injury service is now available in the Toronto area.**

St. Joseph's Parkwood Hospital has mobilized to make it easier for veterans and active members of Canadian Armed Forces to reach the help they need for operational stress injuries.

The Operational Stress Injury (OSI) Clinic at Parkwood treats those struggling with post-traumatic stress disorder, anxiety, depression and addiction resulting from military service. The clinic's vast catchment area stretches from Windsor to Pickering and north to the Owen Sound area. Within this area, many referrals are generated from the Greater Toronto Area (GTA).

To increase accessibility and reduce the number of 200 km treks people were making to London from the GTA, OSI outreach services were established in Toronto in 2011 by Parkwood psychologists Maya Roth and Alexandra McIntyre-Smith.

"When we first started in the GTA, we felt like two soldiers parachuting into unknown territory, but with tremendous support from the OSI Clinic at Parkwood and our partners at Veterans Affairs Canada (VAC), we quickly rolled into action," says Maya.

Potential clients are assessed in the GTA to determine whether the OSI Clinic's services are right for them. If clients would benefit from these services, psychological treatment is provided in the GTA and clients access additional OSI services at Parkwood, such as psychiatry, group treatment and family services.

Maya and Alexandra, in partnership with the VAC office at Sunnybrook Health Sciences Centre, provide psychotherapy and assessment services to veterans at Sunnybrook. They also provide assessment and treatment to veterans and still-serving soldiers out of the VAC District Offices in Mississauga and Scarborough. The OSI Clinic works closely with VAC in London, Toronto, and across the remainder of its catchment area, as well as with the Canadian Forces, the Royal Canadian Mounted Police and community resources to ensure clients and their families have access to the right programs, services and supports.



*Psychologists Maya Roth and Alexandra McIntyre Smith from the Operational Stress Injury Clinic at St. Joseph's Parkwood Hospital serve the Toronto area as part of an outreach service.*

Periodically, Maya and Alexandra return to the Parkwood OSI Clinic. “Even though we connect regularly with London by videoconference to consult on clients, it’s beneficial to meet face-to-face to stay connected with the London team,” says Alexandra.

Pleased with the success of the outreach efforts in the GTA, the Operational Stress Injury National Network recently leveraged the expertise of Maya and Alexandra to develop a similar outreach clinic in Halifax, Nova Scotia.

Recovery in Hand

**A new mobile app is also improving access to care.**

A new mobile application launched June 18, 2013 puts support at the fingertips of Canada’s veterans and members of the Canadian Armed Forces and the RCMP who have operational stress injuries (OSIs). OSIs include post-traumatic stress disorder, anxiety, depression, and substance abuse resulting from combat, high stress or operational fatigue.

OSI Clinics across Canada, including the clinic at Parkwood Hospital, worked with the Royal Ottawa Mental Health Centre to create the app, called OSI Connect, with funding from Veterans Affairs Canada. The new app combines mobile learning and self-management to help clients, potential clients, and their families understand the nature of OSIs, and how to get help through the national OSI Clinic network. The goal is to put recovery within easier reach.

OSI Connect is also a resource for professionals – including physicians, nurses, psychologists, psychiatrists, teachers, social workers and community workers at detox centres and homeless shelters – to help them identify individuals with an OSI. It is available from iTunes, Blackberry and Android app stores.

## LEADING WITH PASSION

### **Two awards highlight a dedication to excellence**

*Every year, St. Joseph's Health Care London presents the President's Awards for Leadership to individuals who have made extraordinary efforts to advance the mission, culture and performance of the organization. Here, St. Joseph's celebrates the exceptional dedication of the 2013 recipients:*

**The Aspiring Leader Award** recognizes an individual who has shown significant skill development, has recently risen to the challenges of a leadership role or activity, and has demonstrated outstanding leadership qualities and contributions to the organization. The 2013 recipient is Colleen Hardy, a nurse in the Veterans Care Program at Parkwood Hospital.



*Dr. Gillian Kernaghan, left, President and CEO of St. Joseph's Health Care London, presents the Aspiring Leader award to Parkwood Hospital nurse Colleen Hardy.*

Respected by colleagues, patients and families alike, Colleen's broad skill set make a real difference to patient care. An infection safety champion, she has been instrumental in significant gains by her team in various practices. She is also an effective coach for fellow nurses, promoting best practice guidelines and new approaches to care that improve the resident experience and overall well-being.

