The Human Side of Health Care

2012 - 2013 COMMUNITY REPORT

Hamilton Health Sciences

CHEDOKE • CHILDREN'S • GENERAL • JURAVINSKI • McMaster • St. Peter's
We all experience health care at different times in our lives and in different ways. Some of us are lucky enough to rarely need medical services. While others, with illnesses or injuries, may be frequent visitors to doctors’ offices, hospitals and other healthcare providers.

Whatever the extent or frequency of our healthcare experience, it is always intensely personal. It is when we feel most vulnerable – when we are most reliant on the wisdom and expertise of others.

At Hamilton Health Sciences, we know how important it is for us to earn the trust of our patients and their families. It’s why we work so hard to offer the best services, using the right tools, and most effective treatments, in order to give our patients the very best outcomes possible.

We also strive to provide compassionate care. We know that the human side of health care – the way we interact with our patients – has a huge impact on their confidence and comfort.

This report focuses on the human side of health care and tells five stories about how people at Hamilton Health Sciences have devoted themselves to serving their patients. In text and in video, you can learn more about their extraordinary commitment.
“I think it’s important for myself and all staff members to leave something positive with every patient.”

Marc Leslie
porter
The joy in Marc Leslie’s heart often precedes him. It starts as a distant melody, echoing in the hallways of Hamilton General Hospital and growing nearer with every note. Then Marc rounds a corner, carrying the tune with a voice so bold yet so soothing you can’t help but stop and listen. It’s a gift he discovered at a young age, and his motivation to share it comes from the heart.

Marc has been a porter at Hamilton General Hospital since 2007. His job is to ensure that patients are transported safely and efficiently throughout the hospital, whether they’re going for tests, surgery, or moving to a different ward.

Although this journey from “point A” to “point B” is often brief, Marc views these moments as an opportunity to make a real difference in a patient’s hospital experience.

“Sometimes, there’s just a song in my heart,” says Marc. “Whatever it is, I’ll share it with the patient. I can see that it calms them down, and it encourages me to keep going.”

“Our Customer Support Services staff members take pride in their ability to enhance each patient’s stay through caring acts - a kind word, a warm blanket, a sympathetic ear or even a song,” says Kathryn Adams, service excellence coach for Customer Support Services at Hamilton Health Sciences.

Marc sometimes jokes with his colleagues that they should get his autograph, but he’s not singing for fame.

“I get to go home at the end of my day, but the patient has to remain here,” he says. “I think it’s important for myself and all staff members to leave something positive with every patient we interact with.

“It’s why we’re here, really. It’s why I’m here.”
“Our goal is to help reduce falls and falls-related injuries, so patients can have a much better quality of life and be able to return to and live safely in the community.”

Pauline Fisher
clinical nurse specialist
Marie Bonnett is an active senior. With 21 grandchildren and 31 great-grandchildren, it’s hard not to be.

But when Marie had a fall in her home this spring, she had no choice but to slow down. She fractured a hip and required several weeks of recovery and rehabilitation at Juravinski Hospital & Cancer Centre.

In Canada, falls are the leading cause of injury-related hospitalization among seniors. Many of these falls can be prevented with precautionary measures and education.

We recognize that independence is important to many of our senior patients. That’s why we’ve implemented comprehensive falls and injury prevention strategies that involve the patient as a partner, using techniques centred around communication and education to optimize independence and minimizing the risk of falls.

“When a patient has had a fall, they’re at increased risk for having another fall,” says Pauline Fisher, clinical nurse specialist with the “Fracture? Think Osteoporosis” program at Hamilton Health Sciences. “So, we involve the patient in conversations about what things can be done to help prevent another fall, and another fracture.”

Some of the most effective strategies are simple: making sure patients have adequate footwear; creating a clutter-free environment and eliminating potential tripping hazards; and placing important personal items and call bells within reach of the patient’s bedside. But, the work doesn’t end in the hospital. Proper education is important in ensuring that patients like Marie can take steps to reduce falls once they leave the hospital.

“Our goal is to help reduce falls and falls-related injuries, so patients can have a much better quality of life and be able to return to and live safely in the community.”

For Marie, it means being able to enjoy her family and her favourite pastimes from the comfort of her own home.

Visit this link vimeo.com/hamiltonhealthsciences/marie to watch a short video about Marie’s story.
“What they did and are doing now, it’s impacting us for the rest of our journey.”

Maha Msiss
mother of Nour, patient at Hamilton Health Sciences
Maha Msiss calls her son Nour’s physician the “doctor of impossible” because of his ability to make possible what others might consider impossible. Dr. Jan Willem Gorter lived up to that title when Nour turned 18.

It is at age 18 that youth move from the comfort of family-centred care in pediatrics to the individual focus of adult health care. It’s a frightening point for many youth and parents who fear there will be a loss of services and control. Some call it “falling off the cliff.”

