Niagara Health Now



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Message from Suzanne Johnston

Niagara Health System President



Welcome to the first edition of Niagara Health Now!

I'm excited about the launch of our new quarterly magazine that will spotlight our incredible team and our innovative

programs that are providing high-quality, patient-centred care to residents of Niagara. Since joining the NHS in September 2014, I have been impressed with the wonderful work happening across our organization.

It has been an amazing year for NHS. We've attracted new leaders, staff and physicians to our impressive team. We continue our strong focus on quality and safety. And we continue with planning for our future, including a new South Niagara Hospital, and working with all communities in Niagara to strenghten local healthcare.

Niagara Health Now is another way for us to tell you about the great work happening across our sites and focus on the people who provide care and caring to patients and their families.

In our first edition, you'll read about the launch of our Critical Care Response Team and the powerful message being delivered by staff at our Hepatitis C Care Clinic. You'll also learn about the success of our regional stroke program and the creation of a Patient Family Advisory Council at our Walker Family Cancer Centre.

And there's so much more.

I hope you enjoy this debut edition of Niagara Health Now and we look forward to sharing more great stories with you in future issues.

Stay Connected with Niagara Health System Visit www.niagarahealth. on.ca

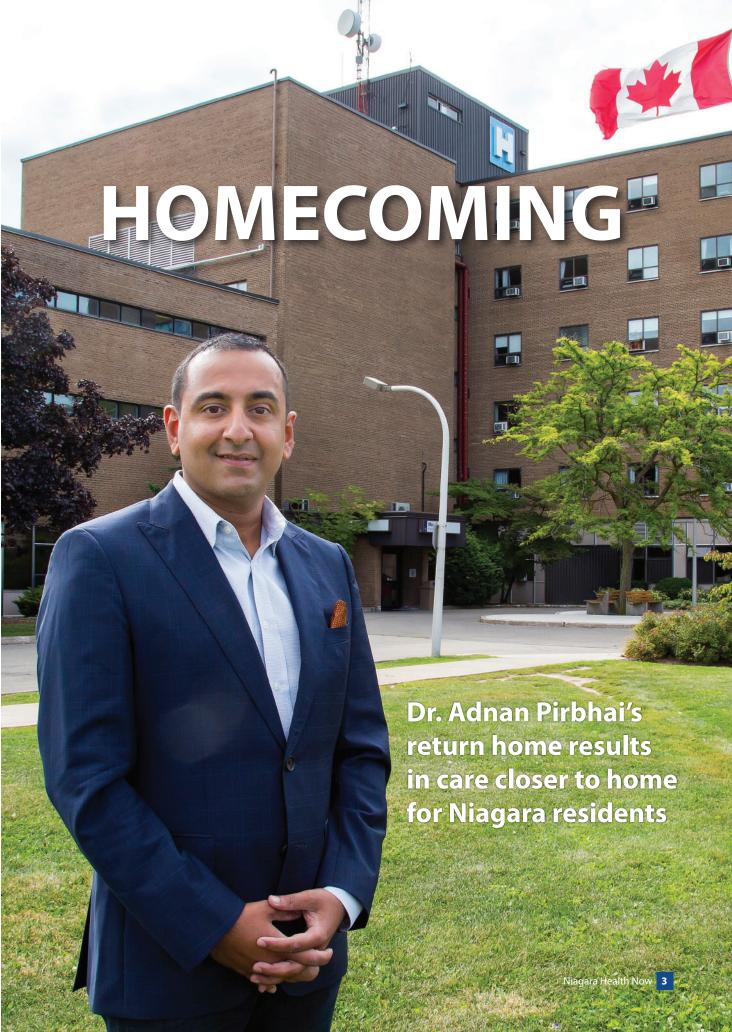
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Please send feedback to: steven.gallagher@niagarahealth.on.ca



Home was a key theme when Dr. Adnan Pirbhai was recruited to the **Ophthalmology Program** based at the Welland Site.

Joining the NHS in March 2014 was a homecoming for Dr. Pirbhai, who grew up in Niagara.

His arrival also meant that more Niagara eye patients would receive care closer to home.

With special expertise in oculoplastic, lacrimal and orbital surgery, Dr. Pirbhai performs such procedures as major reconstructive surgery related to eyelid cancer, bypass surgeries for blocked tear ducts and complex trauma related to the eyelid and socket.

