

CHIEF OF MEDICAL STAFF ANNUAL REPORT 2016/17

This report reviews the activities of Office of the Chief of Medical Staff. The report includes information on Yukon Hospital Corporation (YHC) initiatives aimed at providing safe, high quality hospital care for all Yukoners. To this end, the report also provides an overview with respect to changes in YHC medical staff and visiting medical/surgical specialists as well as the opportunities and challenges for our territory's hospitals in the coming year.

The Chief of Medical Staff (COS) is the most senior Medical Administrative Leader in the YHC and is accountable directly to the CEO on all matters regarding the management and organization of the Medical Staff in Yukon's three hospitals; Whitehorse General Hospital (WGH), Watson Lake Community Hospital (WLCH) and Dawson City Community Hospital (DCCH). The Office of the COS includes the COS, an Associate Chief of Medical Staff, COS Delegates for WLCH and DCCH, and a physician Director of WGH's Emergency Department. The COS oversees appointing and privileging of physicians working at YHC facilities; ensures the medical staff remain accountable for the provision of safe and high quality medical care; implements and participates in auditing activities to ensure patient safety; recommends and/or enforces YHC policies aimed at improving patient safety, available resources and medical care; and responds to and assists in the resolution of complaints or incidents involving the medical staff. The COS administers the Medical Staff Bylaws and Rules, which define the privileging of physicians, their activities and accountabilities when practicing in the hospitals and processes for resolution of disputes and complaints.

Bed Pressures

WGH continues to experience very significant pressure on bed use. This becomes a patient care problem as WGH is the only acute care referral center for higher levels of care in Yukon. Bed occupancy was 97% for the past year. About 60% of day bed occupancy was equal to or greater than 100% and sometimes as high as 118%. These pressures are as a result of increasing population, changing patient demographics and inadequate long term care facilities in the Whitehorse. Our senior's population is the fastest growing population segment in Yukon. Seniors generally require more care and specifically more hospital care than other segments of the population. Most seniors are admitted to hospital because they require treatment. Many times after the treatment is completed it is determined that it is either unsafe for them to return home or the resources to support them at home are not readily available. At present the long term care facilities are at capacity and unable to accept new clients when this care is needed. The hospital then becomes the default care givers for these patients even though being in the hospital is not the safest or best place for them to receive care.

Over the past year the YHC has worked closely with the Department of Health to identify opportunities to meet the needs of this group of patients outside the hospital setting. This included the opening of a further 10 beds in the Thompson Center and enhancements of Home Care. Using available beds in the hospitals at Watson Lake and Dawson City for select patients has also been implemented. The expected opening of the Whistle Bend long term care facility in mid-2018 will partially relieve this pressure but in the interim the YHC will continue to explore options for better solutions for care of the senior patient.

WGH Expansion Project

A huge amount of work was accomplished over the past year by physicians and nurses in preparation for the January 2018 opening of the new Emergency Department (ED). The new ED is expected to address many of the safety, security and privacy issues that are present in the old

ED. Much work is yet to be done but it is anticipated that when open the people visiting the new ED will see a state of the art facility with enhanced comfort and confidentiality.

The next phases of expansion will include repurposing the old ED to improve the services provided in the operating room, minor procedure room, laboratory, telehealth and medical imaging. This work is expected to carry on through 2018. Physicians, nurses and allied health care workers are all involved in this work to ensure best possible use and function of the space.

A part of the new expansion project includes some undeveloped space. A needs assessment indicated that the need for enhanced mental health services is the greatest need. New infrastructure to support the care of the mentally ill would allow the introduction of new programs and services, better transitioning of care from the hospital to home along with greater safety and security for patients and staff. A proposal will be put forward to government.

Infection Prevention and Control

A focus of YHC nurses and physicians is to reduce harm to patients while they are in hospital for needed care. One of the areas of most concern is the risk of getting an infection while in hospital receiving care for other reasons. These risks include the potential of surgical site infections, hospital acquired pneumonia, upper respiratory infections, bladder infections and others. Hospital acquired infections are monitored closely. Hand hygiene continues to be an educational priority for YHC to reduce the risk of infections caused by contact.

This year the YHC has contracted the services of an Infectious Disease specialist, Dr. Victor Leung, from St. Paul's Hospital in Vancouver. Dr. Leung will be assisting the YHC in developing policies and protocols to reduce the risk of infection in hospital, provide advice on best practices for treating certain types of infections and monitoring antibiotic use in the hospitals.

Medical Staff

A number of changes to the medical staff have occurred this year. This includes the retirement of one of the obstetrician/gynecologists and the acquisitions of a resident pediatrician, Dr. Katharine Smart, and an orthopedic surgeon, Dr. Curtis Myden.

