

Spring 2018 issue

# niagarahealth NOW



## CELEBRATING 5 YEARS OF CARE

Find out how our St. Catharines Site has enhanced healthcare for residents across Niagara since 2013

Cover story on page 4



# niagarahealth

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## Message from Suzanne Johnston **President**

Welcome to the latest edition of Niagara Health Now. The stories in this issue offer important information for our community and highlight the work of our teams to provide extraordinary care to our patients and families.

Inside you'll read about the fifth birthday celebrations at our St. Catharines Site. The state-of-the-art hospital has been the catalyst for a number of significant enhancements to patient care over the past five years.

You will also learn about what to expect when visiting one of our Emergency Departments, and how we work with our academic partners to provide learning opportunities for students.

We will show you how technology is changing healthcare and improving experiences for those we serve. You will also see how our teams are embedding our Purpose, Vision and Values into our everyday lives and our culture at Niagara Health.

And there's so much more inside.

I hope you enjoy this issue!

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# Staff, patients embracing We Round

Proactive approach to rounding improves communication



**Registered Practical Nurse Hope Barrett speaks with patient Lawrence Kroeker, while Registered Nurse Sarah Bertin checks medical equipment at the St. Catharines Site.**

## The successful implementation of any change is dependent on the people it impacts –

and thanks to an extraordinary team of nurses and interprofessional staff who have embraced it, We Round is helping to enhance patient care.

Just ask Hope Barrett, a Registered Practical Nurse on Unit 3A at the St. Catharines Site. She will be the first to tell you that introducing We Round is positively impacting her interactions with patients and helping her to use her time more effectively.

“At first I thought I was doing it anyway, but now using We Round, I get everything done at once,” she says. “It’s like a checklist or a flowsheet, so I remember to do all of these things every time I check on someone.”

We Round is a structured, proactive approach to rounding in which nurses and other members of the healthcare team check on their patients at least every two hours, and ask specific questions related to pain, positioning, possessions, pumps and alarms, and personal needs each time.

We Round is an Extraordinary Care strategic initiative aimed at reducing falls, pressure injuries, and improving the safe sharing and exchange of information. It is now in place in every inpatient unit across Niagara Health sites.

Ms. Barrett said since We Round was introduced, she believes the number of call bells from patients has been reduced on her unit. “They always know when I’ll be back,” she says. “And they know that when I come back, they can address any of their needs at that time.”

Jocelyn Dooley, one of the many nurse educators who helped implement We Round, says members of the team who first started making We Round part of their work have seen the largest impacts to patient care. She says charge nurses have reported a “dramatic decrease” in the number of call bells they are receiving, too.

“Patients’ pain is better managed, patients are less agitated, communication with patients is improving because we are proactively addressing their needs,” says Mrs. Dooley, who is now a clinical manager. “People have embraced it really well.”

Patients in isolation feel like they’re spending more time interacting with nurses, too, Ms. Barrett adds. “They already feel isolated, so it’s comforting to them to know they won’t be alone for long.”



# Five years of care closer to home

Alexzander Carriere, the first baby born at the St. Catharines Site, joined us to also celebrate his birthday.



## ONE MILLION+

ways we are providing care closer to home

It was a celebration worthy of the successes our teams have achieved since our St. Catharines Site opened five years ago.

Patients – both past and present - visitors, local dignitaries and Niagara Health staff gathered on March 21 to celebrate the fifth birthday of the site by highlighting the care thousands of people in Niagara have received closer to home.

Even Alexzander Carriere, the first baby born in the hospital six hours after it opened, joined us to celebrate his fifth birthday. Everyone who attended sang Zander (as his family calls him) Happy Birthday, before he was given a special birthday gift – giant toy construction vehicles – from the physician who delivered him, Dr. Johan Viljoen, Chief of Obstetrics and Gynecology and Deputy Chief of Staff.

“I was the first guy who got to see those chubby cheeks,” Dr. Viljoen said.

Zander said he felt special “because I was the first baby born!” he exclaimed. He said receiving so much attention made him feel like Batman, his favorite superhero. “We’re just so happy to be here, celebrating five years with the hospital and five years with Zander,” said Ashley McDermott, Zander’s mom, who has three other children, two of whom were also born at the St. Catharines Site.

Since the St. Catharines Site opened on March 24, 2013, thousands of cancer, heart, mental health and other patients have had access to vital healthcare services right here in Niagara.

“The state-of-the-art St. Catharines Site has been the catalyst for a number of significant enhancements to patient care,” said Niagara Health President Suzanne Johnston. “It is an exciting time at Niagara Health as we continue our work to build a world-class hospital system where the quality of patient care and the work environment are second to none.”