This dedicated nurse leads by example, say colleagues. Her positive attitude, humour, resilience, flexibility, and respect for the contributions and expertise of team members make her a standout. At the same time, families and residents appreciate Colleen's calm approach and how she puts them at ease. She takes the time to learn about their interests and ensures their wishes are known and honoured.

**The Leadership in Mission Award** recognizes a St. Joseph's leader who has made extraordinary efforts to exemplify and advance St. Joseph's roles and values as a Catholic, academic and community-oriented health care provider. The 2013 recipient is Dr. Mohan Merchea, Medical Director and surgeon in the Cataract Suite at the Ivey Eye Institute, and member of St. Joseph's Board of Directors.

Dr. Merchea is known for his compassion, honesty and positive attitude in good times and in challenging times. He was instrumental in leading a team of dedicated ophthalmologists and staff during a time of significant change in health system funding. Cataract surgery was one of the first procedures impacted by the province's new "quality-based funding" approach. While maintaining a commitment to safety and excellence, Dr. Merchea worked with the cataract team to analyze data and compare surgical practices to find efficiencies. Through this work, instrumentation, supplies and pharmaceuticals used in cataract surgery were standardized, which led to achieving the cost per cataract case target.



*Dr. Mohan Merchea is presented with the Leadership in Mission Award from Karen Perkin, left, Vice President, Acute and Ambulatory, Professional Practice and Chief Nurse Executive, and Michelle Mahood, Director, Ambulatory Surgery Services.*

Always going above and beyond, Dr. Merchea's professionalism, passion and respectful, collegial approach contribute to an environment where physicians and staff feel empowered and hopeful as they work together to meet the changes and complexities of our health care system, say colleagues. He models what it takes to continue to grow and improve as health care evolves.

## RECOVERY IN SIGHT

**St. Joseph's Parkwood Hospital is the first Canadian hospital using a new tool to improve vision in those with acquired brain injury.**

Nascar drivers use it. So do police tactical units. Now St. Joseph's Parkwood Hospital does too, becoming the first hospital in Canada to take this step.

It's called the Vision Coach—a novel piece of equipment that can sharpen visual skills. At Parkwood, it's the latest tool being used by therapists working with patients recovering from brain injury and stroke.

Vision Coach is a state-of-the-art interactive light board that helps patients practice eye movements and hand/eye coordination. The height of the board, visual stimulus and complexity of tasks are tailored to meet each patient's needs. The system is designed to enhance visual function, muscular coordination and neuromotor abilities.

William Lunn, 27, finds Vision Coach is improving his peripheral vision. In 2011 he suddenly passed out at work. After other near-collapses and a battery of tests, he learned he had hit the tipping point from the many concussions he sustained through years playing contact sports like hockey and football.

"I can't walk well and have headaches, but one of my most unusual symptoms is that everything I look at is shaking," he says.

Vision problems for those with neurological injuries go beyond the ability to see clearly because meaning is derived through vision. For many patients, improving visual function substantially enhances quality of life.

To help with his vision William trains regularly on the Vision Coach. Occupational therapist Nicole McLean programs the equipment specifically for him.

"Vision Coach collects data on patients so we can accurately track their visual progress and help them set goals," Nicole explains.

At the same time, she adds, patients have fun using this new technology, which replaces less sophisticated exercises such as visually scanning for sticky notes with numbers and letters scattered on a wall.

### **Giving with Impact**

Patients in the BrainEx 90 therapy group are among those benefitting from the Vision Coach equipment. With growing demand for mild traumatic brain injury rehabilitation at Parkwood Hospital, a group treatment approach was developed to reduce the waiting list and improve access to care. A grant from the St. Joseph's Health Care Foundation was key to this model.

The grant supported the purchase of mobile computers (tablets) for staff and a tool to efficiently assess patients, called BrainFX. BrainFX enables patients to complete a web-based questionnaire prior to their first appointment. They then undergo an assessment onsite with a therapist. The web-based and clinical assessment data are combined and a report is sent out to the therapy team highlighting areas to work on during the treatment sessions. The BrainFX report also serves as a foundation for research on treatment outcomes.



*Occupational therapist Nicole McLean observes William Lunn's progress as he practices vision exercises by staring at the white dot in the centre of the Vision Coach screen while trying to touch red dots that appear randomly in his peripheral vision field.*

## **Lost and Found**

### **A special vest is dispelling a lost-in-space sensation for patients with brain injury.**

It's an unsettling feeling of being lost in space. And with that sensation often comes the inability to judge distances, along with much anxiety. For those with mild traumatic brain injury (mTBI), it can be a crippling problem complicating the road to recovery.

