Improving Patient Care Through Accreditation

September marks the official launch of preparations for Accreditation 2008. Accreditation is an opportunity for Hamilton Health Sciences to assess itself against national quality standards.

Twenty-six accreditation teams have been established to lead Hamilton Health Sciences staff through the revised program from the Canadian Council on Health Services Accreditation (CCHSA). This new program will provide staff and physicians with the opportunity to participate more directly in the accreditation process.

Throughout October, frontline staff, physicians and leaders will be asked to complete an online Patient Safety Culture Survey and Self-Assessment Questionnaire related to the national standards. Participation in these surveys is vital, as the results will be used to identify needs and opportunities for practice and process improvements at HHS.

Accreditation 2008 will have an increased focus on patient safety and high-risk processes of care. CCHSA has established five focus areas for patient safety: culture, communication, medication, workforce/worksite, infection control. These focus areas are well aligned with the patient safety model, initiatives and plans at HHS.

The organization will be assessed on compliance with 25 patient safety Required Organizational Practices (ROPs). An ROP is defined by CCHSA as an essential practice that organizations must have in place to enhance patient/client safety and minimize risk. The Patient Safety Steering Committee is overseeing implementation of the ROPs within the HHS Patient Safety Plan. All staff and physicians should be aware of the ROPs that are relevant to the work they do, and be familiar with current initiatives and practices that address the ROPs.

State-of-the-art Heliport opens on rooftop at Hamilton General Hospital

The relocation of Hamilton General Hospital’s helicopter landing pad from street level to a larger, rooftop space will mean quicker, more direct access to care for trauma patients.

As the region’s trauma centre, Hamilton General Hospital provides critical care to the most serious neuroscience, burn, cardiac, and trauma patients from throughout south central and south west Ontario – a region with a population of 2.3 million people. Each year, more than 150 patients are airlifted to Hamilton General.

“In any trauma, time is of the essence,” said Dr. Frank Baillie, Director of Medical Trauma Program, Hamilton Health Sciences. “By having a state-of-the-art heliport on the roof of our hospital, we’ll be able to save precious minutes and care for patients faster and more directly.”

In its previous ground location, the helipad posed many challenges for patients and pilots due to heavy road traffic, one-way streets, and trains on the nearby railroad tracks. In order to facilitate every landing, police had to close an intersection to traffic and the rail lines had to be cleared. Once the helicopter landed, a ground ambulance transferred patients around an entire city block to the emergency doors. This whole process added precious minutes to the overall trip time.

In addition, there was only one flight path for access to the street level helipad and the helicopter had to land beside a six-storey concrete wall. Depending on wind conditions, the pilots sometimes had to divert to other trauma centres outside the region, taking more time and putting patients at greater risk.

In its new location, on the roof of the main building at Hamilton General Hospital, multiple flight paths are available to the pilots. Once safely on the roof, patients are transferred from the rooftop to a designated elevator and directly to the Emergency Department, and in some cases the Heart Investigation Unit, the Operating Room, or the Intensive Care Unit.

The rooftop heliport is one of only three in Ontario and the only hospital heliport in our region.

“Our hospital is proud to serve as the region’s trauma centre,” said Murray Martin, President and CEO, Hamilton Health Sciences, at an event to celebrate the opening of the heliport. “The rooftop heliport provides our expert team of professionals with one more advantage as they work to save lives.”

The pre-fabricated heliport is a 60 square-foot octagonal aluminum deck platform with a seven-foot wide perimeter safety net. A buffer space between the landing pad and the roof reduces noise and vibration.

The new heliport is outfitted with its own fire protection system and sophisticated lighting system, which allows the pilots to control the deck lighting, including the landing lights and the perimeter floodlights. The heliport also has a snowmelt system to ensure a safe landing and easy walking access.
Bursary program places high school students on path to success

More than 400 staff from seven area hospitals attended the series of educational sessions focused on elder friendly care, which were offered at Hamilton Health Sciences, St. Joseph’s Healthcare, St. Peter’s and Joseph Brant Hospital for Seniors’ Month in June. These educational initiatives were directed by the Committee for Enhancement of Elder Friendly Environments (CEEEF), co-chaired by Dr. Christopher Patterson, Chief of Geriatric Services and Cathy Reis, Clinical Nurse Specialist, both Hamilton Health Sciences staff members.

