



Supervisor, Corporate Nursing Executive (CNE) and Chair, Medical Advisory Committee (MAC) Report

October 2024

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Strategic and Operational Priorities

Strengthening our governance

David Musyj has been [appointed by Ontario as the Supervisor for London Health Sciences Centre](#) (LHSC) to strengthen the organization's operations, finances, and governance. His focus is to ensure LHSC's programs and services continue without interruption, while working closely with the executive team, the Medical Advisory Committee, and the government to strengthen leadership and accountability. To foster community engagement, a Community Advisory Committee has been established to ensure that community input is actively considered in the decision-making process.

London Health Sciences Centre Board of Directors update

On September 25, LHSC's Board of Directors announced their [decision to voluntarily step down](#) from their positions. The Board expressed gratitude to Team LHSC for their commitment to patient care and community service, emphasizing their support for the appointment of a supervisor to guide the organization.

Introducing London Health Sciences Centre Research Institute (LHSCRI)

LHSC and St. Joseph's Health Care London launched our new research institutes through a full-day event on October 16, 2024. [London Health Sciences Centre Research Institute](#) (LHSCRI) will advance medical science by aligning research to LHSC's unique clinical programs, integrating research with clinical care, offering more opportunities for patients to participate in research, better supporting and highlighting LHSC's research teams, and focusing resources. Through research, LHSCRI is pioneering new discoveries, improving patient outcomes, and supporting research teams in their pursuit of innovation. The launch event included open houses at Victoria and University hospitals, and was covered by [The London Free Press](#), [CTV News London](#), [Global News Radio 980 CFPL](#) and [myFM Strathroy](#).

Advancing accessibility and inclusion at LHSC

LHSC has [introduced its 2024-2029 Accessibility Plan](#) to enhance accessibility and inclusion within the organization. The plan outlines strategies to remove barriers and improve access to services, spaces, and information for patients, visitors, community members, staff, and physicians. It focuses on five key areas including general accessibility, customer service, employment, information and communications, and the design of public spaces. The plan was developed with input from the community and Team LHSC.

Interdisciplinary team explores London's unique approach to addressing homelessness

In London, Ontario, over 1,700 people are experiencing homelessness. To address this, more than 200 individuals from 70 organizations worked together to develop the Health & Homelessness Whole of Community System Response, a strategic roadmap to support those facing complex health and social challenges and help them access permanent housing. The Centre for Research on Health Equity and Social Inclusion (CRHESI) is now [assessing the program's effectiveness](#) and areas for improvement. Funded by Western, LHSC, and local businessman Ryan Finch, CRHESI has recruited two research managers to oversee over 100 researchers. The evaluation focuses on the experiences of individuals facing homelessness, care providers, and the broader community as London implements wrap-around health care and housing supports for the most vulnerable. Results will be shared with City Council starting in July 2025.

Organizational Updates

Learning on National Day for Truth and Reconciliation

On September 30, Team LHSC participated in an important learning opportunity on National Day for Truth and Reconciliation. The lunch and learn session, titled "Residential Schools' Missing Children: A Forensic Perspective," featured Dr. Rebekah Jacques, [add title to show she is from LHSC], and included an informative discussion. Attendees reflected on the history of Residential Schools in Canada and the lasting trauma experienced by survivors. These learning opportunities provided by LHSC's Indigenous Health team align to LHSC's fundamental commitments to advance Truth and Reconciliation.

Bridging the digital divide in health care

Patients at London Health Sciences Centre and St. Joseph's Health Care London now have easy access to one-on-one help with virtual care appointments through a [digital navigator](#). While virtual care is not new and many patients benefit from video-based appointments, some face challenges navigating the technology. Digital navigators provide personalized assistance, helping patients set up software and troubleshoot technical issues to ensure a seamless virtual care experience. The program ensures that all patients, including those in rural areas or with mobility challenges, have equal access to care.