At the event, Emmy-award winning musician Michael Kisur, from Welland, performed an emotional song he wrote about his healthcare journey. The song, Hope Lives Here, was inspired by the treatment he received through our Mental Health program, which he credits with saving his life.



**Welland musician Michael Kisur performed an emotional song, Hope Lives Here, he wrote about his healthcare journey.**

"This is the place where my life was saved, literally. I was in three years of depression and it was a very dark, dark time. All I thought about all of the time was dying," he said. "Thanks to the team and the countless people involved here, my life was saved."

John MacDonald, Chair of the Niagara Health Board of Directors, added: "We're excited to be celebrating the fifth birthday of our St. Catharines Site and the many accomplishments since the opening. Many hands contributed to our extraordinary successes over the past five years to enhance healthcare for residents across Niagara. Our journey together continues to create a Healthier Niagara."



**Zeau Ismail, Niagara Health's Director, Interprofessional Practice, Ethics & Research, and David Ceglie, Vice President of Clinical Operations at Hotel Dieu Shaver Health and Rehabilitation Centre, at the birthday celebration.**

The St. Catharines Site ushered in a new standard of hospital care in Niagara. Here's a snapshot of examples of care our teams have provided since the opening.

#### CARDIAC CARE

Cardiac services have significantly expanded in recent years due largely to the opening of the Heart Investigation Unit.

**8,750**

cardiac catheterizations, a new procedure to diagnose the severity of a patient's cardiac disease

**2,012**

Percutaneous Coronary Interventions, a new non-surgical procedure that opens blood vessels in the heart to remove blockages

#### MENTAL HEALTH AND ADDICTIONS

The Mental Health and Addictions Program has introduced a number of new specialized programs, including services for patients requiring longer-term treatment in hospital and psychiatric emergency care.

**141,392**

outpatient visits for patients who did not require an overnight stay in hospital

**29,802**

Emergency Crisis and Psychiatric Emergency visits

#### CANCER CARE

The Walker Family Cancer Centre brought radiation treatment and other oncology services to Niagara for the first time.

**3,691**

patients received radiation treatment

**64,244**

radiation treatments

**4,133**

patients received chemotherapy treatment


**54,005**

chemotherapy treatments

Numbers projected to end of March 2018.

Visit [www.niagarahealth.on.ca](http://www.niagarahealth.on.ca) for more interesting facts about the St. Catharines Site





# How technology is changing healthcare

Ontario Telemedicine Network helps to provide timely patient care from a distance

**Penny Beechman participates in Niagara Health's Pain Group using the Ontario Telemedicine Network inside a room at the Greater Niagara General Site in Niagara Falls.**

## Penny Beechman is grateful to take part in the Pain Group in the Mental Health and Addictions Program at Niagara Health.

Every Monday, Mrs. Beechman, who has chronic back pain, meets with fellow group participants and a healthcare provider.

But while other members of the group are in a room at the St. Catharines Site, Mrs. Beechman attends virtually through video conferencing at the Greater Niagara General Site in Niagara Falls.

It is difficult for Mrs. Beechman to travel to St. Catharines from her Niagara Falls home. When the Niagara Health team learned of this, they asked if she'd be interested in joining the group through video conferencing using the Ontario Telemedicine Network (OTN).

Telemedicine uses telecommunications technology to provide clinical healthcare in Ontario at a distance. OTN is a not-for-profit organization funded by the Ontario Ministry of Health and Long-Term Care charged with building a sustainable and responsive virtual care system. (Learn more about OTN online at [www.otn.ca](http://www.otn.ca))

Niagara Health uses telemedicine for patient care in several different programs.

The Mental Health and Addictions Program is a leader in this area, having used the technology more than 1,000 times for patient care last year.



Mrs. Beechman says she's thankful for the technology.

"It's a big relief and it's kind of cool," she says of OTN. "The group has been a great experience. I have the support and I know I'm not alone. I have other people I can share my story with in the group. I've learned a lot."

OTN was first introduced in the Mental Health and Addictions Program more than four years ago, so psychiatrists at the St. Catharines Site could consult with patients who presented with mental health or addictions issues at one of our other sites, allowing for more timely care for patients.

Psychiatrists who are on call can also use the technology from home, consulting with patients at one of our sites.

Dr. Amin A. Muhammad, Niagara Health's Interim Chief of Mental Health and Addictions, says telemedicine has been a positive experience for patients, their families and staff.

"I'm very excited about this," says Dr. Muhammad.

"I have the confidence wherever the patient is, we can see them if we have an OTN connection there. There are no limitations. It's important we can be one-to-one with patients and be able to see them."