A recruitment process is now underway for another obstetrician with the expectation that this will be successful and that a new obstetrician will relocate to Whitehorse early in 2018. The new resident pediatrician and orthopedic surgeon will be starting up practice in October, 2017. This is the first time Yukon has had an orthopedic surgeon and access to these services should be much easier for Yukoners requiring this specialist service. As a result of this a number of the visiting orthopedic surgeon clinics will be discontinued. Yukon has been without a pediatrician for a number of years and it is expected that access to pediatric care will be enhanced.

There are 62 privileged medical staff at WGH with 52 family physicians, 4 general surgeons, 2 obstetrician/gynecologists, 2 psychiatrists, one specialist anesthetist, one pediatrician, one orthopedic surgeon, 2 medical officers of health. Dawson City Community Hospital has 5 family physicians on staff and Watson Lake Community Hospital has 2 family physicians on staff.

Continuous Quality Improvement and Patient Safety

Most hospitals in Canada are members of Accreditation Canada. This is a not-for-profit, non-governmental association that provides on-site evaluations of health care facilities to look at the facilities policies, programs, organizational structures, adherence to Required Operational Practices and standards that are being used to keep patients and staff safe, and to provide the medical care. YHC facilities are in the fourth year of their accreditation cycle and will be re-

evaluated in the spring of 2018. Meeting accreditation standards of care and of monitoring care provided is a continuous process to ensure we are providing the safest and highest level of care.

The YHC also uses a number of auditing and assessment tools to improve our understanding of adverse events that occur in hospital. This allows us to learn and implement changes to enhance the patient experience and reduce the risk of harm while a patient is in hospital.

Adverse events in hospitals do occur and these events may result in patient harm. To further mitigate against harmful events patient care teams made up of nurses and doctors regularly meet to review adverse events and make recommendations on system changes that will reduce the risk of harm.

Generally speaking there is a very high level of patient satisfaction in the care that they receive while in the facilities of YHC. However, patients do complain and incidents do occur that require investigation by the Office of the COS. This includes discussions with the patient and the physician involved and feedback for educational purposes or in some instances disciplinary action. Most complaints and incidents are related to poor communications. Many of these events are also brought to the attention of the whole medical staff to illustrate the types of problems patients are encountering and to suggest changes in practice or professional behaviour that would result in better care and a higher level of patient satisfaction.

Medical Staff Bylaws

The YHC Medical Staff Bylaws and Rules are being revised to include the potential for Nurse Practitioners to provide care in the hospital setting. Presently 5 Nurse Practitioners have privileges to access WGH programs and services. The new Bylaws will allow for them to participate in a patient's care while in hospital.

Visiting Specialists

The Yukon is unable to support most of the specialty medical services that are available outside the territory. Resident specialty services available in Yukon include general surgery, obstetrics and gynecology, anesthesia, psychiatry and now pediatrics and orthopedic surgery. Family physicians acquire the skills to fill some of the gaps in medical care and are very capable in following management plans recommended by visiting specialist or outside specialists.

The WGH Visiting Specialist Clinic now has 45 active visiting specialists, covering 14 specialty areas for a total of 113 clinics per year. These clinics range from two days to one week in length. The specialty areas covered are: cardiology, dermatology, gastroenterology, otolaryngology, internal medicine, nephrology, neurology, physiatry, ophthalmology, orthopaedic surgery, pediatrics, pediatric cardiology and rheumatology. We also have visiting specialists for services in radiology, oral and maxillofacial surgery, pathology/lab services and infectious disease. The Department of Health & Social Services (HSS) has non-hospital visiting specialty services that include general psychiatry, child psychiatry and geriatric psychiatry.

The YHC, in conjunction with HSS, continues to look for opportunities to improve visiting specialty services and reduce wait times. Some of the barriers to adding more visiting specialist services are budgetary constraints, available space at WGH, availability of OR time (which competes with the resident surgical specialty needs) and extra resources needed (e.g. physiotherapy, hospital beds) to support the activities of the visiting specialist.

Watson Lake and Dawson City Community Hospitals

The YHC continues to work to enhance the safety and quality of care provided in our community hospitals. Bed occupancy rates in both of these hospitals indicate that they are providing a much-needed service in these communities. In some situations, these hospitals are able to help reduce bed occupancy pressures at WGH. We continue to explore ways to expand the breadth of care in WLCH and DCCH. New services are introduced only after appropriate needs assessments and planning has been undertaken.

The Office of the COS, with the full support of the YHC, will endeavour to make your hospitals a place where you feel safe, are treated with respect and dignity and with the expectation that you receive the best possible care. All Yukoners will rely on the care our hospitals provide and we want it to be there for us when needed.

Respectfully submitted,

Wayne MacNicol, MD
Chief of Medical Staff
Yukon Hospital Corporation