LHSC receives funding to improve care for patients requiring or at risk of long-term ventilation

LHSC has been named [one of three provincial lead hubs for the Long-Term Ventilation \(LTV\) Strategy](#), supported by permanent Ministry of Health funding. Along with The Ottawa Hospital and Michael Garron Hospital, and with oversight from University Health Network (UHN), LHSC will improve care for patients requiring long-term ventilation and reduce pressure on intensive care units (ICUs). The strategy will provide specialized care closer to home for patients with complex conditions, freeing ICU beds and reducing emergency visits. This funding builds on pilot work initiated during the pandemic, enhancing care coordination across Ontario.

LHSC funded to offer LEAP™ Core award-winning palliative care course

LEAP™ Core is an interprofessional course that focuses on the essential competencies required for palliative care. Funded by the Palliative Care Education Fund, LHSC received a grant for facilitator training, simulation equipment, and program licenses. The first session was complete in September 2024. This hybrid course that combines modules with a one-day, in-person experience is offered to nurses and personal support workers who don't primarily work in palliative care but who provide care for patients with life-threatening and progressive life-limiting illnesses. LEAP™ Core includes simulation, group participation, and case studies fostering teamwork and interprofessional collaboration. This education promotes self-awareness when providing palliative care, early identification of patients who may benefit from a palliative care approach, assessment and management of symptoms, promotion of Advance Care Planning discussions, needs assessments and planning, and patient and family support.

LHSC enters 15th annual Canadian Blood Services Hospital Challenge

As an active partner in the Canadian Blood Services (CBS) Partners for Life program, LHSC is proud to join the 15th annual CBS Hospital Challenge. LHSC's target is to donate a minimum of 150 units of blood to support patients in need. All staff, physicians, learners and volunteers are encouraged to contribute to [join the LHSC team](#) and [check eligibility](#) before booking an appointment by October 31, 2024. Community members are also invited to donate on behalf of LHSC.

Media and Storytelling

Media coverage and metrics

The following highlight metrics from LHSC's September media exposure:

Total news media mentions (media exposure): 619

- Negative – 2 (0.3%)
- Neutral – 252 (40.7%)
- Positive – 365 (59%)

Total potential reach (number of people who saw LHSC mentioned in the news): 340 million

Earned media value (how much LHSC would have to spend on ad placement to achieve this type of coverage): \$3.79 million

Top stories by reach:

- **11 million reached:**
 - [London, Ont. researchers develop tool to detect consciousness in ICU](#) - CTV News
- **10 million reached:**
 - ['A tonne of sleepless nights': LHSC interim CEO announces dozens of cuts to executive ranks](#) – CTV London
- **10 million reached:**

- [LHSC Shakeup: Board resigns, province appoints David Musyj as supervisor](#) - CTV London
- **10 million reached:**
 - [Canada's first hospital with four major orthopedic robots onsite](#) – Global News Morning

Coverage analysis

September was a very active month for media stories involving London Health Sciences Centre (LHSC). The resignation of LHSC's Board of Directors and the appointment of David Musyj as Supervisor garnered significant media interest. In addition, there was high interest in our story about how [researchers at LHSC and Western University developed a new tool](#) to detect consciousness in patients who appear to be in a coma. Media also expressed significant interest in the announcement of [LHSC's acquisition of all four of the major orthopaedic surgical robots used for hip and knee replacements](#), a feat accomplished by no other Canadian hospital and only about half a dozen facilities around the world. These stories received not only local coverage, but robust national interest.

Social media

The Communications and Public Engagement team posted 25 pieces of content across LHSC's social media platforms this month (Facebook, Instagram, LinkedIn, and X). Content included staff stories as well as hospital and partner initiatives, all of which garnered positive sentiment and engagement.

- **Total social media followers (across all platforms): 74,839 (+881 new followers, +1.2%)**
**number of stakeholders/members of the public that see and have the potential to engage with LHSC's stories on a regular basis.*
- **Total social media impressions: 202,032**
**number of times posts across all LHSC social media platforms appeared on someone's screen*
- **Total social media engagements: 3,642**
**number of people who liked, commented, or shared LHSC's content/stories on social media*

Top social media posts by engagement included:

- First hospital in Canada to have four major orthopaedic robots on site | [all platforms](#)

- Resharing Children’s Health Foundation: This Childhood Cancer Awareness Month | [Facebook](#), [LinkedIn](#)
- The Path to LHSC, MDR Specialist | [Instagram](#)

Social media analysis

Audiences on social media, as well as leaders in health care across the province, engaged with our announcement of the four major orthopaedic robots, which helps to bolster LHSC’s reputation as a leader in research and education.