Barb Pizzingrilli, Director of the Mental Health and Addictions Program, adds: "I think it's wonderful. This certainly gives us the ability to provide care close to home for patients."

The program is continuously looking at opportunities to expand programming offered through OTN technology.

*"It's a big relief and it's kind of cool. The group has been a great experience. I have the support and I know I'm not alone. I have other people I can share my story with in the group. I've learned a lot."*

**Penny Beechman**  
**Patient**



**Penny Beechman inside her Niagara Falls home.**


**Here are other examples of how telemedicine is used at Niagara Health to provide care:**

## STROKE PROGRAM

The Niagara Health District Stroke Centre at the Greater Niagara General Site in Niagara Falls has been using telemedicine for more than a decade. Here's an example: When a patient suffering a stroke is brought to the Niagara Falls Emergency Department, time is of the essence to care for them, which includes being seen by a neurologist immediately. If a neurologist is not at the hospital, they can evaluate the patient virtually through telemedicine from their office or home. The neurologist is then able to determine the next treatment steps for the patient, including the possibility of administering t-PA, a clot-busting drug that may improve an ischemic stroke.

## ONCOLOGY PROGRAM

Telemedicine is used extensively for patient care within Niagara Health's Oncology Program. For example, Niagara cancer patients requiring consultation with a medical expert at another cancer centre in Ontario can connect with the healthcare provider through videoconferencing, reducing the need to travel.



*"At Niagara Health, we allow for natural labour whenever possible."*

**Dr. Johan Viljoen**, Niagara Health  
Deputy Chief of Staff, Chief of Obstetrics  
and Gynecology

## Focus on Quality

We're proud of the exceptional work, research and innovation happening across our sites to improve patient care and safety. Throughout the year, this work, which includes many quality initiatives, is also being recognized and highlighted outside Niagara. Here are some examples:

### Women's and Babies' team delivers top results nationwide

Niagara Health was rated as a top-performing hospital for conducting fewer low-risk caesarean sections compared with the national average.

The Canadian Institute for Health Information rated Niagara Health in the top 10 per cent of large community hospitals nationwide for performing fewer low-risk c-sections in the last three years than the Canadian average. Niagara Health has achieved this rating since centralizing maternal services at the St. Catharines Site when it opened in 2013.

Dr. Johan Viljoen, Niagara Health Deputy Chief of Staff,

Chief of Obstetrics and Gynecology, says that while c-sections have become more commonplace over the last decade, there has been a greater emphasis among healthcare providers everywhere to reduce the procedure unless clinically essential.

"At Niagara Health, we allow for natural labour whenever possible. Less intervention leads to better outcomes for mom and baby," he says. "This significant shift has occurred since we created one specialized unit because it allowed us to standardize our practices and enhance the team approach to patient care."





## Program earns national patient safety award

Niagara Health's Venous Thromboembolism (VTE) program received the Excellence in Patient Safety Award from the Canadian College of Health Leaders.

VTE is the formation of blood clots in a vein. It is one of the most common complications of hospitalization and the most common preventable cause of hospital death. The Niagara Health initiative focused on improving VTE daily risk assessment processes for every admitted patient, and starting preventative treatment if needed.

"The goal of this initiative is to ensure patients with VTE consistently receive safe, reliable, high quality

care," says Debbie Smith, the VTE project lead and Clinical Director at the Welland Site. "I am pleased to report that Niagara Health is achieving this goal."

The VTE prophylaxis project is a strong example of a patient safety initiative that has achieved sustainability, scale and spread, by collaborating across all levels of the organization, engaging patients, and following through on implementation and measurement, Ms. Smith says.

"This makes our patients markedly safer, strengthens our systems, and improves the safety culture of our organization."

## AHEAD program in the spotlight

The Anterior Hip Early Ambulation and Discharge (AHEAD) Project team was recently recognized for their innovative work to perform minimally invasive hip surgeries at the Welland Site. The surgery is performed using an advanced operating room table and minimally invasive techniques under a fine-tuned anesthesia practice.

This allows the patient to be mobile approximately five hours after surgery with the assistance of specially trained physiotherapists. Most patients are home

within 24 hours and some have even gone home the day of their surgery with the support of a discharge planner.

The team works together to continually evaluate the care needs of this patient population through ongoing nursing, physiotherapist and occupational therapist feedback along with patient follow-up phone calls. The AHEAD program team recently had their work featured at the Ontario Hospital Association's HealthAchieve Conference in Toronto.

## Niagara Health recognized for leadership on Never Events

The Never Events for Hospital Care Safety Initiative is a series of strategies that were put into place at Niagara Health to reduce the number of Never Events and increase prevention awareness. A Never Event is a patient safety incident that results in serious patient harm or death that can be prevented by using organizational checks and balances.