Because the NHS did not previously have an Ophthalmologist with such expertise, eye patients requiring those procedures had to travel outside Niagara to receive care.

"Helping people with a unique and specific skill set that can address their problem is obviously fulfilling," says Dr. Pirbhai. "Many of my new patients would have otherwise needed treatment in Toronto, London or Hamilton. At the same time, I have many patients in my practice who have previously had treatment elsewhere and now are being treated closer to home."

Dr. Pirbhai was a perfect fit for the Ophthalmology program, says Patty Welychka, Executive Lead of the Welland Site and Director of Surgical Services.

"Most importantly, it means care closer to home for patients," says Mrs. Welychka. "We have an expert right here in Niagara. When we were in the recruitment process, our Ophthalmologists agreed if we were to bring somebody into Niagara, we needed someone who has certain expertise. The knowledge that Dr. Pirbhai has was what they were looking for. So we were able to recruit the person who everybody thought was required for the patients we serve in Niagara. This definitely added value to the complement of the existing team of dedicated Ophthalmologists."

Since his arrival, Dr. Pirbhai has been a "great asset" to the Ophthalmology Program, adds Mrs. Welychka. "He embraces the culture of the NHS, and he's very patient

Dr. Pirbhai's return to Niagara was a long journey that took him to the other side of the planet.

After graduating high school at Sir Winston Churchill in St. Catharines, he earned an undergraduate degree from the Arts and Sciences Program at McMaster University in Hamilton.

He attended medical school at Western University in London, Ont., and then completed his five-year residency at the university's Ivey Eye Institute.

After that, he completed two fellowships in his subspecialty, starting at the University of British Columbia in Vancouver and then at the University of Adelaide in Australia. Both centres are world renowned for their expertise in oculoplastic surgery.

The 36-year-old eventually made his way back to Canada, setting up his first practice in Ottawa. But a year and a half later, he learned that Niagara Health System was seeking another Ophthalmologist and he knew it was an opportunity he wanted to pursue.

"It was an opportunity to bring this skill set to a huge region that didn't have it," says Dr. Pirbhai, who in addition to his areas of expertise also performs a wide range of general ophthalmology procedures, including cataract surgeries.

Joining NHS's team of 10 Ophthalmologists has been rewarding for Dr. Pirbhai.

"We have a really talented and experienced group of Ophthalmologists in Niagara."

Dr. Adnan Pirbhai

Ophthalmologist

"We have a really talented and experienced group of Ophthalmologists in Niagara," he says.

"We also work quite well as a cohesive unit. Everyone is working very hard to provide Niagarans with top-tier medical and surgical eye care services."

Dr. Pirbhai, who lives in St. Catharines, shares a private practice in Fort Erie with Dr. Patricia Teal, NHS's regional lead of Ophthalmology.



"Adnan has been a most welcome addition to our eye service team," says Dr. Teal. "He brings special skills and training in ophthalmic plastic surgery, which allows us to greatly expand the services we can offer our patients. It is important to realize that ophthalmology is much more than cataract surgery, and the NHS has wisely expanded its recruitment to bring in the various sub-specialties in eye care, allowing us to care for our patients in Niagara."

On a personal level, Dr. Pirbhai says he's glad to be home and closer to his family, with whom he moved to St. Catharines from Timmins when he was 12 years old.

"It has been great being home," says Dr. Pirbhai, whose father Dr. Kalim Pirbhai is a pediatrician and allergist in St. Catharines. "I am really enjoying getting reacquainted with the region having been away for so many years."

He's also excited about what lies ahead for the Niagara region.

"I believe Niagara is embarking on a long overdue renaissance. There are a lot of good, young, dynamic people here trying to push a scene. It has been fun to witness this and I hope to be a part of that positive change. There is a lot of energy and opportunity here and people are starting to recognize this. It's an exciting time to live here."

Regional Ophthalmology Program

- The Welland Site provides a Comprehensive General Ambulatory Ophthalmology Program for Niagara residents.
- Since September 2012, all Ophthalmologists in the NHS have worked together in one location to perform eye procedures.
- The Ophthalmologists performed more than 5,700 cataract surgeries and 180 other procedures last year.
- The consolidation of Ophthalmology to one site provides the program with the opportunity to reduce duplication of capital equipment and supports the provision of high-quality care through dedicated, trained staff members working within the service.



