VIRTUAL ALL STAFF TOWN HALLS



Thunder Bay Regional Thunder Bay Regional **Health Sciences Health Research** Institute

Centre

Virtual All Staff Town Hall 2:00 p.m. – 2:45 p.m.

Agenda for September 20

- ▶ Introduction R. Crocker Ellacott
- ► Patient Story E. Hart
- ► Respiratory Illness Season and Precautions J. Ross
- ▶ Whistleblower Reporting System J. Verdenik
- ► **PFCC: Sharing and Caring** S. Schiffer
- ► Truth and Reconciliation September Events Update L. Kakepetum
- ► Strategic Plan 2026: Q1 Results J. Logozzo
- ► Your Questions Answered J. Wintermans
- ► Closing Remarks R. Crocker Ellacott



Patient Story



Edith Hart, Manager, Critical Care and Respiratory Services



Respiratory Illness Season and Precautions

John Ross, Director of Patient Flow and Partnerships



Respiratory Illness Season and Precautions

- ► The Pfizer bivalent COVID-19 vaccine will be available in-house through Occupational Health and Safety starting October 6th by appointment.
- ► The provincial government is providing flu shots for hospital staff starting this month as well.
- We encourage you to get your flu and COVID-19 shots as soon as they are available to protect yourself, your colleagues and our patients.
- With the support of the lab, we will continue to monitor influenza numbers and provide SLC with data to make informed decisions on appropriate masking protocols.
- We will manage outbreaks promptly to avoid lengthy bed closures.
- We will manage sick calls and fill staffing vacancies to ensure we have appropriate staff to provide service.



Masking Requirements

Normal State	All staff & professional staff are required to wear a level 3 procedure mask where 6ft physical distancing standards cannot be maintained.	
	Note: Staff do not need to wear masks when entering patient rooms and not providing direct care provided they maintain physical distance.	
All staff, professional staff, patients and ECP/CPs are encouraged to exercise their own risk analysis and level of comfort for masking above the minimum requirement. Masking is required at all times for anyone who fails self-screening and their presence is essential at the hospital and/or if masking is deemed necessary based on IPAC protocols.		
1A Inpatient Units during Respiratory Season (effective September 18/23)	All staff , professional staff and ECP/CPs are required to wear a Level 3 procedure maskat <u>all times while</u> on the unit.	
Increasing Mandatory Masking- (effective September 18/23) Step 1	All staff and professional staff must wear a minimum Level 3 procedure mask when entering every patient room and when unable to maintain 6ft physical distancing standards anywhere else in a clinical setting.	
Increasing Mandatory Masking- Step 2	All staff and professional staff must wear a minimum Level 3 procedure mask when entering every patient room and when unable to maintain 6ft physical distancing standards. All ECP/CPs visiting must wear a minimum Level 3 procedure mask and at anytime they are unable to maintain 6ft physical distancing standards.	
Increasing Mandatory Masking- Step 3	All staff, professional staff and ECP/CPs entering <u>all clinical departments</u> must wear a minimum of Level 3 procedure mask <u>at all times</u> . All staff, professional staff and ECP/CPs must wear a minimum Level 3 maskin <u>all areas of the hospital</u> when unable to maintain 6ft <u>physical distancing standards</u> . Masking is not required in administrative or public areas unless physical distancing is unable to be maintained.	
Restricted State	All staff , professional staff and ECP/CPs must wear a minimum Level 3 maskin <u>all areas of the hospital</u> at <u>all</u> times.	



Masking Requirements: Communication Considerations

- Mandatory masking signage will be made available to units and departments for periods of enhanced masking precautions.
- Corporate memos will be sent out to all staff prior to any required masking changes.
- Public communication will also be delivered prior to any masking changes.

Other Communications

- Increased hand hygiene audits as masking protocols increase
- At Step 3: extra staff will be deployed to public entrances to provide education and level 3 procedure masks to the general public.



Criteria for Increasing & Decreasing Masking Protocols

Criteria for determining increased masking requirements:

- Increasing admissions with Influenza like Illnesses (ILI) with evidence to suggest that numbers will continue to increase.
- Number of units on a respiratory outbreak.
- Significant staffing shortages over 72 hour period (<20) with evidence to suggest that numbers will continue to increase.</p>
- Evidence of significant increase in community spread of any ILi's (reported by PH or our internal audits, <10%).

Special Considerations:

- Provincial protocols may be established and it is recommended that those guidelines would supersede this protocol.
- Medical exemptions for ECPs must be approved.
- The appeals process should be followed for any ECP exemptions (involves the Patient Advocate and Unit Manager).