"We think this is because some patients have difficulty sensing where their body is in space and they have to work hard to negotiate their environment," explains physiotherapist Shannon McGuire from the Acquired Brain Injury (ABI) Rehabilitation Program at St. Joseph's Parkwood Hospital. "They become overwhelmed and anxious because their brain is having trouble processing sensory information."

Now at Parkwood, therapists are trying something new. A specially designed vest that combines weights and compression is helping patients with an mTBI know where their body is in space and find balance. It is also easing anxiety, reducing fatigue, improving attention and concentration, and diminishing overstimulation in busy environments.

Not only are Parkwood therapists forerunners in exploring the effectiveness of these vests, they have also enhanced the vests currently on the market by improving the fit and adding weights.

Linda DeGroot, a patient with mTBI, felt an immediate transformation when she put on the vest. "It was the first time I'd felt secure since sustaining the mTBI," says Linda, a teacher who suffered a concussion when she hit her head on the ice while playing hockey.

When Linda first came to Parkwood, she was experiencing tremendous levels of anxiety. As a result of her concussion she couldn't drive, go to work, attend church or do many of the things she loved. For a woman used to being independent, Linda was suddenly very dependent on others.

After brainstorming various treatments for Linda, Shannon and her colleagues came up with the idea of using a compression vest.



“The vest fits snugly to the body—it feels like it’s giving you a big hug,” explains Shannon. “We believe the weight combined with compression helps patients feel more grounded.”

At first, Linda wore the vest whenever she left the house, but she has progressed so well that now she only wears it when in situations with a lot of new stimuli. After seeing her success with the compression vest, the ABI outpatient team began introducing it to other patients with similar results.

In collaboration with physiotherapy students at Western University, Shannon conducted a pilot study on the clinical impact of the compression vests for patients with an mTBI and is now extending that research to gauge the impact of adding weight to the vest.



*Wearing a weighted compression vest, Linda DeGroot, right, practices her balance with the help of Parkwood Hospital physiotherapist Shannon McGuire.*



## Treasurer's Report

### **Our Transformation and Infrastructure 'Finish Line' is in Sight; Planning for the Future Continues**

With 15 years of acute care program transformation behind us, 2013/14 was a year focused on our continued transformation in specialized mental health care, as well planning for the next phase of change for the veterans care program, in response to the decline of the veteran population requiring inpatient, long term hospital care.

With much excitement we opened and occupied the new Southwest Centre for Forensic Mental Health Care (Southwest Centre), located in St. Thomas, in June 2013. The Province of Ontario through the Ministry of Health funded the majority of the \$153.7 million cost, with the hospital also contributing our local share according to terms of the agreement. There were immediate positive impacts for patients as they moved in to private rooms with private washrooms, and an overall environment that truly uplifts and fosters dignity and healing. After a few system glitches were addressed, staff too have expressed their accolades for the facility and much-improved working conditions.

The last of four planned Tier II transfers in mental health care (since 2010/11) was also completed with the transfer of 14 inpatient beds and related services to St. Thomas Elgin General Hospital in January 2014.

With our partners at Veterans Affairs Canada, we prepared for the second phase of program changes, which was the reduction of 20 inpatient care beds, completed on April 1, 2014.

Facilities construction remained a very visible area of focus this year. Construction at St. Joseph's Hospital, a three-year project transforming the front façade with full accessibility features and new research and administrative spaces, will be completed in January 2015. Known as Milestone 2, Phase 3, this project was most noted this year with EllisDon's pink crane garnering considerable public attention not only for the building, but for St. Joseph's Breast Care Program. As part of the planned completion, we look forward to re-opening the Chapel, carefully protected during construction, along with re-introducing this site to our community.

Equally noticed and much anticipated is our new specialized mental health care building set to open this November, on the same site as Parkwood Hospital in south London. As with the Southwest Centre, this facility and its accompanying outpatient and community teams, will mark the long coming shift in our mental health care system, focusing on recovery and rehabilitation. A new vision – a new community of care, recovery and rehabilitation – is emerging as our mental health care programs join our complex care, rehabilitation and geriatric care programs in one geographic location.

The total estimated hospital or 'local share' contribution for our three major redevelopment initiatives is \$43.3 million.

### **Sound Fiscal and Service Results**

St. Joseph's financial statements have received a clean audit opinion, which is a testament to our continued focus on operational and fiscal responsibility. We ended the fiscal year with a GAAP surplus of \$10.1 million, which can be attributed to investment income of \$6.7 million and \$3.4 million of one-time unplanned revenues. The favourable performance in investment income reflects the great gains we have witnessed this year in the financial markets. St. Joseph's does not rely on investment income to support or fund hospital operating budgets in any way but rather uses this money to reinvest in strategic capital needs such as major repairs to unfunded building infrastructure needs, advancing with the Enabling Technology plan and investment in other strategic capital needs.