Lori Knutson admits she had concerns when she learned that her fiveyear-old son, Jude, would require an ear procedure.

But those fears were quickly quelled following a preassessment visit with Niagara Health System's Child Life Specialist Lori Marino a week before her son's procedure.

"It calmed all my fears. She answered all of my questions, and she was very good with Jude," says Mrs. Knutson. "She spoke with Jude as much as she spoke with me."

Helping children and their families cope with the uncertainty of hospitalization is one of the key services provided by a Child Life Specialist.

Niagara Health System introduced the role at its regional Children's Health Unit at the St. Catharines Site in March 2014.

"I support families and children during hospitalization," says Mrs. Marino. "My goal is to lessen the anxiety of a hospital visit and make the experience less traumatic." Child Life Specialists are child development experts who work to ensure that life remains as normal as possible for children in healthcare settings.

Mrs. Marino, who has a degree in Child Studies from Brock University, says a key part of her job is "easing something that's difficult for children."

About 1,000 pediatric surgeries are performed at NHS each year. Mrs. Marino meets with patients and families about a week before a procedure to review the process.

That includes a visit to a room filled with equipment and illustrations related to a procedure, including photos of the operating room. Also present is a teddy bear dressed in medical scrubs worn by healthcare providers during a procedure.

Mrs. Marino uses language children can understand when explaining the process.

She tours patients and their families through the Children's Health Unit so they're familiar with the different places they will be on the day of the procedure.

Mrs. Marino also prepares children for in-patient procedures such as an IV or MRI.

"If they have to have an IV and it could be an anxious experience, it's making that experience better for them," she explains. "And I do that by preparing, educating and supporting them. When a child is going to get an IV started, I can go in first with a doll and show them what is going to happen and provide them coping techniques."

If a child is coming to the hospital for an exam such as an MRI, Mrs. Marino demonstrates the process using a small wooden replica of an MRI machine. She also uses an IPad to play the sounds the child will hear during the test.

Mrs. Marino says it's important to educate everyone involved – the patients and their families. "It's about family-centre care."

"It calmed all my fears. She answered all of my questions, and she was very good with Jude."

Lori Knutson

Mother of Jude Knutson

She also checks in with patients following a procedure or exam to see how they're faring and offer them a toy or stuffed animal from the unit's toy supply room, which is filled with items generously donated by the community.

The Child Life Specialist role has been an important addition to the Children's Health Unit, says Christine Ashick, a Charge Nurse on the Children's Health Unit and Special Care Nursery.

"It's a huge support system for us," says Mrs. Ashick. "It makes it easier for the child, easier for the family and better outcome post-op. It creates a more positive patient experience when they're here. Those are the things they remember, those little things, someone popped in, someone's around. Lori is an absolutely integral member of our team."

Services provided by a **Child Life Specialist include:**

- Preparing children for medical procedures or treatment using language they understand.
- Promoting family-centred care by providing information, advocacy and support to families of pediatric patients.
- Providing support and distraction during medical procedures.
- · Offering opportunities for play and expressive activities to encourage normal development and a sense of fun in spite of challenging circumstances.



HOW TO DONATE

Toy donations to the Children's Health Unit can be made by calling Lori Marino at 905-378-4647, ext. 41309.



WE ARE NHS

At Niagara Health System, our successes are the direct result of the many people in very different and complex roles coming together to provide great care and services to patients. Our staff, physicians and volunteers make an incredible difference in the lives of their colleagues, our patients and their families each day. You'll learn more about members of our team on this page in each edition of Niagara Health Now.

Carolyn McRae

Volunteer at the Greater Niagara General Site in Niagara Falls

A volunteer with the TLC program at GNG, she assists people when they arrive at the hospital, answering their questions and helping them get to where they need to go.

Volunteering with the NHS for **28 years**

WHAT DOES IT MEAN TO BE PART OF THE NHS TEAM?

"I want to help people. I want them to be happy. It makes you feel so good. Many times they say to me when they're leaving thank you so much. You go home feeling good."

FAVOURITE MUSICIAN: Frank Sinatra

FAVOURITE MOVIE: American President

INTERESTS OUTSIDE OF VOLUNTEERING: A sports fan, she loves watching the Toronto Blue Jays on TV. She's also a member of the social committee at her church.