Whistleblower Reporting System

Jeannine Verdenik, Vice President, People & Culture



Whistleblower Reporting System

► TBRHSC will be implementing a third party reporting system, **ClearView Connects[™]** to offer the security of being able to report wrongdoing or unethical behaviour confidentially, and securely.





Whistleblower Reporting Channels

Reporting wrongdoing is everyone's responsibility, it is important to select the appropriate route for the circumstances.

Reportable via the Clearview Platform

- ► Theft, fraud, illegal or unethical behaviour.
- ► <u>ADMIN-19</u> provides guidance on reporting channels.

Reports requiring existing internal reporting mechanisms

- Matters relating to occupational health & safety, human resources, patient safety and covered by collective agreements or existing policies.
- OHS-os-203, QM-50, HR-hr-08, and ADM-2-22 provide guidance on reporting channels.



Launch Date

- ▶ The Clearview Connects reporting system will be launched in early October 2023.
- Information and resources will be shared with employees, professional staff, volunteers and learners.





PFCC: Sharing and Caring

Shannon Schiffer, Manager of Patient and Family Centred Care, Patient Experience, Engagement and Advocacy

Patient and Family Centred Care / Psychosocial Practice Head



14th Annual Sharing and Caring Together

- Patient and Family Centred Care continues to be the philosophy that guides what we do, every day, ensuring exceptional care for every patient every time.
- Sharing & Caring Together Week celebrates and supports our efforts to "enhance the understanding and continue to grow and embed our PFCC philosophy"
- A variety of events will take place throughout the week of October 23-27, culminating with our...

'Sharing and Caring Together Main Exhibition' Friday, October 27, 2023 10:00 a.m. - 4:00 p.m. Auditorium A and B (3rd Level)



Booth Registration

Register your booth today by contacting:

Nancy Kruk in PFCC

Phone: 684-7322

Email: TBRHSC.PFCC@tbh.net

- Deadline to register is: October 4, 2023
- Booths registered before September 26 will be entered to win an early bird prize.



The Thunder Bay Regional Health Sciences Foundation (TBRHSF) Family CARE Grant

- **CARE** grants can be used to improve the care you give every day, therefore improving the patients experience.
- Initiatives that improve the care we provide benefits us all!
- Submit your application to:

Sarah Miniaci TBRHSF office, Room 2232 (or call extension 7276) Deadline: October 31, 2023









Truth and Reconciliation September Events Update

Leona Kakepetum, Manager, Indigenous Collaboration, Equity & Inclusion



Opening Ceremony, Beading and Drumming Sessions

- ► The September Truth and Reconciliation Events kicked off on Wednesday, September 6 with an Opening Ceremony officiated by Elder Emma Boshkaygan. The event was a success with over 25 staff in attendance.
- A Beading session was held on Wednesday, September 13 with 20 staff participating.
- The history and significance of beading within Indigenous Culture was shared while staff learned the art of Single Needle Stitch. In honour of *Every Child Matters*, staff beaded Orange Shirt pins.
- Drumming took place earlier today at the Tipi with the Sisters of Turtle Island sharing stories and songs. This event was also well attended.









Upcoming Vendors and Craft Market

- An Indigenous Market will be hosted on-site, Monday, September 25 and Tuesday, September 26, from 11:30 a.m. to 5:00 p.m., outside of the Gift Shop and Volunteer Services.
- The Market will feature various crafters and artists showcasing their available items, such as beaded lanyards, jewelry, paintings, ribbon skirts, and more.

Wake the Giant Music Festival Winners

- Congratulations to Leanne Lankinen and Maria Forget on winning two tickets each.
- Thank you to all the staff who have completed their Wake the Giant training module.
- > 758 staff have completed the module so far.







Partner Events

Sacred Fire Ceremony

- Indigenous Collaboration, Equity & Inclusion (ICEI) partnered with St. Joseph's Care Group as part of the joint Indigenous Health Education Committee for a Scared Fire Ceremony, from September 27 sunrise to September 30 afternoon.
- The opening ceremony will be held at 7:40 a.m. at the Sister Margaret Smith Centre, and speakers will include Dr. Rhonda Crocker Ellacott, Janine Black, and representatives from various community partners.
- The fire will burn for four days honouring the Survivors and those that were lost in the Residential School system.

Honouring Our Children Run

- ▶ ICEI sponsored the volunteers/entertainment at the Honouring Our Children run in support of the Mazinaajim Children's Foundation.
- ► The Mazinaajim Children's Foundation is an Anishinaabeg-led charitable organization with a mandate to support the educational, recreational, cultural, and community needs of Anishinaabeg children and youth.
- The run will be held on Saturday September 30th at Boulevard Lake, with options to run 5K, 10K, or 15K and a new kid's fun run.