The positive response to resharing a Childhood Cancer Awareness Month story from Children’s Health Foundation demonstrates how engaging with our partners expands the reach of meaningful stories.

The positive engagement seen with The Path to LHSC video reinforces our audience’s interest in hearing directly from LHSC staff and physicians, and shows that the community is actively engaging in content that paints a holistic picture of Team LHSC.

London Health Sciences Centre is Canada’s first hospital with four major orthopaedic robots on site

LHSC is the first hospital in Canada, and one of only a few worldwide, to house all [four major hip and knee replacement surgical robots](#). This advanced technology allows LHSC surgeons to tailor joint replacement treatments to individual patient needs, offering more personalized care. The presence of all four robots also provides exceptional training opportunities for residents and fellows, enabling them to work with any robotic system globally. This positions LHSC as a leader in both clinical care and research in orthopaedic surgery. The acquisition of these robots, made possible by generous donors through the London Health Sciences Foundation, enhances surgical precision and improves patient outcomes, such as better implant positioning and faster recovery times. LHSC is now poised to lead advancements in robotics for hip and knee surgeries, shaping the future of orthopaedic care and innovation.

Exploring ChatGPT as a diagnostic tool for medical learners and clinicians

Researchers from London Health Sciences Centre Research Institute (LHSCRI) and Western University’s Schulich School of Medicine & Dentistry [published a study in PLOS One examining ChatGPT as a diagnostic tool for medical learners](#). Led by Dr. Amrit Kirpalani, the team tested ChatGPT 3.5 with 150 complex medical cases. They found it accurately diagnosed 49% of cases, noting limited reliability due to difficulties with numerical data and key details. Despite this,

ChatGPT presented information in a comprehensible way, making it useful for students. Dr. Kirpalani emphasized the importance of artificial intelligence (AI) literacy, advocating for ChatGPT as an educational tool rather than for diagnoses.

Child cancer survivors become paediatric oncology nurses

Kaitlyn Earley and Kaeleigh Wightman, now [paediatric oncology nurses at LHSC](#), both experienced childhood cancer diagnoses and were inspired to pursue nursing by the exceptional care they received from their health-care teams. Their personal journeys through treatment at Children’s Hospital at LHSC, including fond memories of interactions with Ollie the Therapeutic Clown, art therapy sessions, and support from Child Life Specialists, played a crucial role in helping them navigate their experiences. Today, as paediatric oncology nurses at Children’s Hospital, Earley and Wightman embody the same hope and resilience they experienced as patients, offering compassionate and expert care to the children they now serve.

Awards, Recognitions & Publications

Team LHSC members honoured by Royal Society of Canada

Drs. Richard Kim and Emma Duerden have been selected [for prestigious recognition by the Royal Society of Canada \(RSC\) College](#). Dr. Kim, a researcher and physician at LHSC, was chosen as one of 104 new fellows – the highest honour in the arts, social sciences, humanities, and sciences – for his outstanding achievements in personalized medicine. Dr. Duerden, a scientist at Children’s Health Research Institute (a program of London Health Sciences Centre Research Institute), is one of just 56 new members of the RSC College. Her research focuses on biological and social adversity and its impact on early brain development.

LHSC researchers receive John Smith Award from the Association of Anaesthetists

Dr. Ruediger Noppens, Interim Co-Department Head of Anaesthesiology and Perioperative Medicine at LHSC, and his research team have [been awarded the John Smith Award for Best Paper](#) by the Association of Anaesthetists (UK). Their paper, titled "[A Multicentre Randomized Controlled Trial of the McGrath™ Mac Video Laryngoscope versus Conventional Laryngoscopy](#)," has been recognized for its outstanding contribution in the field. The study demonstrates that first-pass tracheal intubation success is higher with video laryngoscopy compared to direct laryngoscopy, providing strong evidence for the more widespread use of video laryngoscopy.