WHAT OTHERS SAY ABOUT HER: "Carolyn, along with numerous dedicated volunteers across our sites, has given hundreds of hours of her time making a difference. Whether behind the scenes in her previous role or currently in her role which is front and centre, she daily enhances the patient experience. Helping people is what it is all about." - Andrea McCollum, Co-ordinator, Volunteer Resources at NHS.

Liz Iwanczuk

Executive Assistant in Site Administration at the Welland Site

Provides administrative support to the Welland Site Directors, Regional Perioperative Program and has site responsibilities.

28 years with the NHS

WHAT DOES IT MEAN TO BE PART OF THE NHS TEAM:

"I work with a great team. We work together to be the best, we are proud and want to provide the best experience for our patients, visitors and coworkers."

FAVOURITE MUSICIAN: Bruno Mars

FAVOURITE MOVIE: Titanic FAVOURITE FOOD: Perogies

INTERESTS OUTSIDE OF WORK: I love watching sports,

gardening, cooking and dancing!

WHAT OTHERS SAY ABOUT HER:

"Liz has been a dedicated Executive Assistant for many years and has always maintained the utmost professional and respectful attitude towards her superiors and everyone in the Niagara Health System. She is always happy to help visitors, patients and families when they need assistance and is very calm and engaging in her demeanor. Liz is highly organized and able to respond proficiently to any situation that may arise." - Patty Welychka, Executive Lead of the Welland Site and Director of Surgical Services.

Did you know 1

Our Food Services team prepares more than

o meals

each day for patients.



47,253 portions of chicken breast



24,768 servings of peas That's nearly

1.1 million each year.

In the past year, the NHS prepared and served:

596,352

portions of juice

30,073

servings of vegetable soup

19,531 pounds of potatoes



When Tim Dunn was admitted to hospital for knee surgery in July, he figured he would be discharged a few days after his procedure.

But the unexpected happened.

Following his surgery and his admission to the Inpatient Surgical Orthopedic Unit at the St. Catharines Site, Mr. Dunn started having trouble breathing. A nurse on the unit realized there was a need to activate the NHS's new Critical Care Response Team to assist Mr. Dunn.

The Critical Care Response Team (CCRT) is a dedicated team of health professionals consisting of a critical care nurse, respiratory therapist and Intensive Care Unit (ICU) physician available 24 hours a day, seven days a week to bring their critical care expertise to the patient's bedside, or wherever it is needed at the hospital with the aim of caring for patients who are seriously ill outside of a hospital's ICU.

Within minutes of the call, the CCRT (Registered Nurse Christina DiMario, Dr. Ryan D'Sa and Respiratory Therapist Mike Dube) arrived at Mr. Dunn's room and began providing care.

Early identification of patients in need allows the response team to either stabilize them on the ward or facilitate their early admission to the ICU. In addition to enhancing patient safety, including improved outcomes, CCRTs have been shown to increase staff engagement and satisfaction across the organization.

Nancy Ulch, who is a Charge Nurse on the Inpatient Surgical Orthopedic Unit at the St. Catharines Site, says the front-line healthcare team welcomes the addition of the CCRT.

"It's a huge weight off their shoulders because the unit staff know there is someone they can contact immediately," says Ms. Ulch. "There is a comfort in knowing the patients being cared for by the Critical Care Response Team are being well taken care of. There is always open communication with the response team. If they need something, we are there to help them or they are there to help us. The communication is great. It's that awareness that in a situation, the nurses can get help. It's almost like a lifeline."

The CCRT launched its pilot phase -- running eight hours a day Monday to Friday -- on June 15 and began 24/7 service on Sept. 14.

Behind the successful launch of the CCRT has been its implementation task force made up of a multidisciplinary team of nurses, respiratory therapists, physicians, pharmacists, educators and administrators.

Key in the creation of the CCRT was using a team approach to training, says NHS Chief Safety Officer Dr. Mike Christian.

"It's too perfect. It's what you would expect of a healthcare system. It was very professional." Tim Dunn Patient

"It was comforting to know the response team came as quickly as they did," said Mr. Dunn's wife, Mary Ann. "They explained to me what they were doing. They wanted to stabilize his heart."

After being stabilized, Mr. Dunn spent a night in the ICU and then returned to his surgical unit to continue his recovery from knee surgery.

Mr. Dunn had high praise for the CCRT.

"It's too perfect," says the retired high school teacher. "It's what you would expect of a healthcare system. It was very professional."

