



**PRESIDENT AND CEO
REPORT TO THE BOARD AND COMMUNITY
FEBRUARY 2020**

DELIVER EXCELLENT CARE EXPERIENCES AND OUTCOMES

2019 NOVEL CORONAVIRUS (2019-NCOV)

Please note: The Ministry of Health and Long-Term Care (MOHLTC) is the government body that directs hospitals and other health care facilities on the management of patients with 2019-nCoV. This includes, but is not limited to, direction regarding personal protective equipment (PPE), screening practices, isolation, and case definition. LHSC will follow the MOHLTC directives and will adjust our processes to reflect these directives as they are issued over the course of this virus.

Locally, London Health Sciences Centre (LHSC) continues to monitor the situation and adjust protocols immediately. The Infection Prevention Control (IPAC) team is assisting LHSC leaders to proactively prepare their clinical areas as the nCoV situation evolves. Flow maps have been created to guide acute care, primary care and ambulatory teams in next steps. Signs have been posted prominently at LHSC entrances to guide patients and visitors should they have any symptoms of a respiratory infection and relevant travel.

HOME TOTAL PARENTERAL NUTRITION PROGRAM NEW EDUCATION RESOURCES

The Parenteral Nutrition or PN Program helps patients receive the nutrition they need when illness or surgery prevents their stomach or bowel from functioning properly. In recent months the program has engaged in continuous improvement work to create new and updated resources guides to support patients, families and community partners to enhance supports for home therapy.

The updated education package includes a video that will be available on the televisions in inpatient rooms to facilitate patient and family education in preparation for discharge. The video link is also available online for patients and care providers to review as required. This program highlights how patients can be supported in community avoiding inpatient hospital stay.

ASSISTED HUMAN REPRODUCTIVE ACT REGULATIONS

In 2016, recognizing the need to strengthen the federal regulatory framework governing AHR in Canada, Health Canada announced its intention to bring into force sections 10 (safety of donor sperm and ova), 12 (reimbursement) and 45 to 58 (administration and enforcement) of the AHR Act and to develop the necessary supporting regulations. Those regulations were published in Canada Gazette, Part II on June 26, 2019.

Section 10 of the AHR Act recently came into force on February 4, 2020, along with most provisions of the *Safety of Sperm and Ova Regulations*. The Health Canada Directive entitled "Technical Requirements for Conducting the Suitability Assessment of Sperm and Ova Donors, which has been incorporated by reference into these regulations, also took effect on that date.

Section 12 of the AHR Act will come into force on June 9, 2020, along with the *Reimbursement Related to Assisted Human Reproduction Regulations*

These new regulations require The Fertility Clinic, LHSC to register as a "Primary Establishment" supporting our Known Donor Program work. We will also be required to notice Health Canada that our clinic is an "Establishment" supporting our work processing sperm and ova from banks.

WORKING TOGETHER TO SERVE OTHERS

ST. THOMAS ELGIN GENERAL HOSPITAL MEDICAL ONCOLOGY CONSULT CLINICS

Planning continues for the implementation of a medical oncology clinic at St. Thomas Elgin General Hospital. The new clinic, set to open on March 10, 2020, will be staffed by a London Regional Cancer Program medical oncologist [who will provide service](#) one day per week. Providing medical oncology services at St. Thomas Elgin General Hospital will allow some residents of Elgin County to receive specialty consultation, chemotherapy, and follow-up care in their home community and exemplifies our continued commitment to care closer to home. In addition, this new clinic will help to decrease breast and GI [cancer](#) patient volumes at London Regional Cancer Program and improve wait times for new patient visits.

HEALTHCARE SYSTEM REGIONAL UPDATES

ONE CHART

The OneChart Project is moving forward as planned and the team is hitting all milestones. No significant issues have been identified after four months and we expect our first go lives in March for the Surgical areas at LHSC and St. Joseph's, along with Alexandra and Tillsonburg Hospitals. The Clinical Leads and Physicians who make up the Project Teams are highly engaged, interested and motivated. As we strive to keep all staff and leaders engaged in OneChart, the Project Team has had two Open House calls without over 300 participants, and the Cerner 101 sessions for Leaders have proven to be most effective.

This 18-month multimillion-dollar project has go-live events spread throughout the life of the project. One of the incredible benefits of the project will be the ability of our clinical teams to proactively support patients who are experiencing in hospital infections and cardiac symptoms. These tools will take the culmination of the new digital data acquired through the project and continuously monitor patients' conditions through advanced analytics to warn the clinical teams about a patients' changing health status. The tools will alert the clinical teams to respond to patients needs ahead of the symptoms creating significant clinical risks. Other hospitals have reduced patient mortality from the implementation of these tools.

LHSC IN THE NEWS

MEDIA MONITORING REPORT: JANUARY 11, 2020 – FEBRUARY 10, 2020

SUMMARY

- 9 stories were posted on the public website
- 191 media stories referenced LHSC and our partners (57 positive, 22 negative and 112 neutral)
- 9 media inquiries were managed

HIGHLIGHTS

1. Western student is third confirmed case of coronavirus in Ontario, and fourth confirmed case in Canada

A Western University student who was swabbed for testing at University Hospital (UH), was confirmed as Canada's fourth case of the novel coronavirus. Dr. Michael Payne, Medical Director of Infection Prevention and Control, spoke on behalf of LHSC about how the UH emergency department team followed proper protocol. Dr. Payne spoke with [The London Free Press](#), [CBC London](#), [CTV News](#), [Global News](#), and [Fanshawe's 106.9 The X](#).

2. Link found between controlled-release hydromorphone and endocarditis in injection drug users from Lawson study done with Western University and the Institute for Clinical Evaluative Sciences (ICES)

A study done with researchers from Lawson, Western University, and ICES found that injection drug users who used controlled-release hydromorphone were more likely to develop endocarditis than those who used other prescription opioids. [The London Free Press](#), [CTV News](#), [Global News](#), [Blackburn News](#), and other news outlets in the London area, as well as other medical news sites, reported on the results of this study.

3. A former heart doctor at LHSC states he left due to cuts to cardiac care, then another high-profile doctor came forward saying the transplant unit has 'eroded' due to cuts and high-level departures

[The London Free Press](#) first covered a story about Dr. Bob Kiaii commenting on why he left LHSC because he felt cardiac care did not receive the funding needed for best patient care. The [same reporter](#) then interviewed Dr. Adam Dukelow and wrote a story where Paul Marotta, former medical director of liver transplantation, talked about his concerns for the transplant program after budget cuts and losing experienced staff.

Respectfully Submitted,

Paul Woods
President and CEO

Our Mission

LHSC is a leading academic health organization committed to collaborating with patients, families and system partners to:

- Deliver excellent care experiences and outcomes;
- Educate the health-care providers of tomorrow; and
- Advance new discoveries and innovations that optimize the health and wellbeing of those we serve