One of the presentations focused on “Prevention of Deconditioning” in hospitalized seniors, while the “Path to Decline” session gave staff the opportunity to experience the challenges of elderly patients in our hospitals. “These presentations showed attendees that an elder-friendly approach to care is necessary to prevent hospital-acquired complications and functional losses in older patients,” said Cathy Reis.

Staff were invited to participate in the “Best Elder Friendly Idea” contest. The CEEFE committee was seeking creative, practical and cost effective ideas that would improve the health and well-being of hospitalized elders.

The first prize winner of a bike was Alice Fink, Registered Nurse, Joseph Brant Memorial Hospital, whose idea was an activity center for older patients with cognitive impairment. The second prize winner of an iPod was Barb Murray, Occupational Therapist, Hamilton Health Sciences, whose idea was a hospital escort service for seniors. The third prize pedometer went to Archana Lohit Occupational Therapist, Hamilton Health Sciences, whose idea was to have hearing amplifier sets readily available in ward areas for hearing impaired older adults.

Educational sessions were sponsored by the Regional Geriatric Program (Central).

CEEEF is a multidisciplinary regional group whose mandate is to influence the development and implementation of programs to enhance the care of older adults and foster a hospital environment that is elder friendly.

Left to right – Cathy Reis, Clinical Nurse Specialist, Co-Chair CEEFE; Alice Fink, RN, Joseph Brant Memorial Hospital; Archana Lohit, Occupational Therapist, MUMC; Dr. Christopher Patterson, Chief of Geriatric Services, Co-Chair CEEFE; Barbara Murray, Occupational Therapist, General site; David Jewell, Chair, Regional Geriatric Program – Central.

Alyajahan Bhimji will have a step up on other students as she enters McMaster University’s Health Sciences program this fall. As one of 10 recipients of the annual High School Health Research Bursary Awards, Alyajahan spent the summer studying how molecular changes can predispose children to obesity alongside researcher Dr. Sandeep Raha, Assistant Professor, Pediatrics, McMaster University.

Alyajahan assisted Sandeep by cataloguing, working with samples and analyzing data. “Some of the data Alyajahan helped uncover this summer has allowed us to make significant progress towards a publication,” said Sandeep. “I was impressed with how quickly she picked up the techniques, which is a credit to how the program selects students, and her own individual efforts.”

A recent graduate of the International Baccalaureate Program at Robert Bateman High School in Burlington, Alyajahan has always dreamed of becoming a doctor. As a little girl she would carry around her toy doctor’s bag with stethoscopes and thermometers, constantly monitoring her parents’ health. But now that she’s had a taste of the research world, she’s not sure which route she will take. “It was amazing to be a part of research that could have a profound impact on society,” said Alyajahan. “It was a great experience – I’m glad I have four years to decide exactly what I want to do.”

Sandeeep believes the program, which is a joint initiative between Hamilton Health Sciences, St. Joseph’s Healthcare Hamilton, and McMaster University Faculty of Health Sciences, is beneficial for students, and he has been involved in the program since its inception in 2004. “The idea is to reduce the pressure on students to become a doctor, but recruiting students at an early age helps to open their eyes to other possibilities and gives them an appreciation for the technical aspects of diagnosis.”

Alyajahan and fellow bursary award winners Cory Ozimok, Christina Nowak, Erik Yao, Kathleena Tatnay, Kristin van Sligchot, Amanda Sealke, Belinda Pang, Syed Rahman, and Ayeza Corbade, were honoured at a special ceremony August 22.

“You, through this program, can achieve your dreams,” Dr. Salim Yusuf, Vice President of Research & Chief Scientific Officer, Hamilton Health Sciences, told the students at the recognition ceremony. “We have invested in your future, but that’s not all, we’ve invested in our future.”

This year’s exceptional students were nominated by their science department heads from high schools across Ontario. Besides having the opportunity to work in a lab with world-class researchers, the students each received a $1,700 bursary. Funding is provided by the Ministry of Research and Innovation, corporate sponsors (Tripenco Burlington Insurance and Aviva Traders), as well as Hamilton Health Sciences, St. Joseph’s Healthcare Hamilton, and McMaster University Faculty of Health Sciences. This funding will give at least 10 students per year the opportunity to be a part of this extraordinary program over the next three years.

A Regional approach to Seniors’ Month

The week of July 22-28 was National “Make Someone Smile Week.” For the second year, McMaster Floral Design created 60 happy face arrangements which were delivered to departments, clinics and wards across Hamilton Health Sciences. Floral Ltd and the HHS volunteers who did such a wonderful job distributing the arrangements.