In February 2015, the provincial government and Hamilton Niagara Haldimand Brant Local Health Integration Network announced they will provide Niagara Health System \$1 million annually to support a Critical Care Response Team to improve patient safety.

"The team that is going to work together needs to train together," explains Dr. Christian, who before joining the NHS in January 2015 was the Medical Director of the Critical Care Response Team at Mount Sinai Hospital in Toronto. "In this case, we brought the doctors, nurses and respiratory therapists that are going to be working together into one room. They all went through the exact same training, which relied heavily on simulated situations. We need that practice beforehand so we can do it well when it counts."

Dr. Christian says the training focused less on medical skills – "these people already have these skills" – and more on team skills.

Continued on page 12

"The team skills are important. It's the communication, how they work together," he says. "How they operate in a different environment outside the ICU."

Also crucial in the training was working with team members on how to communicate with patients' family members who may be present during CCRT calls.

In addition to caring for a patient, the team can be used to identify opportunities for improvement in the system, Dr. Christian adds.

As well, the team monitors all patients who are transferred from the Intensive Care Unit to another medical or surgical unit for 48 hours after the move to aid in the transition out of the ICU. Dr. Christian leads the Critical Care Response Team with Elayn Young, Niagara Health System's Clinical Manager of Critical Care and Respiratory Therapy.

Ms. Young describes the CCRT as a "significant patient safety initiative that is representative of best practice."

"The team provides another safety net for our patients," says Ms. Young. "The creation of the Critical Care Response Team is another example of our commitment to patient safety. It's one more added layer of protection."



From left: Registered Nurse Francie Davidson, Registered Respiratory Therapist Susan O'Farrell, Registered Respiratory Therapist Karen Wiens, Registered Nurse Linda Lovell and Dr. Danny Lagrotteria, an Intensivist, shown during a training session for the Critical Care Response Team.

The CCRT assists in:

- · Bringing critical care expertise to the bedside in the ward.
- Supporting the staff on the wards.
- Meeting the urgent, critical needs of every patient by providing rapid response to a patient's acute change in condition.
- Improving patient safety.

CCRT FACTS:

- The CCRT was initially launched at the St. Catharines Site, with an aim of introducing it at other NHS sites in the future.
- There are 25 Registered Nurses, 25 Respiratory Therapists and 10 intensivists on the NHS CCRT.

Inspiring event

Community's spirit propels riders at seventh annual Big Move Cancer Ride



There was no shortage of inspiration at the seventh annual Big Move Cancer Ride in support of the Walker Family Cancer Centre on Sept. 13.

The Ride, which is hosted by OneFoundation for Niagara Health System, is a grown-in-Niagara, non-competitive cycling fundraiser featuring a 30-kilometre, 60-km and 100-km route.

Despite cold and rainy conditions, the weather did not dampen the spirits of participants as the event drew a crowd of 465 riders, over 200 volunteers and countless supporters who came together over a common goal - to raise funds for close-to-home cancer care in Niagara.

This year, more than \$340,000 was raised, bringing the Ride's seven-year total to more than \$2.8 million for equipment essential to quality patient care at the regional cancer centre.

For many, getting involved in the Big Move is a way to honour or remember a loved one who has been touched by cancer. For others, it's a way to celebrate a milestone in their own personal journey with the disease.

Glenda Bouwers, a Rehab Assistant in the Physio Therapy and Occupational Therapy Department at the NHS St. Catharines Site, was inspired to ride in the Big Move for the third time. "This year I am riding for a very special reason – to celebrate the 10th anniversary of my remission with Non-Hodgkin's Lymphoma," she says. "Having gone through treatment myself, I am fortunate to be able to support the Walker Family Cancer Centre that provides vital patient care right here in our own backyard."

Supporters rally behind the Big Move to make their contribution to cancer care in Niagara. While helping to build a strong, local cancer program, they also build a special bond and sense of community in the process. Year after year, Big Movers can be counted on to show up in a way that leaves you feeling inspired. This year's ride continued that proud tradition... even in the rain.

To learn how you can support the needs of the NHS:

Call: 905-323-FUND(3863) Visit: www.OneFoundationforNHS.com



(f) facebook.com/ OneFoundationForNiagaraHealthSystem



Powerful message

Hepatitis C Care Clinic staff getting the word out to help others

The message is simple but powerful for the team at Niagara Health System's Hepatitis C Care Clinic: "Know your status, get tested."