The majority of the one-time funding relates to Post Construction Operating Plan (PCOP) funding for Mental Health Care that was announced in the last month of our fiscal year. We have been advocating for

this funding with the Ministry of Health for some time now. This was done to align with the opening of the new Southwest Centre due to the increased capacity that was created through construction to address the high demand we are seeing for forensic psychiatry services. The funding is also one key component in our plan to open nine new, currently empty beds, in the new Southwest Centre. The related base funding of this announcement will allow us to open four new inpatient beds during the coming fiscal year and based on the provincial PCOP funding process and time lines, we hope to open the remaining five beds as soon as the government process permits.

It is also noted that the operating results include \$2.5 million of unfunded costs for restructuring. However, these costs have been funded by a favourable result from “normal hospital operations” of an equal amount. This amount (\$2.5 million) represents 0.6% of the total hospital budget of \$432 million. This is a remarkable achievement, considering that this result was achieved during another year of transformational change amid the continuation of hospital funding reform.

St. Joseph’s working capital ratio remains healthy at 1.7:1 and well within the guidelines in the Hospital Services Accountability Agreement with the South West Local Health Integration Network. For hospitals, a healthy working capital position allows for the restriction of funds in support of reinvestment and renewal of facilities and equipment, both in the short and long term.

St. Joseph’s restricted investments for current and future commitments remain secure and total \$192.8 million at March 31, 2014. Most of these investments are externally managed by professional firms under the stewardship of the Investment Subcommittee of the Board.

Supporting St. Joseph’s care, teaching and research mission, capital investments during the year totaled \$162.8 million. Of this total, \$146.6 million was spent on building projects and \$16.2 million on capital equipment. These expenditures were supported by \$14.0 million of internal funds and \$148.8 million in external funds, primarily through contributions from the provincial government and St. Joseph’s Health Care Foundation. The generous support of donors through the Foundation is vital to our ability to invest in the future while responding to today’s care, comfort and research needs.

All volume performance accountabilities as established in the Hospital Services Accountability Agreement between St. Joseph’s and the South West Local Health Integration Network were met. Volumes continued to decrease from prior years as a result of program transfers and divestments.

### **Our Next Steps....**

As noted earlier, the second phase of resizing Veterans Care inpatient services at Parkwood Hospital was completed in April 2014. Leaders and teams are now focused on the practice and system changes associated with the implementation of HUGO – Healthcare Undergoing Optimization and the preparation needed to ensure a successful move to the new mental health care building in November, including staff and patient orientation, logistics planning and community engagement

We continue to learn more about the future impacts of provincial Health System Funding Reform (HSFR) and at the same time, sustain rigorous budget planning processes to ensure readiness and responsiveness for both the short and longer term in a climate of continued fiscal and political uncertainty.

Funding reform of this magnitude will hold challenges for all hospitals, including St. Joseph’s. Our organization is one of only four teaching hospitals in the province impacted by all five different service modules of the Health Based Allocation Methodology. This speaks to the complexity of our enterprise and the scope of our roles in the hospital system.

The funding formulas are driving change and we have responded, particularly this past year in Complex Care, with strategies that will drive our cost structures towards the Ministry’s expected costs per case.

As was the case a year ago, it must be noted that the timeliness of Ministry funding confirmations, including volume expectations, must be improved to support the ability of all hospitals to respond while sustaining the delivery of quality, safe patient care and balanced operations.

Our work ahead includes continuously reviewing our infrastructure and administrative costs in alignment with the emerging new size and configuration of our organization post redevelopment and transformation. The last three fiscal years have demonstrated we have met the challenges of supporting the organization through complex transitions, within shrinking resources. With our hospital facility and infrastructure transformation 'finish line' in sight, St. Joseph's remains well positioned to take on a future where care, teaching and research programs are well-prepared to meet the most prevalent health care needs.

Change, economic uncertainty and growing need continue to be the backdrop for health care and indeed, all sectors of our society. St. Joseph's continues to rise to the challenges through our mission and ministry of service, rooted in strong values, a clear strategic plan, and durable fiduciary and leadership principles. All this, and the constant engagement of patients, leaders, physicians, staff, volunteers, and donors helps us to ensure a sound foundation on which we can take new innovative steps and work in partnership with others to address compelling care needs, today and tomorrow.

