

**Date:** October 2019



## Strategic Direction - Strengthen the culture of patient safety and quality care

We have heard a lot about “Hallway Medicine” and the work the Province is trying to do to reduce or eliminate it. However, one way to address it is to look at your patient flow, using predictive data and queuing theory. See a link to an article Hospital News published in their October edition on the work we are doing and the positive impact we have made

October issue

[https://issuu.com/hospitalnews/docs/v3\\_flip\\_092819\\_hospital\\_news\\_edit?fr=sNzdmODc5NDaz](https://issuu.com/hospitalnews/docs/v3_flip_092819_hospital_news_edit?fr=sNzdmODc5NDaz)

Link directly to article

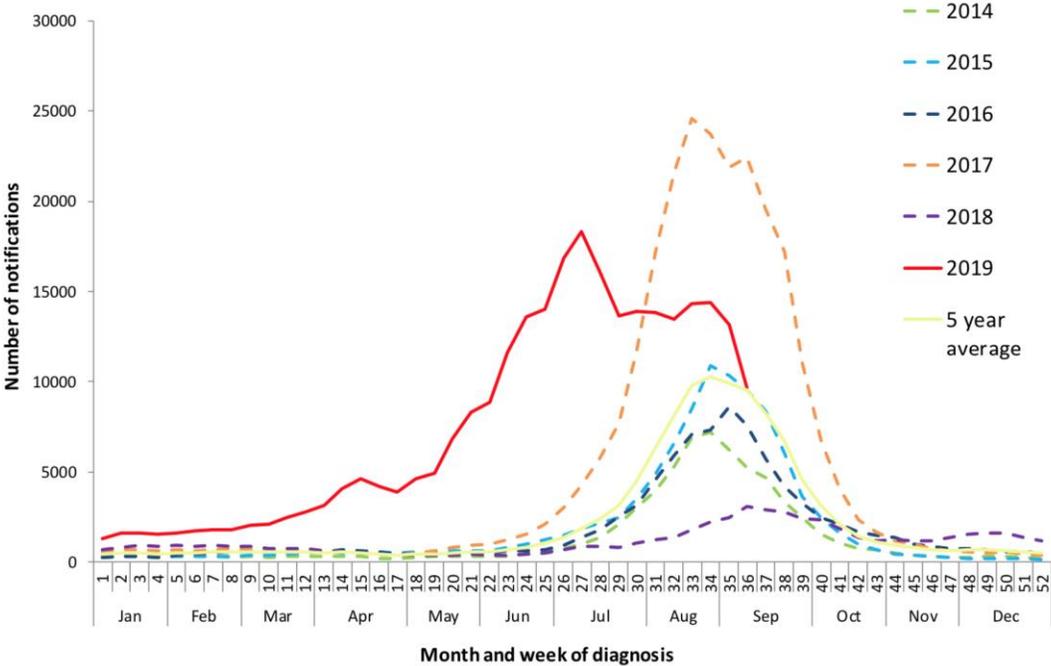
<https://hospitalnews.com/reacting-to-real-time-data-is-too-late/>

# Strategic Direction – Champion accountability and transparency

## Update Flu Vaccine

As stated in my September report we expect a much earlier and stronger flu season this year. However, if we follow Australia’s lead it will peak earlier and taper off sooner than normal. As noted below, it is still a very intense flu season as compared to the last 6 years in Australia.

**Figure 5. Notifications of laboratory confirmed influenza, Australia, 1 January 2013 to 8 September 2019, by month and week of diagnosis.\***



Source: NNDSS  
\*NNDSS notification data provided for the current and most recent weeks may be incomplete. All data are preliminary and subject to change as updates are received.

A good update on the status of the vaccine can be found at <https://www.livescience.com/40279-flu-shot-information.html>



The composition of the 2019-2020 flu shot will be slightly different from last season's flu shot. Specifically, there will be a different strain of the H1N1 virus and a different strain of the H2N3 virus in this season's flu shot, compared with last season's shot. [According to the CDC](#), the 2019-2020 trivalent flu shot will contain the following strains of the flu virus:

- A/Brisbane/02/2018 (H1N1) pdm09-like virus — *This is the H1N1 component that is different from last year's flu shot.*
- A/Kansas/14/2017 (H3N2)-like virus — *This is the H3N2 component that is different from last year's flu shot.*
- B/Colorado/06/2017-like (Victoria lineage) virus — *This is the influenza B strain component that is the same as last year's shot.*

The 2019-2020 quadrivalent vaccine will also contain a second influenza B strain called "B/Phuket/3073/2013-like (Yamagata lineage) virus," which was also included in last season's quadrivalent vaccine.

Bottom line – when the vaccine comes out get vaccinated. It is about protecting those you love around you.

## **Strategic Direction - Develop a sustainable corporate financial strategy**

### **Accreditation 2019 Survey Report**

We are now less than 2 months away from our on-site Accreditation Canada survey on November 25-29<sup>th</sup>.

Last winter we completed self-assessments on the standards and created action plans where improvements were needed. The work to make the improvements needed is now nearly done. Throughout August until mid-November, we have been engaged in corporate-wide education directed to staff about Accreditation and how WRH meets various standards. Over 80 frontline staff have volunteered as Accreditation Ambassadors to help spread the word. These folks share accreditation news, facts, and provide education for their co-workers on how we meet the

standards in each department. Please read the information they are sharing. Thank-you Accreditation Ambassadors for volunteering!

In September and October, logistical preparations are being made to prepare for the week the surveyors will be on-site. Documentation is being gathered along with planning meetings and tours to different service areas. During the on-site survey, surveyors use *tracers* to evaluate the key areas. *Tracers* involve reviewing files/documents, talking & listening to staff, patients, and families, and observing processes, procedures, and direct care activities in service areas. Surveyors evaluate by looking for evidence/proof that we comply with each of the 3000+ standards.