And they have good reason to deliver that message.

Niagara's rate of Hepatitis C is higher than the provincial average. And one in five people who have the virus aren't aware of it.

Yet it is treatable.

"We want people to know that there is compassionate support and treatment for Hepatitis C," says Brenda Yeandle, Clinical Leader of the NHS Addictions Programs in Port Colborne, which includes the

Hepatitis C Care Clinic. "Hepatitis C care providers are excited about the advancements in treatment we can offer."

Hepatitis C is spread when blood carrying the virus gets into the bloodstream of another person. The virus attacks the liver and if left untreated can result in the development of cirrhosis, liver failure and liver cancer.

To mark World Hepatitis Day on July 28, the NHS clinic hosted its second Hepatitis C awareness event at Centennial Square in Niagara Falls.

Led by Registered Nurse Karen Usick, a Community Co-ordinator at the Hepatitis C Care Clinic, the event included about 30 community agencies, illustrating Niagara Health System's strong partnerships with other healthcare and service provider organizations in the region.

In addition to educating the community about the wide range of services the Hepatitis C Care Clinic and community agencies provide residents, the event offered confidential Hepatitis C testing to those interested.



Registered Nurse Karen Usick, left, a Community Co-ordinator at the Hepatitis C Care Clinic in Port Colborne, and Brenda Yeandle, Clinical Leader of the NHS Addictions Programs, review literature.

"While thousands of Canadians are infected, many are not aware and remain undiagnosed," says Mrs. Usick. "It is vital to get tested if you think you may have been exposed to Hepatitis C. Our goal with the World Hepatitis Day event is to make people aware of the help that is available and to show them how they potentially could have been exposed. Like all nurses, I want to be able to help people and let them know about the support that is available to them." St. Catharines resident Randy Armstrong is proof that people with Hepatitis C can be treated and cured.

Mr. Armstrong learned he had the virus about five years ago. In January 2014, he started receiving treatment through the NHS Hepatitis C Care Clinic in Port Colborne.

After 24 weeks of treatments, he was free of hepatitis C.

Mr. Armstrong is now on a mission to help others. He volunteers as a Peer Support Worker at the Hepatitis C Care Clinic's satellite clinic in St. Catharines.

"We want people to know that there is compassionate support and treatment for Hepatitis C."

Brenda Yeandle

Clinical Leader, NHS Addictions Programs

"It's imperative you get tested," advises Mr. Armstrong. "You don't know that you have it and it could be damaging your liver without you even knowing it."

Asked why he wants to help others, Mr. Armstrong replied: "I want to give something back because of what they (the team at the Hepatitis C Care Clinic) have given me. I'm so grateful. They have a wonderful kind and gentle spirit and will be there with you every step of the way."

Mr. Armstrong also attended the awareness event in Niagara Falls to share his story with others.

"I have the chance to save somebody's life," he says. "You never know who you can help."

About the Niagara Health System Hepatitis C Care Clinic

The Hepatitis C Care Clinic is a part of the Addiction Services Program of Niagara Health System. The team consists of a physician trained in Hepatitis C care and treatment, two registered nurses, a social worker, outreach worker and clinic coordinator. The NHS clinic is located in Port Colborne (260 Sugarloaf Dr.) and there are satellite clinics in Niagara Falls (Greater Niagara General Site), St. Catharines (4 Adams St.) and Welland (Welland Hospital).

The team provides:

- Hepatitis C education.
- Counselling and support individual / group.
- Hepatitis C Testing, treatment, and treatment after-care; case management.
- Support for those who may not be suitable for treatment.
- Community outreach.
- Addiction assessment, referral, addiction recovery support and relapse prevention support; case management.

Outreach services:

The outreach worker's services are available to anyone in Niagara; you are not required to be a client of our clinic.

Call 905-378-4647, ext. 32552, to contact Don Crocock directly.





Sandy McBay knew early in her treatment at Niagara Health System's Walker Family Cancer Centre that she wanted to give back and be a voice for patients.

Diagnosed with breast cancer in July 2013, Mrs. McBay received both radiation and chemotherapy as part of her treatment, which was completed in December 2014. The Smithville resident says the healthcare team always ensured her voice was heard in the decisionmaking process involving her care.