Volunteers share a smile – Volunteers share a smile with Prosthetics and Orthotics Staff at Chedoke Hospital during Make Someone Smile Week. Back Row (Left to Right) - Anne Schurter, Joyce Mattick, E. Ann Thomas, Rosemary Stewart and Mary Fascione. Front Row (Left to Right) - Diana Gold & Patricia White.

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<tr>
<td>1. Adopt patient safety as a written, strategic priority/goal.</td>
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<td>2. Provide quarterly reports to the Board of Directors on patient safety, including changes/improvements following incident investigation and follow up.</td>
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<td>3. Establish a reporting system for actual and potential adverse events, including appropriate follow-up. This should be in compliance with any applicable legislation, and within any protection afforded by legislation.</td>
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<td>4. Implement a formal (transparent) policy and process of disclosure of adverse events to patients/families, including support mechanisms for patients, family and care/service providers.</td>
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<td>5. Carry out one patient safety related prospective, analytical process per year and implement appropriate improvements/changes.</td>
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<td>6. Inform and educate patients and or family about their role in patient safety using both written and verbal communication.</td>
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<td>7. Employ effective mechanisms for transfer of information at interface points, including shift changes, discharge and patient movement between health care services and sectors, and implement improvements.</td>
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<td>8. Implement verification processes and other checking systems for high risk care/services activities, including ordering and receiving results of critical tests, administering surgical or other invasive procedures, diagnostic testing, medication use, and implement improvements.</td>
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<td>9. Reconcile the patient's medications upon admission to the organization, and with the involvement of the patient.</td>
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<td>10. Reconcile medications with the patient at referral or transfer, and communicate the patient's medications to the next provider of service at referral or transfer to another setting. service, service provider, or level of care within or outside the organization.</td>
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<td>11. Remove concentrated electrolytes (including, but not limited to, potassium chloride, potassium phosphate, sodium chloride &gt;0.9%) from patient care units.</td>
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<td>12. Standardize and limit the number of drug concentrations available in the organization.</td>
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<td>13. Provide ongoing, effective training for service providers on all infusion pumps.</td>
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<td>14. Deliver annual (at a minimum) education/training on patient safety to all staff including targeted patient safety focus areas within the organization.</td>
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<td>15. Develop and implement a plan and process to assess patient safety issues within the organization and to carry out improvement activities.</td>
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<td>16. Delineate clearly the roles, responsibilities and accountabilities of staff and other providers for patient care and safety.</td>
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<td>17. Implement an effective preventive maintenance program for all medical devices, equipment and technology.</td>
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<td>18. Adhere to federal and/or provincially-developed infection control guidelines such as Health Canada’s Infection Control Guidelines: Handwashing, Cleaning, Disinfection and Sterilization in Health Care.</td>
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<td>19. Deliver education and training for staff, other providers and volunteers on handwashing/hygiene.</td>
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<td>20. Monitor infection rates and share this information throughout the organization.</td>
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<td>21. Examine, and where indicated, improve processes for sterilization of equipment and facilities.</td>
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<td>22. Implement and evaluate a falls prevention strategy to minimize the impact of patient falls.</td>
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<td>23. Use at least two patient identifiers prior to the provision of any service or procedure.</td>
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<tr>
<td>24. Develop and implement an organizational policy and protocol for administration of the influenza vaccine.</td>
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**Park SMART!**

Summer vacations are coming to an end, students are returning back to school, and all clinics and programs will soon be operating in full force. This means that we must make room in our parking garages for increased capacity at all sites.

Corporate Support Services and Standard Parking are continually working to improve parking at all sites for patients, visitors and staff. Beginning in September, there will be additional parking staff available to assist during peak times.

Keeping in mind our hospital’s values of respect, caring, innovation and accountability, please be patient and considerate when using these facilities. Consider these ParkSMART tips to benefit patients, visitors and other staff members.

- "S" - Stay between the lines – don’t double park, block lanes or leave your car in undesignated areas.
- "M" - Make room for patients – park in far-flung or high levels so patients don’t have to go far.
- "A" - Allow time to park – be patient.
- "R" - Respect others who are struggling to cope with the parking situation.
- "T" - Try other ways of commuting – car pool, use public transit, bike or blade when possible.