This concentrated effort to reduce and prevent Never Events resulted in the Canadian Patient Safety Institute

(CPSI) recognizing Niagara Health's leadership on Never Events.

CPSI interviewed Niagara Health to highlight the role the organization has taken in shifting the culture on Never Events and to share processes other hospitals could use to identify their own improvement opportunities. The initiative was also featured at the HealthAchieve conference.



**Occupational Therapist Michelle Lowry, Patient Care Director Patty Welychka and Clinical Manager Ruth Peters with the AHEAD Program poster that was featured at the Ontario Hospital Association HealthAchieve Conference in Toronto.**

A photograph of two healthcare professionals in a hospital hallway. On the left, a woman with blonde hair tied back, wearing blue scrubs, holds a clipboard and looks down at it. On the right, a woman with dark hair, wearing a grey top, a brown cardigan, and a stethoscope, looks at the clipboard. Both are smiling. The background shows a hospital hallway with a reception desk and computer monitors.

# How we care for you in the Emergency Department

Niagara Health teams committed  
to providing safe, quality care  
in a timely manner

Registered Nurse Laura Blakely, left, and Nurse Practitioner  
Sandi Pullano inside the Emergency Department at the  
Greater Niagara General Site in Niagara Falls.





# Niagara Health's Emergency Departments and Urgent Care Centres see more than 200,000 visits in a year – about 550 a day – making them the busiest areas of the hospital.

"There is always a lot of activity in our Emergency Departments and Urgent Care Centres. They are unpredictable environments and no two days are the same," says Derek McNally, Executive Vice President, Clinical Services and Chief Nursing Executive at Niagara Health.

"What is certain is our healthcare team's commitment to provide patients with safe, quality care in a timely manner."

Knowing what to expect during a visit can help improve a patient's experience.

Emergency Department care focuses first on diagnosing the patient and second on determining whether they can be safely treated within the Emergency Department and discharged home, or whether they need to be admitted to hospital for further treatment.

Urgent care is medical attention and treatment for people needing immediate care for illness or injury that is not serious enough for a visit to the Emergency Department. No appointments are necessary, and wait times are typically shorter in Urgent Care Centres than in Emergency Departments.

Emergency Departments are significantly busier than Urgent Care Centres, and there are often questions about how Emergency Departments are organized to care for patients.

The patient's journey starts with a specially trained Triage Nurse, who is located at the front of the Emergency Department and conducts the initial assessment of the patient. This assessment may also include some initial testing.

## URGENT CASES SEEN FIRST

"Emergency Departments do not see patients on a first-come, first-served basis," says Dr. Tom Stewart, Chief of Staff.

"Hospitals across Canada use the same triage scale when assessing patients to ensure the most urgent cases are seen first."

Although Niagara Health does its best to see everyone on a timely basis, things can change quickly in an Emergency Department.

"Many factors contribute to the overall length of time a patient will spend in an Emergency Department. For example, if someone is brought in suffering from a heart attack or has been in a serious car accident, they will be seen before other patients who have less urgent conditions and can safely wait," says Dr. Stewart.

"We recognize that waiting can be stressful, inconvenient and frustrating for our patients and families and appreciate people's understanding and patience."

When the patient is brought inside the Emergency Department, a nurse may do another assessment before the patient is seen by a physician or nurse practitioner (a specially trained advanced practice nurse).

To diagnose the patient, the physician or nurse practitioner may order bloodwork, X-rays, ultrasound, and other tests, a process that could take several hours to complete.

Throughout this period, the patient could expect to see a number of different members of the healthcare team, including lab assistants, medical imaging technologists and respiratory therapists. The Emergency Department physician may also request a consultation with a specialist in cardiology, for example, if the patient is having heart issues, or an orthopedic surgeon for a serious bone break.

The Emergency Department physician or nurse practitioner will review the test results with the patient and discuss suggested next steps in care. It is at this point that the patient will either be discharged, with instructions for follow-up care if required, or admitted to an inpatient unit.

About one in eight patients who come to Niagara Health's Emergency Departments is admitted.

*Continue reading on page 14*





**Registered Nurse Jennifer Cox speaks with patient Daniel Pattison at the St. Catharines Emergency Department.**

## SAFE, QUALITY CARE

"Our healthcare teams work hard to serve everyone as quickly as they can, but we know people have concerns and are sometimes frustrated by how long an Emergency Department visit can take," says Mr. McNally.

Although not obvious, activity in other areas of the hospital can significantly influence wait times in the Emergency Department. This also includes the length of time patients admitted to an inpatient unit from the Emergency Department may have to wait before they are transferred to a bed.