Strategic Plan 2026: Q1 Results

Jessica Logozzo, Vice President, Strategy and Regional Transformation



Cascading and Monitoring Our Plan

Ensuring Accountability, Alignment and Focus

Senior Leadership (SLC,OLC, Chiefs)

- 1. Monthly progress reports and monitoring
- 2. Quarterly deep-dive sessions (Quarterly Strategic Review Session)

Management and Staff

- 1. Weekly Strategic Alignment meetings
- 2. Director and manager-led discussions and monitoring with teams
- 3. Quarterly performance debriefs + Town Halls

Board

- 1. Quarterly reporting
 - SP2026 Strategic Scorecard (10 strategic indicators)

Annual Community Partner Session

- CEO written report
- 2. Annual environmental scan and refinements



Thunder Bay Regional Health Research Institute

Exceptional **Care** for every patient, every time.

Strategic Plan 2026: Overall Progress & Status Report to 2023/24 Q1

Strategic Direction	Status
Equity Diversity & Inclusion	On Track – 2 initiatives underway
Patient Experience	On Track – 5 initiatives underway
Staff Experience	On Track – 4 initiatives underway
Research, Innovation & Learning	On Track – 3 initiatives underway
Sustainable Future	On Track – 4 initiatives underway



2023/24 Q1: Highlights of our progress and successes...

Equity, Diversity, & Inclusion We all belong

- Called for expressions of interest for EDI Steering Committee membership
- Joined provincial table focused on EDI practice
- Self-identification initiative results improving consistently; exceeding 2026 annual target
- Approx 600 (16%) of staff have completed Cultural Safety, Equity, Diversity & Inclusion Training
- Ceremony held to honour Indigenous partners for Truth & Reconciliation and systemic racism

Patient Experience

Empathy, compassion, and respect in every encounter

- Co-design definition developed and reviewed by Patient Family Advisory Council
- Qualtrics patient experience survey system launched initial results limited but positive
- · Unit level Quality Huddles ongoing, including trials and evaluations of improvement ideas
- Successful medication reconciliation value stream mapping event completed, including cross-disciplinary participation
- Developed Model of care for substance abuse and addictions

Staff Experience

This is where we want to work, grow and thrive

- Workplace Violence Task Force recognized with Care Strategy Award
- SLC endorsed New Recruitment & Retention Policies
- Staff scheduling system delayed to ensure successful implementation
- Internal vacancy tracking & reporting system being tested
- Focus groups engaged to learn their aspirations, motivations, challenges and future vision to inform leadership framework

Research, Innovation & Learning

Driven by the needs of our patients, our staff and our communities

- Sourced and reviewed historical data to inform business model and funding opportunities
- Permission to Contact project underway
- Engaged with Lakehead University to address Scientist vacancies.
- Engaged OLC, Managers and Health Human Resources Working Group on **Professional** development policies feedback very positive

2023/24 Q1: Highlights of our progress and successes...



Digital Health

- Digital Health Roadmap Development complete and approved.
- NWO Health Record Business Case vetting proceeding very well.
- Successfully developed and implemented Patient Flow Dashboard to support transforming care innovatively through advanced analytics & research.
- NWO approved to join Ontario Early Adopter Health Network.

Clinical Services Plan

Data sourcing and analysis to inform Clinical Services Plan well underway.

System Partnerships

- Presented TBRHSC innovations, efforts and ongoing health human resource ongoing challenges to Dr. Karima Velji,
 Chief Nursing & Professional Practice and Assistant Deputy Minister.
- Hired City and District of Thunder Bay OHT Implementation Lead.
- Advanced local and regional advocacy.
- Collaborating with Ontario Health North to support development work in surgical procedures.

Sustainability & Accountability Framework

Leads assigned to develop sustainability & accountability frameworks for each strategic direction and enabler.



Strategic Indicators – 2023/24 Q1 Highlights

At or better than target	Slightly below target	Considerably below target
# patients who self-identify as Indigenous increased dramatically and already exceeds 2026 target.	None	% operating gross margin
% positive patient scores on "experience, views & beliefs acknowledged" 1		
% positive patient scores on overall patient experience ¹		
Incidents of inpatient harm for select categories		
% of patients aligned with regional programs/services slightly worse than target but improving quarter over quarter		

Capture, measurement and reporting methodologies for some indicators remain in development. Reporting of these results is expected later in 2023/24.

^{1.} Qualtrics patient experience tool launched in mid-June 2023, so Q1 results are based on fewer than normal survey responses.







Closing Remarks