St. Joseph's is blessed with the support of dedicated, skilled staff and physicians, compassionate volunteers, responsive partners, and a supportive community. It is with appreciation to all that we present these financial results.

**David Van Trigt**

Treasurer, Board of Directors

**Lori Higgs**

Vice President Corporate Services and Chief Financial Officer

[Read the full audited financial statements of St. Joseph's Health Care London](#)

## Quality and Performance Report

St. Joseph's is realizing our vision of earning complete confidence in the care we provide and making a lasting difference in the quest to live fully by focusing on the quality and safety of our patient care, and the engagement of our staff and physicians.

In 2013 we focused on several key performance areas including:

- decreasing the number of patients and residents who suffer injuries from falling
- increasing influenza vaccination rates for staff and physicians
- hand hygiene compliance
- staff and physician engagement scores

## Report on Mission, Spiritual Care and Health Care Ethics

The report on mission, spiritual care and health care ethics is produced annually by St. Joseph's Health Care London for the St. Joseph's Health Care Society. Within its pages you'll find an overview of St. Joseph's 2013-14 governance and leadership activities, and highlights from the work of health care ethics and spiritual care in the past year.

[Read more about our Report on Leadership in Mission.](#)



## Timeline

The Year in Review...

A glance at some of the successes and milestones from this fiscal year.

### **April 2013**

Determined to Speak Up

At the Breakfast of Champions in April 2013, featured speaker Clara Hughes said sharing her experience with depression is more important than any Olympic medal.

### **May 2013**

Celebrating 35 Years of Excellence

Marking 35 years in May 2013, the innovative Geriatric Rehabilitation Day Hospital at Parkwood Hospital helps hundreds of frail seniors every year maintain independence and quality of life.

### **June 2013**

Restoring Hopes and Dreams

Consolidation of Cognitive Neurology and Geriatric Medicine programs at Parkwood Hospital, celebrated in June 2013, paved the way for the new Centre for Cognitive Vitality and Brain Health.

### **June 2013**

Hope and Recovery

In June 2013, a long-awaited milestone in mental health care was reached with the opening of the Southwest Centre for Forensic Mental Health Care.

### **July 2013**

Honouring Our Heroes

To commemorate the 60th anniversary of the Korean War armistice, Korean War veterans at Parkwood Hospital and members of Korean Veterans Association were honoured at special ceremony in July 2013.

### **August 2013**

Cruisin' Back in Time

Classic Car Cruise night at Mount Hope Centre for Long Term Care in August 2013 allowed residents to travel back in time, recapture special memories and reminisce.

### **September 2013**

Honouring Two of the Best

In September 2013, the Hand and Upper Limb Centre paid tribute to its visionary founders – Drs. James Roth and Robert McFarlane – becoming the Roth | McFarlane Hand and Upper Limb Centre.

### **Fall 2013**

Best in Patient Satisfaction

For the second year, patient satisfaction results for overall care in the inpatient unit at St. Joseph's Hospital was ranked the highest among Ontario's teaching hospitals.

### **October 2013**

Inspired to Give

The Wolf family's generous \$1.1 million grant to St. Joseph's Breast Care Program was recognized in October 2013 with the naming of the Norton and Lucille Wolf Breast Care Centre.

### **October 2013**

A New Era Begins

In October 2013, a 42,000 square-foot central outpatient area was officially opened at St. Joseph's Hospital representing a growing role focused on innovative chronic disease management.

### **November 2013**

A Remarkable Milestone

In November 2013, the Diabetes Education Centre celebrated 40 years of providing patients with the knowledge they need to take charge of their health and be partners in their care.

### **February 2014**

Goodbye Pink Crane

With construction of Zone A at St. Joseph's Hospital making good progress, the one-of-a-kind pink crane was dismantled in February 2014, 11 months after being installed.

### **February 2014**

World Day of the Sick

At this touching reminder of our healing mission, Bishop Ronald Fabbro anointed patients and residents at Parkwood Hospital and bestowed a special blessing on care providers.

### **March 2014**

Recovery Within Reach

Parkwood Hospital's outreach to the Toronto area makes it easier for veterans and active members of Canadian Armed Forces to get the help they need for operational stress injuries.



## Board of Directors

The St. Joseph's Board of Directors carries on a strong tradition of understanding the issues, while never losing sight of this organization's roots, values, mission and vision. Our mandate is fulfilled through a strong governance structure, advancing our capacity to use relevant, timely information, and the dedication of all those who are part of the St. Joseph's family.