For example, like other hospitals, Niagara Health cares for a number of patients who may no longer require the resources of the hospital. Many of these patients cannot be safely discharged to another setting without home care or additional services. And some may need different levels of care and wait in hospital beds for space at other healthcare facilities, such as a long-term care home.

"In addition to caring for patients who cannot be safely discharged, we continue to see a high number of patients who are admitted to hospital with serious health conditions," says Mr. McNally. "These increased pressures impact the movement of patients through our Emergency Departments and create backlogs because our inpatient units are full.

"Improving access to care is a provincial priority, and Niagara Health works closely with the Local Health Integration Network, Ministry of Health and Long-Term Care and other important community partners to find solutions. Our commitment to all of our patients and families is to continue to introduce new initiatives that enhance the experience for everyone."

## DID YOU KNOW?

- Emergency Departments are busiest in the afternoon and early evening.
- About 32,000 Emergency Department visits (20 per cent of the total number) in Niagara last year were for minor concerns, like sore throats or prescription renewals that could have been looked after more quickly at a family physician's office, walk-in clinic or other primary care setting in the community.
- Taking an ambulance to hospital may not impact the time it takes to see an Emergency Department physician. You will be seen by the physician based on the severity of your health condition. Depending on your condition, you may be placed in a chair in the waiting room to wait.
- Niagara Health displays real-time wait times in its Emergency Departments and Urgent Care Centres on its website ([www.niagarahealth.on.ca](http://www.niagarahealth.on.ca)) and in waiting rooms to help people make decisions about their care.
- Niagara Health runs a year-long educational campaign ([www.niagarahealth.on.ca/options](http://www.niagarahealth.on.ca/options)) to help the community understand medical options and receive the right level of care as quickly as possible.
- It is important to bring an up-to-date list of medications (prescriptions, over-the-counter medications and natural health products) when coming to an Emergency Department.



# What to expect when coming to Emergency Departments

Niagara Health's team is committed to providing **safe, quality care in a timely manner.**

Patients are seen on a priority basis, not on a first-come first-served basis. This ensures the sickest patients get the care they need first – even though they may arrive after other patients.

## What influences the wait time?

Wait times can vary and change quickly due to a number of factors, including:

- The severity of each patient's condition or illness
- The number of patients seeking medical attention
- An incident such as a serious car accident, which can unexpectedly and significantly impact the wait time for others
- The high number of patients in other areas of the hospital, which impacts movement through the Emergency Department

## X-rays and other tests

The physician or nurse practitioner may order tests such as bloodwork, X-rays and ultrasound. Average wait times for results of these tests are:

- X-rays: 1 hour
- Bloodwork: 1.5 hours
- Ultrasound or CT scans: 2 hours

Once complete, the Emergency Department physician or nurse practitioner will review the test results with the patient and discuss suggested next steps.

## If your condition changes

Please let a member of our team know immediately if your condition changes or you begin to feel worse. This will help us meet your needs in a timely manner.

**Always call 911 for Emergencies or if you are uncertain about the seriousness of your condition.**



**Arrive at Emergency Department**  
via walk-in or ambulance



**Assessed by Triage Nurse**

If a patient has a life- or limb-threatening condition, they are seen immediately. Others may follow this process



**Registration**

**Waiting Room**



**Seen**  
by Nurse in Emergency Department



**Seen**  
by Physician  
or Nurse  
Practitioner



**Test/Orders**



**Treatment**



**Reassessment**  
by Physician or Nurse Practitioner



**Discharge**



**Referral to  
Outpatient Clinic**



**Consult/Admission  
to Hospital**



The Women's and Babies' team at Niagara Health donated school supplies to Community Care as part of the Acts of Kindness Workplace Challenge.

## How we are living our CORE values

### Acts of Kindness Challenge is spreading

You may see positive and inspiring messages like “You are enough” and “Be Kind” painted on waiting room windows or on rocks outside on the ground at our sites.

Niagara Health team members are painting the uplifting messages as part of our 1,000 Acts of Kindness Workplace Challenge.

The idea for the Acts of Kindness challenge was originally generated by our Information and Communications Technology team in February 2017, after the launch of our workplace Be Kind Campaign on Pink Shirt Day, a day when people wear a pink, blue or purple shirt to symbolize a stand against bullying.

Members of the team were looking for a way to support the Extraordinary Care Area of Focus of Niagara

Health's Strategic Plan, given they do not provide direct patient care.

The department came up with the idea of performing 1,000 acts of kindness to encourage our culture of kindness. The grassroots initiative grew from there.

Other departments quickly jumped on board, volunteering to participate in the Acts of Kindness Challenge.