Ontario Health appoints Dr. Narinder Paul as Provincial Head of Cancer Imaging

Dr. Narinder Paul, Department Head of Medical Imaging at LHSC, has been appointed as the Provincial Head of Cancer Imaging at Ontario Health. Dr. Paul is a strong advocate for patient-centred care, multidisciplinary collaboration, and quality improvement. He's actively involved in various provincial imaging committees and working groups, including in his roles as Southwest Region Cancer Imaging Lead, Breast Imaging Lead, and co-chair of the Centralized Booking and Wait List Management project in Ontario West. He's also made significant contributions to research. Dr. Paul's research in low-dose and ultra-low-dose thoracic CT has led to advancements in image optimization and radiation dose reduction, particularly benefiting lung cancer patients. His appointment positions him to continue making a substantial impact on cancer imaging across the province.

Research funding announcements

The following researchers at London Health Sciences Centre Research Institute (LHSCRI) have been awarded funding:

- Dr. Ross Prager (Critical Illness) was awarded a grant from the Ontario Centre for Innovation (OCI) Collaborate 2 Commercialize program for the study entitled "Multi-reader multi-case assessment of AI-lung ultrasound for detection of lung sliding" – \$20,000 (1 year)
- Drs. Richard Kim (Personalized Medicine) and Ute Schwarz (Personalized Medicine) were awarded a pre-Clinical Acceleration Team Award (pre-CATA) grant from the Ontario Institute for Cancer Research (OICR) for the study entitled "Pharmacogenomic and circulating biomarkers for predicting toxicity or suboptimal benefit from small molecule kinase inhibitor therapy" – \$749,054 (3 years)

- Dr. Brant Inman (Cancer) was awarded a National Institutes of Health (NIH) sub-award (Lead PI: Dr. Qianben Wang, Duke University) for the study entitled “Elucidating alternative polyadenylation regulation during prostate cancer progression to castration-resistance” – USD \$150,590 (5 years)
- Drs. Mark Vincent (Cancer), James Koropatnick (Cancer), Pete Ferguson (Cancer), Jean-Yves Masson, and Sue Costerus were awarded a Breast Cancer Canada Research Grant from Breast Cancer Canada for the study entitled “Evaluating small molecule RAD51 inhibitors” – \$50,000 (2 years)
- Drs. Dianne Bryant (Surgery) and Alan Getgood (Surgery), Canadian Institutes of Health Research (CIHR), “Does the addition of a lateral extraarticular tenodesis (LET) to an anterior cruciate ligament reconstruction (ACLR) increase the incidence of lateral compartment knee osteoarthritis?” – \$646,424(4 years)
- Dr. Fred Dick (Cancer), Canadian Institutes of Health Research (CIHR), “Understanding pattern recognition receptor signaling in homeostasis and cancer” – \$1,002,150 (5 years)
- Drs. Marc Joanisse, Janis Oram Cardy (Children’s Health), Blake Butler, and Laura Batterink, Canadian Institutes of Health Research (CIHR), “Neural tracking of speech in developing brains” – \$742,050 (5 years)
- Drs. Kun Ping Lu, Douglas Fraser (Children’s Health), and Xiao Zhen Zhou, Canadian Institutes of Health Research (CIHR), “Identification of Novel Disease Drivers, Therapeutic Targets, and Biomarkers of Sepsis” – \$1,063,350 (5 years)
- Drs. Charles Weijer, John Basmaji (Critical Illness), Anton Skaro (Surgery & Transplantation), Mary Ott, Andreas Kramer, Frederick D’Aragon, Darin Treleaven, Sam Shemie, Nicholas Murphy, Stephen Beed, Sonny Dhanani, Laurie Blackstock, Mayur Brahmania, Stephanie Chartier-Plante, George Isac, Prosanto, Chaudhury, Jed Gross, Dennis Djogovic, Andrew Healey, Heather Badenoch, Aviva Goldberg, and Mark Walsh, Canadian Institutes of Health Research (CIHR), “Building a national platform for trust-preserving implementation of normothermic regional perfusion in deceased organ donation in Canada” – \$745,872 (4 years)
- Drs. Krishna Singh, David Hess, Alison Allan (Cancer), and Robert Gros, Canadian Institutes of Health Research (CIHR), “Novel Mechanisms in Doxorubicin-induced Cardiomyopathy” – \$100,000 (1 year)