Maha felt that fear. But Dr. Gorter is one of the leaders in teen transitional care at McMaster Children’s Hospital, and believes the best way to ensure a healthy future for a teen living with chronic health issues is to prepare the teen and family, listen to their concerns, and plan ahead with adult services. A number of clinics at McMaster Children’s Hospital now focus on those goals.

For Nour and his mother, that meant spending the year prior to Nour’s 18th birthday focusing on the transition, undertaking assessments, and meeting with Nour’s new doctor at the Regional Rehabilitation Centre.

“It’s about forming a relationship,” says Dr. Ryan Williams, Nour’s adult care doctor. “Children who are now adults and coming into an adult program need to have a sense of trust.”

Ultimately, this is about improving long-term quality of life, and the steps our pediatric and adult care teams take, together, to ensure each patient’s transition is as smooth as it can be. For Nour, it’s about a future with possibility.

“What they did and are doing now,” says Maha, “it’s impacting us for the rest of our journey.”
“We have to make investments that impact patients and create a more sustainable healthcare system.”

Dr. P.J. Devereaux
Cardiologist
In health care, the best decisions are based on research and evidence to ensure the best outcomes possible – for the patient, and for the entire healthcare system.

This is the driving force behind a recent study by Dr. P.J. Devereaux, head of cardiology at the Juravinski Hospital & Cancer Centre and researcher with the Population Health Research Institute. He and his team monitored patients for cardiac complications after major surgery – events that might otherwise go undetected – and determined that many of these patients did better with intensive monitoring following their surgery.

“Globally, over 200 million adults have major surgery every year,” says Dr. Devereaux. “Surgery is a stressful event that can cause heart complications, especially in older adults in their 70s, 80s and 90s. The majority of patients who suffer serious heart complications following major surgery typically don’t experience symptoms.”

By monitoring patients intensively following major surgery, the care team can watch closely for complications and treat those complications aggressively if and when they arise. After further research, Dr. Devereaux determined that patients fared even better over the long term when the period of intensive monitoring was reduced from the standard 48 hours to 24, so the patient can move on to recovery and rehabilitation sooner.

“As our population ages, we want to have programs in place where we can provide important care, such as a hip surgery to give an older patient a new lease on life, but at the same time ensure that we don’t miss serious complications,” says Dr. Devereaux.

It’s about matching the right type of care to the patient for the best outcome, and managing resources effectively so that we can provide the best care for all.
“This program guided me as a highway, and when I was on that road, then I was heading straight toward my destination.”

Harwinder Grewal
registered nurse
On the highway to caring

Harwinder Grewal’s journey into health care was inspired by her mother, whose dream was to become a nurse. Although her mother never realized her dream, Harwinder was motivated by her mother’s vision and pursued a nursing career of her own in their native India.

Searching for greater opportunity in her field, Harwinder made her way to Canada in 2003. Faced with the challenges of adjusting to a new culture and community, the first couple of years were a struggle.

“When I came to Canada, I came by myself,” says Harwinder. “I left my mother and father. I didn’t know anyone.”

Eventually, Harwinder learned about Hamilton Health Sciences’ Internationally Educated Nurse/English as a Second Language (IEN/ESL) Nurse Integration Project, which aims to successfully integrate IEN and ESL nurses into the workforce by enhancing their communication, clinical and cultural competencies through skill development and workplace exposure.

“When you’re coming to Canada as an immigrant, you’re in the dark,” says Harwinder. “This program guided me as a highway, and when I was on that road, then I was heading straight toward my destination.”

Now, Harwinder works as a registered nurse on Ward 2 – Complex Medical Rehabilitation at Juravinski Hospital & Cancer Centre. She lives happily in Hamilton with her husband and four-year-old son, and looks forward to working every day with her colleagues whom she says “are like family members.”

“For nurses who have trained in other countries, we’re very fortunate to create the conditions for the greatest success to become employed in nursing in Ontario,” says Kirsten Krull, vice president of inter-professional practice and chief nursing executive at Hamilton Health Sciences. “It truly is about people caring for one another, and developing exceptional relationships in a variety of ways.”

Visit this link vimeo.com/hamiltonhealthsciences/harwinder to watch a short video about Harwinder’s story.
11,242 staff members

1,703 physicians

1,379 volunteers who gave 105,752 hours of service

2,257 student placements (Sept. 2011-Aug. 2012 academic year)

22% improvement in inpatient CT scan wait times at Juravinski Hospital & Cancer Centre

504 pacemaker procedures in the new Cardiac Arrhythmia Unit at Hamilton General Hospital

2,867 babies born

For more information, contact Public Relations & Communications at (905) 521-2100 ext. 75387 or visit www.hhsc.ca

Detailed financial statements available upon request.

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There’s care in numbers

At-a-glance facts from across our family of hospitals for April 2012-March 2013

10,000 bravery beads given to McMaster Children’s Hospital patients to mark milestones in their treatment

93 patients seen on average per day in the pre-op clinic at McMaster University Medical Centre

29,539 visits to the Main Street West Urgent Care Centre

145,579 visits to our three emergency departments

23,803 operating room cases