During the challenge, our teams have joined the global Kindness Rocks movement by painting inspiring messages on rocks, donated school supplies, hats, mittens and boots to children in need within the community, and purchased newborn sleepers and blankets for infants who are born into the care of Family and Children's Services.

So far, 10 departments have participated in the challenge, completing more than 10,000 acts of kindness.

“That’s more than the equivalent of one act of kindness for every employee at Niagara Health, working together for the best possible healthcare,” said Flo Paladino, Executive Vice-President, People, Organization and Development. “We know that kindness has a ripple effect. Imagine the impact.”





## Making a pledge for positive change

Look up and help out.  
It's a simple yet powerful pledge.

It's a pledge that Niagara Health team members have committed to in support of Health Quality Ontario's Change Day, a global movement for positive change that took place in November.

Our Interprofessional Advisory Committee, Medical Advisory Committee and Nursing Advisory Committee members all pledged to live our CORE value of Compassion in Action.

"We have committed to being aware of our environment and putting away our electronic devices while walking through our hospital facilities," says Lori MacCullough, Director of Nursing Practice, Education and Elder Care. "We are committed to helping others in need through wayfinding, a friendly 'hello', or a shoulder to cry on."

Their pledge was a springboard for positive change.

In just a few days, more than 300 staff, physicians and volunteers had already committed to living Niagara Health's CORE values of compassion, optimism and achieving ambitious results.

"There is also a lot of great work taking place to embed our Purpose, Vision and Values into our everyday lives and our culture at Niagara Health," says Niagara Health President Suzanne Johnston. "It will be fun to watch this movement build as more members of our team make a pledge to live our values."

## Niagara Health supports United Way

Niagara Health employees raised an incredible **\$78,714** during the United Way workplace campaign in October. In addition to generous one-time donations and payroll deductions, staff placed change jars on their units and purchased "A Healthier Niagara Starts Here" T-shirts to wear on Dress Down Fridays to show their support.

"I am so proud of our caring team and our culture of philanthropy here at Niagara Health," says Suzanne Johnston, Niagara Health President and Co-Chair of the Niagara Health workplace campaign. "Every dollar we raised came directly from our caring and compassionate team of staff, physicians, and volunteers. It supports essential programs and services in our community, many of them partners in care."

Staff, physician and volunteer participation continues to grow each year, which inspired our theme of "getting better, every year."

The campaign raised  
**\$3,000**  
more than last year.



Niagara Health's Interprofessional Advisory Committee, Medical Advisory Committee (shown above) and Nursing Advisory Committee members all pledged to live our CORE value of Compassion in Action.



# Learning opportunities plentiful for students

Niagara Health works with academic partners to provide learning opportunities

**Kirsty Moreau says she's grateful for her placements at Niagara Health while she was a student.**

## Kirsty Moreau has come full circle with Niagara Health.

Ms. Moreau completed several student placements at Niagara Health while she was enrolled in the Practical Nursing Program at Niagara College between 2008 and 2010.

After graduating from Niagara College, she got a job with Niagara Health as a Registered Practical Nurse (RPN).

A few years later, she enrolled in an RPN to Registered Nursing (RN) bridging program at Athabasca University. She completed her final placement for the program at the Welland Emergency Department in May 2016, and she landed a position as an RN in the same department after graduation.

Ms. Moreau is grateful for her many placements at Niagara Health while she was a student.

"It was great working with the staff," she says. "They were friendly, helpful and approachable."

She says the placements, which included working in Women's and Babies, Complex Care and Surgical, show nurses how many "different experiences" are available at Niagara Health.

"It opened up our eyes to all of the possibilities in nursing at Niagara Health. There were a lot of options."

Every year, Niagara Health supports hundreds of student placements like Ms. Moreau's across our sites.

Last year alone, there were more than 1,900 student placements in clinical and clinical-support positions. We have more than 80 academic partners with the largest number of students coming from Niagara College, Brock University and McMaster University.

"Collaboration is vital in healthcare and we are delighted to work closely with our academic partners to provide learning and education opportunities in a

number of healthcare-related fields," says Zeau Ismail, Niagara Health's Director of Interprofessional Practice, Ethics and Research. "In addition to the students learning from our teams, we also learn from them and their experiences."

As a learning organization, Niagara Health also has medical students in residence, which means better care for our patients by raising the standard across the whole interprofessional team.

Clinical placements for medical students are offered at Niagara Health's Niagara Falls, St. Catharines and Welland sites through a partnership with McMaster University's School of Medicine – Niagara Campus.