"A community of care in which the patient/family are included, participating together, becomes a much more holistic, and I believe, healthy and effective form of care," says Mrs. McBay. "Aside from our trained doctors and nurses, I believe the patient is the expert about their health challenges and the changes they experience in their body. Including the patient/family as a unit of care in decision making and treatment just makes sense."

And now she's found the perfect way to give back and to be a voice for other patients.

Mrs. McBay is the co-chair of the Walker Family Cancer Centre's new Patient Family Advisory Council (PFAC).

The council, which held its first meeting in September, will help initiate improvements in care for patients and families navigating the cancer care system.

"Patients are the experts in their own care. They understand what they need and can bring their expertise to the Patient Family Advisory Council," says Dr. Janice Giesbrecht, NHS Medical Director of Oncology. "Their input will be valuable to future decision-making involving cancer care at Niagara Health System."

The 12-member advisory council consists of nine patients/family representatives and three staff members from the Walker Family Cancer Centre. Cochairing the PFAC with Mrs. McBay is Charlene Duliban, the cancer centre's Advance Practice Nurse and Patient Education Specialist.

The advisory council is an important addition to the cancer centre, says Ms. Duliban.

"We can't deliver quality care to patients without their input and we can't deliver the care they need unless we're incorporating their input and their story to provide not only what they need but how they need it," says Ms. Duliban. "We want to provide an individualized treatment plan for each patient, and how can you do that without the patient's input? We're asking members of the Patient Family Advisory Council to tell us what's right, what's wrong and we're asking them how do you think it can be better?"

Ms. Duliban admits she was amazed by the number of people who expressed interest in joining the PFAC after a call went out for participants. The response was so great that cancer centre staff decided to form sub-committees of the PFAC so all those who expressed interest in participating would have a chance to be part of the process. The subcommittees will provide input on such topics as patient education, environment and processes and report back to the PFAC.

The PFAC will decide together its structure, length of terms served, meeting frequency, operating procedures and bylaws.

Mrs. McBay applauds the NHS for launching the advisory council.

"Because I was included in that kind of approach to my own health care needs out of the Walker Cancer Centre, I know being involved in the PFAC will help widen that approach to care," she says. "When someone knows they have been heard, that tells me the organization is listening and placing importance on the patient's experience and perspective."

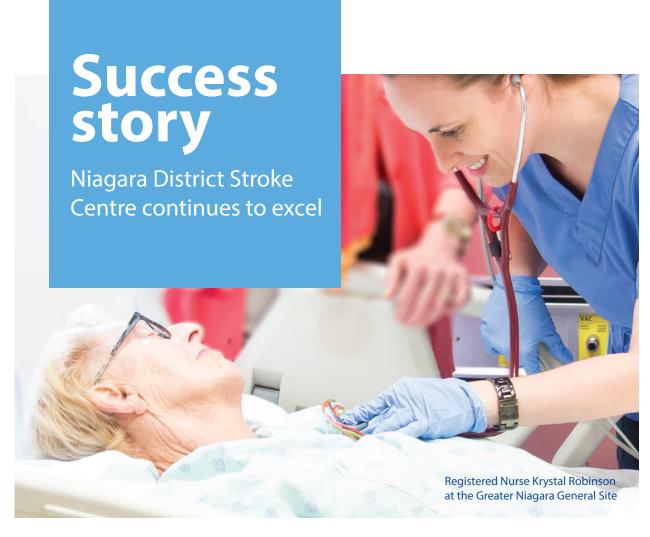
Feedback from patients and their families is vital in healthcare, she adds.

"It's incredibly important to be heard, and patients and families need to be heard. And from that listening and hearing, improvements in healthcare can be achieved."

"Patients are the experts in their own care. They understand what they need and can bring their expertise to the Patient Family Advisory Council."

Dr. Janice Giesbrecht

NHS Medical Director of Oncology



Niagara Health System's stroke program continues to excel in a number of key care areas.

A stroke report card released in June by the Ontario Stroke Network shows the Niagara District Stroke Centre as the best in the province for "door-to-needle time" (the time patients wait to receive a lifesaving treatment known as t-PA) at an average of about 30 minutes.

As well, the centre, based at the NHS's Greater Niagara General Site in Niagara Falls, continues to perform among the best in the province for:

- Proportion of stroke patients who received a brain CT or MRI within 24 hours of arrival at the **Emergency Department.**
- Percentage of patients discharged to rehabilitation.