If you are interested in being part of the 2019 accreditation process, please contact Sherri Franz at [sherri.franz@wrh.on.ca](mailto:sherri.franz@wrh.on.ca) or at 519-991-1856.



Accreditation 2019 — Timeline				Status
<b>Phase 1 Assessment Jan.- Mar.</b>	Surveys	→ Distribute Worklife Pulse Surveys → Distribute Patient Safety Culture surveys	Nov. 26 - Dec. 21	✓
		→ Distribute Professional Staff Worklife Pulse Survey	Dec. 20 – Jan. 15	✓
		→ Governance Survey	Jan. 15 - Feb. 15	✓
	ROPs	→ Create teams → Complete ROP assessments → Create action plans for ROPs	Jan. 7 – Mar. 1	✓
		Standards	→ Create teams → Complete mock tracers (optional) → Complete & submit AC self-assessment	Jan. 15 - Mar. 15
	<b>Phase 2 Preparation Apr.- Nov.</b>		Quality Road Map & Action Plan	→ Continue completing ROP action plans
→ Create & complete action plans (for Standards & Surveys)		Apr. 1 - Oct. 1		IP
Corporate Education		→ Education: Ambassadors & Bulletin Boards	June 1 – Nov. 12	IP
		→ Educate & Assess readiness: Complete mock tracers (optional)	Sept. 1 - Nov. 12	IP
On-site Preparations		→ Compile needed documentation	Sept 15 - Nov 1	IP
		→ Set-up survey schedule & Surveyor preparations	Sept 15 –Nov 20	IP
<b>Phase 3 On-site Survey Nov. 25-29, 2019</b>	Accreditation Canada On-site Survey	→ Meet with on-site surveyors	Nov 25 - 29	

Legend	
✓	complete
IP	in progress
ROP	Required Organizational Practices



# Strategic Direction - Create a vibrant workplace

## Take advantage of Screening Programs

Recently I asked my primary care physician if I should get FIT tested. He agreed and completed the form. Within a couple weeks, a kit appeared in my mailbox. With easy to read instructions, I completed the test and mailed back as instructed. Within a few weeks after I received the results in the mail.

Getting checked for colon cancer just got easier with the introduction of the fecal immunochemical test (FIT) in Ontario. The free test is now available to eligible people in Ontario through Cancer Care Ontario's organized colon cancer screening program, ColonCancerCheck.

FIT is a simple, safe and accurate at-home test that checks stool for tiny amounts of blood, which could be caused by colon cancer and/or pre-cancerous polyps (growths in the colon or rectum) that can turn into cancer over time. The FIT is for men and women ages 50 - 74 who have no symptoms and no family history of colorectal cancer. The test is to be completed every two years.

FIT replaces the fecal occult blood test (FOBT) that required patients to collect stool samples on three separate days and avoid certain foods and medications before the test.

### **The new test has many advantages:**

- FIT is better at detecting colon cancer and pre-cancerous polyps;
- FIT is more user-friendly because it includes an easy-to-use collection device;
- FIT requires only one stool sample; and
- When completing FIT, there are no medication or dietary restrictions (including vitamin C).

In Ontario, Colorectal cancer is the second most commonly diagnosed cancer and the second most common cause of cancer deaths. It is estimated that in 2018, about 11,595 people in Ontario were diagnosed with colorectal cancer and about 3,359 people in Ontario died from the disease.



The marketing campaign featuring “Sam the Poop Emoji” goes step-by-step through the easy-to-conduct test and encourages eligible people to be screened.

Sam’s Fit Test: <https://youtu.be/O498ZJdyGbQ>

## **Strategic Direction - Strategically engage with external partners**

### **Label Me Person**

WRH is proud to be the first workplace to host the *Label Me Person* anti-stigma campaign display, which is now located on the mezzanine level of Ouellette campus (adjacent to the hallway leading to the parking garage). All WRH employees, professional staff and volunteers are encouraged to come have a look at the booth, which features stories from local individuals who have lived with substance abuse, and information on the campaign.

Label Me Person, supported by many community partners, focuses on stigma that marginalizes those in our community who suffer from substance abuse. “Sometimes the words that we use to describe substance abuse can shape opinions, create negative stereotypes, influence how people are treated and stop people from getting support,” reads a banner adjacent to the display.

For more information on this campaign, visit [www.labelmeperson.com](http://www.labelmeperson.com)

## **Strategic Direction - Continue the pursuit of new state-of-the-art acute care facilities**

### **Windsor/Essex Hospital Project**

Infrastructure Ontario, the Crown agency that is responsible for delivering capital projects across the province, released its Fall 2019 Market Update, which lists all major public infrastructure projects, including those at public hospitals. The list confirms that the state-of-



the-art new acute care hospital for Windsor-Essex is one of 32 projects on Infrastructure Ontario's capital projects list.



We continue to work with the Ministry of Health to receive funding for Stage 2 of this five-stage process, which is required to be followed for all such projects of this size and scope. In addition, as anticipated, we are currently in the “pre-procurement” stage and it is vital that our community continues to strongly advocate for this project to receive the necessary funding required to move ahead.

We need to continue to thank the many advocates we have in our region at all political levels as well as the support we have received most recently from avid community supporters who are speaking out in favour of moving this project ahead at its proposed location.

For example, the recent 42 Forward Event put together by a grass roots organization is proof positive the want and need for this project in our community. <https://bizxmagazine.com/42-forward-our-new-hospital/>

However, do not be alarmed when those opposing the project try everything they can to delay the zoning process and the process overall. Hoping that delay itself will end the planning. Remember – delay is our enemy not our friend.