External Landscape

Patients for Patient Safety Canada embarks on a new chapter as an independent organization

On September 9, 2024, [Patients for Patient Safety Canada](#) became an independent, patient-led, not-for-profit organization. Formerly part of the Canadian Patient Safety Institute, it is now the only patient-led safety organization in Canada and part of the WHO's global network. Its mission is to keep "Every Patient Safe" by promoting safety, engaging patients in safety improvements, and supporting those harmed. With volunteers who have lived experiences, the organization hopes to drive positive change in health care and collaborate with Healthcare Excellence Canada to ensure patient perspectives shape safe, high-quality care across the country. LHSC is committed to enhancing patient involvement in all areas of care as part of its [2022-2026 Patient Safety Plan](#). The establishment of Patients for Patient Safety as an independent organization presents an exciting opportunity for LHSC to incorporate the lived experiences of patients and their families into safety initiatives.

Ontario connecting people to faster emergency care

The Ontario government is [investing over \\$910 million to enhance ambulance services](#) across the province and improve access to emergency care. This includes an eight per cent increase in land ambulance funding to municipalities, totaling \$877 million this year. The investment will help address rising costs and ensure continued delivery of high-quality emergency care. To reduce delays at hospitals, the province is allocating \$33 million to the Dedicated Offload Nurses Program, allowing paramedics to return to the community faster. Ontario is also accelerating the rollout of the Medical Priority Dispatch System (MPDS), improving emergency call prioritization and response times. These measures are part of the government's [plan](#) to strengthen health care and ensure faster, more convenient emergency services for people across Ontario.

OHA welcomes new Board Chair

On September 26, Melissa Farrell, President and CEO of Halton Healthcare, was elected as [Chair of the Ontario Hospital Association's \(OHA\) Board of Directors](#). Serving on the OHA Board since 2020, Melissa was elected as Chair following the OHA's Annual Meeting of Members.

Federal government passes universal pharmacare Bill

On October 10, 2024, [Bill C-64, An Act Respecting Pharmacare](#) received Royal Assent and officially came into effect. The Bill sets out foundational principles for the implementation of national universal pharmacare in Canada and provides that the foundational principles, along with the *Canada Health Act*, must be considered by the federal Minister of Health when collaborating with provinces, territories, Indigenous Peoples, and other partners and stakeholders about pharmacare. Under Bill C-64, the federal government commits to maintaining long-term funding for provinces, territories, and Indigenous Peoples to improve the accessibility and affordability of pharmaceutical products. This funding initially focuses on

specific prescription drugs and related products intended for contraception and diabetes treatment.

The Bill also sets out specific requirements to be fulfilled within the first year of its enactment:

- The Canadian Drug Agency will prepare a list of essential prescription drugs and related products to inform the development of a national formulary and will develop a national bulk purchasing strategy for prescription drugs and related products;
- The Minister will publish a pan-Canadian strategy regarding the appropriate use of prescription drugs and related products (a progress report on this strategy will be prepared every three years by the Canadian Drug Agency); and
- A newly established committee of experts will prepare a report with recommendations for the operation and financing of national, universal, single-payer pharmacare.

CPSO launches new and improved Physician Register

On October 16, 2024, the College of Physicians and Surgeons of Ontario (CPSO) launched its redesigned [Physician Register](#). Used widely in the health sector, the updated database offers enhanced user-friendliness and stronger cybersecurity. With feedback from hospital representatives, the redesign will make the credentialing process significantly easier. Visitors can search using a physician’s CPSO number or name, and each profile contains [publicly available information](#) about physicians, including their registration history, specialties, hospital privileges, and any applicable practice restrictions or public notifications. The platform also features a new tabbed layout for easier navigation. It has also changed its name, from “Doctor Search” to “Physician Register,” to reflect its function more accurately.

Release of new study: Projected Patterns of Illness in Ontario

The Dalla Lana School of Public Health at the University of Toronto released a study titled [Projected Patterns of Illness in Ontario](#), which forecasts future health-care demands in the province. It highlights the unprecedented strain on Ontario’s health-care system and raises important questions about the future of health care in the province. The study calls for new strategies to address the needs of Ontario’s growing and aging population.