"The expertise and commitment of the Stroke Team at the Greater Niagara General Site ensures Niagara residents receive high quality care," says program coordinator Leanne Hammond. "While Niagara performs well on most indicators, there is always opportunity for improvement and the team works collaboratively across the continuum to ensure alignment with Canadian Best Practice Recommendations."

Stroke symptoms usually appear suddenly and include loss of strength or numbness in the face, arm or leg, difficulty speaking, vision problems, severe and unusual headache and loss of balance. It is vital to call 9-1-1 as soon as signs and symptoms appear.

Derek McNally, NHS Executive Vice President, Clinical Services and Chief Nursing Executive, praised the stroke program's leadership, front-line staff, physicians, Niagara EMS and Hotel Dieu Shaver Health and Rehabilitation Centre for their achievements.

"The results of the report card illustrate the incredible work of our team in providing quality healthcare," says Mr. McNally. "Also important in the success of the stroke program has been our strong partnership with Hotel Dieu Shaver Health and Rehabilitation Centre and Niagara EMS."

Jane Rufrano, CEO, Hotel Dieu Health and Rehabilitation Centre, said: "The results of the report card demonstrate the Niagara District Stroke Centre's dedication to ensure Niagara stroke patients are receiving the best care. Our strong partnership allows a seamless transfer of patients from acute care to a

rehab setting, allowing patients the best possible level of care at the appropriate time."

Niagara EMS Chief Kevin Smith added: "With the release of this report card it illustrates the importance of how health care providers and systems work collaboratively to improve patient outcomes. Knowing early recognition signs of a stroke, access to 9-1-1 emergency medical dispatchers, response by paramedics and then transport to and care at the appropriate care facility are paramount to a patient's recovery."

"The expertise and commitment of the Stroke Team at the Greater Niagara General Site ensures Niagara residents receive high quality care."

Leanne Hammond

Program Coordinator

About the Niagara District Centre

The NHS's Niagara District Stroke Centre is the regional centre for stroke care. It is located at the Greater Niagara General Site, where a specially trained Emergency Department stroke team treats patients from across the region. This includes assessment for and administration of t-PA, a clot-busting drug that may reduce the effects of an ischemic stroke.





When Mavis Palman was admitted to hospital this summer after suffering a fractured hip, she was identified as a high risk for a fall.

Several preventive measures were taken by staff at the Complex Care Program at Douglas Memorial Hospital in Fort Erie to create a safe environment for Mrs. Palman.

Physiotherapy and nursing staff placed a laminated yellow falls logo outside of her room that identified Mrs. Palman to other healthcare professionals as a high risk for a fall.

Rehab Assistants Kelly Lea and Madison Harding worked with Mrs. Palman to teach her safe wheelchair use and mobility.

The NHS has a comprehensive Falls Prevention Strategy in place to help prevent and reduce falls in hospital. Every patient is assessed for their level of risk within 24 hours of being admitted to hospital or being transferred to a new unit. Other prevention measures that can be put into place at NHS when patients are deemed a high risk for a fall include:

- · Positioning the call bell for easy patient access while in bed;
- · Ensuring the bed is in the lowest position with brakes on;
- Having the patient where slip-proof socks.

The attention paid to Mrs. Palman by the Complex Care Program team at Douglas Memorial is an example of Niagara Health System's commitment to reduce patient falls across our sites. The focus on falls prevention is also part of our annual Quality Improvement Plan, which outlines our hospital's priorities and our action steps for quality improvement.

"At NHS, every team member plays an important role in falls prevention," says NHS Vice President Linda Boich, whose portfolio includes Quality and Strategy. "Everyone works as a team with a supportive environment and puts their patients' needs first."

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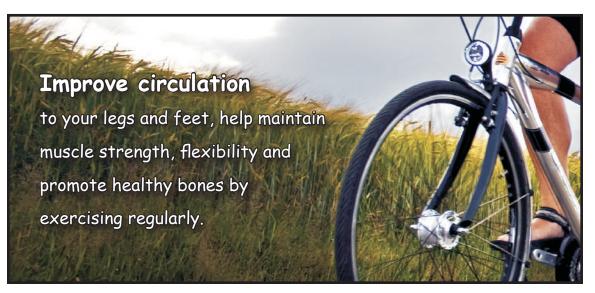


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Tell a member of your health care team if you have ever had an allergic or bad reaction to any medicine or food.



Make sure you know what to do when you go home from the hospital or from your medical appointment.