*"Collaboration is vital in healthcare and we are delighted to work closely with our academic partners to provide learning and education opportunities in a number of healthcare-related fields."*

### Zeau Ismail

*Niagara Health's Director of Interprofessional Practice, Ethics and Research*

We also partner with Brock and McMaster on I-EQUIP – the Interprofessional Education for Quality Improvement Program. I-EQUIP is an extension of the classroom, providing an opportunity for Brock and McMaster students and Niagara Health's staff to work together on a variety of quality initiatives that improve patient care.

The program provides participants with an opportunity to design and implement a quality improvement project in an interprofessional team, developing skills in leadership, and influencing change in the healthcare setting.

## MEDICAL STUDENTS AT NIAGARA HEALTH

We have forged a strong partnership with the Niagara Regional Campus of McMaster University's Michael G. DeGroote School of Medicine. The campus opened in 2008 at the former St. Catharines General Hospital site, and expanded to Brock University in 2012 and the new Niagara Health: St. Catharines Site in 2014.

Each year, the Niagara Regional Campus accepts 28 new students into the three-year undergraduate program, where they will complete their clerkship at Niagara Health sites, working alongside and learning from our healthcare teams.

The campus also has approximately 25 post-graduate residents each year, who complete their residency at Niagara Health sites in such areas as family medicine, general surgery, emergency and mental health. Upon completion of their post-graduate studies, many of the physicians have returned to practice medicine in Niagara.



# Putting the focus back on mealtime

It's a shocking statistic.  
Nearly half of all patients  
admitted to Canadian  
hospitals are malnourished.

Niagara Health dietitians Andrea Digweed and Lina Vescio have seen firsthand the preventable health impacts malnutrition can have on patients.

"They may come to the Emergency Department for weakness, and they're treated for that and sent home, but it's the underlying issues related to aging that bring them back in," says Mrs. Digweed. "It's not being able to buy groceries or prepare meals that may be contributing to the problem. The more nutritious food you eat, the better your overall health. Tea and toast isn't going to cut it."

Seniors can face many challenges to eating at home such as limited income to buy groceries, lack of interest in cooking or eating when living alone and age-related health changes.

According to the Nutrition Care in Canadian Hospitals study, malnutrition is a wide-spread problem that if left untreated could cause a continuous circle of issues for patients. These patients experience longer hospital stays and are at higher risk for readmission within 30 days. The majority are seniors.

As one of five Canadian hospitals to participate in more recent research conducted by the University of Waterloo, Niagara Health has been involved from the early stages in identifying solutions to address patient malnutrition.

As a result of our work with Waterloo's More 2 Eat study, new processes were introduced at Niagara Health to assist our teams in identifying malnourished patients and supporting them with resources to improve nutrition both while in hospital and after they are discharged. Patients admitted to Niagara Falls, St. Catharines and Welland sites are now asked two screening questions:

1. Have you lost weight in the last six months without trying?

2. Have you been eating less than usual for more than a week?

When a patient answers yes to both questions, it triggers a referral to a hospital dietitian who develops a personalized nutrition plan to find foods they prefer eating or offering supplements and fortified menu items, among other options.

"The Niagara Health team has been very successful in their activities, ensuring that patients with nutrition problems are identified on admission and treated in a timely manner," says Professor Heather Keller, Schlegel Research Chair in Nutrition and Aging at the Schlegel-University of Waterloo Research Institute for Aging.

"Patients also indicated they encounter quite a number of barriers to eating even while in hospital," adds Marilee Stickles-White, Niagara Health Regional Manager, Clinical Nutrition Services. "Some of those barriers are simple things that we take for granted like opening packages on a meal tray."

The program also involves recruiting volunteers to provide added support and socialization to patients during mealtime. "Mealtime is a social time," says Mrs. Stickles-White. "It's nice to see a friendly face encouraging them to eat."

Niagara Health is already seeing positive results. The average number of mealtime barriers identified by patients in hospital has been significantly reduced.

The project also helps patients return home by connecting them with community supports like Meals on Wheels and grocery delivery services, for example, as well as community dietitian services.

"It's working with our community partners to ensure these patients have the support they need when they go home so we don't see them back for the same reasons," Mrs. Vescio says. "We've noticed the benefits of getting to them quicker. Getting to them quicker means we can avoid barriers, get the proper nourishment set up such as supplements or preferred foods - so when they get home, we can start them on the road to healthier eating."



Niagara Health dietitians Andrea Digweed and Lina Vescio have seen firsthand the preventable health impacts malnutrition can have on patients.

“Mealtime is a social time.  
It’s nice to see a friendly face  
encouraging them to eat.”