*If you are experiencing difficulty parking, please contact Standard Parking at your site.*

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**Christmas party registration**

Hamilton Health Sciences is hosting its 8th Annual Children’s Christmas Party on Sunday, December 9, 2007 at Carmen’s Banquet Centre, 1520 Stone Church Road East, Hamilton.

This year’s event will feature tons of fun, food and entertainment including a laser show, award-winning children’s entertainers Splash ‘n Boots, and the Magic of Evans & Evans. Santa will be on hand to bring special greetings from the North Pole. The morning session will run 9:30 a.m. – 12:30 p.m. and the afternoon session 1:30 – 4:30 p.m.

To register, fill out a registration form available on the Intranet or in the HR forms racks at each site. Or you can call Patricia Zimmerman at extension 74852 or e-mail zimmerman2@hhsc.ca with the ages and genders of your children/ grandchildren (infant to 12 years of age) along with the number of adults attending.

Children are $10 each (each family will include 2 adults free of charge). All additional attendees are $10 each. This includes a gift for each child, lunch for all, free draw prizes, face-painting and great entertainment. Registration form accompanied by a cheque payable to Hamilton Health Sciences should be forwarded to Patricia Zimmerman, Human Resources - Griefkids Site no later than October 31, 2007. No cash will be accepted.

We are also seeking volunteers to assist at the party. If you have a child in high school who is interested, please contact Rick Pettipas at extension 46746 or e-mail pettipas@hhsc.ca. Students will receive a letter confirming hours volunteered.
Dorelle Scott

As a nurse in Henderson Hospital's Operating Room, Dorelle Scott nurtures people with cancer everyday. She knows what it's like to be in an operating room, dizzied by your surroundings, unaware of your outcome. She was in the same position six years ago when she was diagnosed with advanced stage adenocarcinoma.

It was first thought her cancer could be removed surgically, but instead, Dorelle spent five weeks being treated with chemotherapy and radiation, and a total of five months off work to recover.

At the time of her diagnosis, she was working in Hamilton General Hospital's Operating Room. Each day, one of her coworkers would volunteer to drive her to her radiation appointment. About 15 of her coworkers also came to her house one Saturday to plant her a garden. “It was so thoughtful of them,” said Dorelle. “Their support was a big part of my treatment.”

Another component of her treatment was maintaining hope and her sense of humour. “When I was told I had a 50 per cent chance to live, I said, ‘That’s great! I have a very positive outlook,’” said Dorelle. “I love to make people laugh, so I made sure I kept people laughing all throughout my treatment.”

Dorelle is happy to be a Terry’s Team Member in this year’s Terry Fox Run. She thinks the Terry Fox Run is important because it raises money for cancer research, but it also helps educate as well. Dorelle is always educating her friends about cancer: “Know your body,” she tells people. “If you notice a change, you must get it checked out. Early detection is early treatment and early cure.”

Today, Anthony is a happy, healthy six-year-old. He finished treatment in February 2004 and hasn’t had any relapses. “We couldn’t be more proud of Anthony. He bravely fought this disease and faced it all with few complaints,” said Karen. “I look at him now, with his hair grown back, and his happy smile, and I find it hard to believe there could be any cancer cells in that little body.”

Although Anthony doesn’t know a lot about Terry Fox and his contributions to cancer research, he is doing his part as a Terry’s Team Member at this year’s Terry Fox Run. His parents are proud of him and happy to be a part of the event. “There isn’t anyone more iconic and inspirational for cancer than Terry Fox,” said Todd, Anthony’s father.

As a matter of routine, a biopsy was done on the removed wart. The Jones family and the doctors involved were shocked to find out Anthony had Rhabdomyosarcoma, a fairly rare form of cancer that is usually found in the body’s extremities or behind the eye. “The world stopped!” said Karen.

Anthony was sent to McMaster Children’s Hospital for chemotherapy and Juravinski Cancer Centre for radiation therapy. “The communication between the two hospitals was seamless,” said Karen. “Those dedicated people – oncologists, nurses, respiratory therapists, anesthetists, and other radiation specialists – were helping our child fight this disease. We are so grateful to them.”

As a nurse in Henderson Hospital’s Operating Room, Dorelle Scott nurtures people with cancer everyday. She knows what it’s like to be in an operating room, dizzied by your surroundings, unaware of your outcome. She was in the same position six years ago when she was diagnosed with advanced stage adenocarcinoma.

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