**Marilee Stickles-White**

*Niagara Health Regional Manager,  
Clinical Nutrition Services*

**For a list of Meal and Food Support Services in Niagara,  
please visit our website [www.niagarahealth.on.ca](http://www.niagarahealth.on.ca)  
and search for Meal and Food Support Services.**





**Tom and Lorraine Paolone  
at their Welland home.**





# 'Care was unbelievable'

## Life-saving procedure now provided in Niagara

### Tom Paolone was grateful when he learned a procedure to repair an aneurysm in his aorta could be performed in Niagara.

The Welland resident was the first patient to receive the Endovascular Aneurysm Repair (EVAR) procedure at the St. Catharines Site. The introduction of the life-saving procedure to Niagara earlier this year is another example of care closer to home for residents in the region.

"It was fantastic, especially for my wife Lorraine. She didn't have to worry about travelling a long distance or booking a hotel room out of town. It took a lot of worry off of my shoulders," says Mr. Paolone, who spent one night in hospital after the procedure before returning home.

"I was very thankful to have the procedure done in Niagara. I was away from home in the hospital, but the healthcare team made me feel at home. I was in good hands."

"The care was unbelievable," adds Mrs. Paolone. "We could not ask for better care. I felt supported totally. They were beyond fabulous."

Niagara Health surgical teams started performing the innovative EVAR procedure in February 2017.

"This is another example of improved access to care for Niagara residents," says Jaelynne Sonke, Clinical Manager of the St. Catharines Site Operating Room,

Post Anesthetic Recovery Room and Day Surgery.

"The introduction of this minimally invasive procedure to Niagara also reflects our continued focus on innovation."

Dr. Surianarayanan Rammohan, one of three Niagara Health Vascular Surgeons who performs the EVAR procedure, adds: "Our surgical teams are delighted to be able to provide the EVAR procedure in Niagara. The introduction of this service illustrates the extraordinary care provided at Niagara Health."

*"The care was unbelievable. I felt supported totally."*

---

**Lorraine Paolone**  
Tom Paolone's wife

The aorta is the main vessel that carries blood from your heart to the rest of your body. An aneurysm occurs when part of this vessel has weakened and ballooned out. The major complication is aneurysm rupture, which requires life-saving surgery. Abdominal aneurysms can be repaired in two ways, depending upon a patient's condition:

- Open Repair, in which a large incision is made in the abdomen to expose the aorta and the aneurysm is repaired with a graft.
- EVAR, a less-invasive technique in which a surgeon makes a small incision in the groin and threads special instruments through a catheter in the artery to the aneurysm, where a stent and graft are placed to support the aneurysm.

Patients who receive the EVAR procedure spend less time in hospital after the procedure, often returning home the following day.

# niagarahealth foundation

## Bringing advanced breast screening to Niagara Health

For many people, a milestone birthday often consists of a celebration - gifts, party decor, friends and family. For Kym G. of St. Catharines, turning 50 meant something completely different. It was the beginning of her journey with breast cancer.

Breast cancer is the most common cancer in Canadian women, affecting one in eight women during their lifetime. Women aged 50 to 74 are at higher risk and are encouraged to book regular mammograms.

So, when her birthday arrived, Kym booked a mammogram at Niagara Health. She had been for several mammograms before and didn't think this one would be any different. But this time it was - Kym was diagnosed with Stage 2 breast cancer.

In order to continue providing the highest quality of care for patients like Kym, it is essential that screening technology at Niagara Health is kept up to date. The introduction of a special type of mammogram called Tomosynthesis will ensure our patients receive the best available care when they need it.

"Tomosynthesis is the latest technology in breast imaging that was developed to improve the accuracy of mammography by capturing 3D images of the breast," says Niagara Health Radiologist Dr. Nasim Hemmati. "These 3D scans not only provide improved images, they also help reduce the need for recall appointments for additional assessment and biopsies. Ultimately, this spares patients a great deal of anxiety."

The advanced technology is becoming the preferred platform for breast screening and diagnosis. The 3D images allow the breast tissue to be examined incrementally and seen with far greater detail and clarity, which is especially valuable for imaging women with denser breast tissue. Widely considered "mammography only better," this state-of-the-art technology will help detect cancers earlier leading to better outcomes for patients.



**A file photo of mammography equipment at Niagara Health.**

Kym says there have been a few bumps along the way, or "wobbles" as she likes to call them, but overall she is grateful to have been screened locally through the Ontario Breast Screening Program at Niagara Health and cared for close to home at the Walker Family Cancer Centre. While Kym is hopeful that her cancer journey is behind her, she knows that she will need additional screening well into the future.

By making a gift to Niagara Health's Breast Screening Program, you can help patients like Kym celebrate many more milestone birthdays.



**Dr. Nasim Hemmati**  
Niagara Health Radiologist

To learn how you can make an impact at Niagara Health, contact Niagara Health Foundation:

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