

## **CHIEF OF MEDICAL STAFF ANNUAL REPORT 2017-18**

This report reviews the activities of the 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 and visitors. 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 within 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 and other professional staff members 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 and other professional staff members, their activities and accountabilities when practicing in the hospitals and processes for resolution of disputes and complaints.

### **Bed Pressures**

In the last year, WGH continued to experience sustained bed pressures, which means that more than half of the time, a hospital bed is not available when it's needed. Our team has had to make difficult decisions and take a number of steps, including postponing elective surgeries, utilizing beds and resources across our hospital system, and enhancing our discharge processes, to ensure hospital care is available when and where it's needed.

Hospital data from July, August and September 2018 is reflecting stable admission rates and a positive trend in WGH's occupancy rate at around 85-90%. YHC remains diligent in its efforts to maintain timely access to hospital services and ensure Yukoners are safely transitioned home or to another level of care.

A multidisciplinary team (Clinical Nurse Leaders, Therapies, Social Workers, First Nations Health and Continuing Care) meets five days a week to review the status of all WGH patients. I believe this team has greatly contributed to easing bed pressures and remains fully committed to respond to an inevitable surge in demand. The Discharge Coordination Project steering committee has now entered its second phase, with added representation from two physicians. The committee will focus its work on advancing internal system capability for discharge and the potential to create in-patient and out-patient transition teams.

Additionally, the new Whistle Bend Place continuing care facility will accept patients starting in October 2018. YHC is working closely with the Department of Health & Social Services (HSS) during this transition period. Ultimately, the Yukoners will benefit as patients, who no longer require hospital care, will be able to move to a more appropriate level of care, giving the hospital greater ability to ensure access to hospital services (especially in times where there is a surge in demand such as flu season).

### **New location for the Surgeons and Ob-Gyn Clinics**

These two clinics have now moved to the second floor of WGH, freeing up space in the adjacent Thomson Centre and relocating this medical support within the main hospital building and closer to other supporting hospital services. The clinics' move will allow the construction of 10 new continuing care beds in the Thomson Centre that are scheduled to be complete late September 2018.

YHC and medical staff welcome the opening of additional continuing care spaces, as it will help to reduce bed pressures in the hospital as mentioned earlier and ensure more Yukoners have the right care, in the right place and at the right time.

### **New WGH Emergency Department**

The Emergency Department (ED) opened as scheduled on January 9, 2018, and this state-of-the-art facility improves safety, security, infection control and privacy that the previous ED was not optimally designed to address. Overall, the new facility improves emergency care with improved patient access, flow and tracking systems along with enhanced diagnostic capability and more suitable treatment spaces. A tremendous amount of hard work by physicians, nurses, clinical and operational support teams, and administrative staff helped bring this project to fruition. The ED committee remains active in reviewing the often unforeseen issues (patient flow, technology items, and daily operations details) during the current implementation phase.

### **Operating Room (OR) Hub and Lab new facilities**

WGH's old, vacated ED site (located off of the main hospital atrium) is now being transformed into the OR Hub. This redeveloped space will house the Flex OR room, the scope reprocessing area, Medical Day Care, Surgical Day Care, OR booking office, the Pre-Anesthetic Consult Room, the Minor Procedure Room (MPR), the Post-Anesthesia Care Unit (PACU), the Cast Clinic and spaces for surgical equipment. This means patients can prepare for surgery or minor procedure, register for a procedure, and have a treatment, transfusion or procedure in the same area of the hospital.

Lab services have also relocated to a larger, redeveloped area within the WGH atrium. The new space allows for all services related to blood and specimen collection to be located together for better patient flow, enhanced infection control and improved efficiencies.

### **Long-Term Planning for Surgical Services**

YHC in collaboration with the Department of Health & Social Services has long recognized the challenges associated with our changing demographics and practices, leading to increased volumes in the ED, inpatient and ambulatory diagnostic areas. A more comprehensive approach is necessary to ensure that any expansion of service meets future need, improves efficiency of service delivery and enhances patient safety. To this end, YHC has initiated long-term planning for surgical services at the hospital as we look to expand and improve these services in Yukon over the next 10 years. As a result, steering and working committees have been formed that are comprised of YHC, health system partners and physicians.

### **Secure Medical Unit (SMU)**

Planning is ongoing to develop an enhanced Secure Medical Unit in the shelled, second floor space above the current Emergency Department. Our priority is to improve the facility so we are better able to support Yukoners' acute mental health needs within the hospital and/or transitions to other mental health care supports within our community and outside the territory. Our organization, medical staff, government, health system partners and community groups are working closely together throughout this comprehensive planning process.

### **Yukon Midwifery Project**

YHC is also actively collaborating with Yukon Government with respect to midwifery practice in the territory. A Midwifery Advisory Committee was established in October 2017. Since that time, various government

departments have been at the table with a group of YHC medical staff who were highly engaged throughout an initial process, which concluded in August 2018.

A number of topics were discussed, including regulatory framework, qualifications and registration requirements, scope of practice, committees, inspections and discipline, model of care, system integration, consultation and transfer of care, core and advanced competencies, prescribing standards and home birth standards. The Yukon Government is now working towards the approval of a regulatory framework and initial stages of implementation of midwifery in the territory by the end of 2019.

YHC remains committed to and actively involved in the process as we await draft legislation. There remains significant work to be done for our organization related to the credentials/privileges process and any required modifications to YHC internal policies and procedures. Any amendments to the present hospital bylaws and rules will be addressed by medical staff leadership.

#### **Sexualized Assault Response Team (SART)**

In December 2017, Yukon Government announced funding to support the development of a holistic Sexualized Assault Response Team in the territory. The development of the team and associated supports represents collaboration between the Woman's Directorate, Victim Services, HSS, RCMP and YHC. While the group is led by HSS and an implementation group is in place, YHC and its ED Committee is actively involved in reviewing the scope of the program, physicians and nurses' involvement, privileges and credentialing issues, and other best practices such as those seen B.C Women's Hospital in Vancouver.

#### **Accreditation Canada**

As part of a four-year review cycle, Accreditation Canada surveyed our three hospitals in May 2018, looking at our organization's governance, policies and programs. The surveyors evaluate how we are performing against a number of Required Operational Practices and other standards used to keep patients and staff safe, while providing hospital care.

As part of the accreditation process, surveyors met with various YHC stakeholders, including physicians and other team members from across the organization. A positive assessment was provided immediately upon completion of survey. Our hospitals were accredited with a full, more detailed report now available on our website at [www.yukonhospitals.ca/accreditation](http://www.yukonhospitals.ca/accreditation).

YHC continues to make significant strides from past Accreditation surveys through ongoing quality initiatives. Overall, the surveyors made positive observations of our leadership team, medication management standards program and infection prevention and control programs, ambulatory cancer therapy services, lab and diagnostic imaging services and sterile reprocessing department. They also acknowledged our continuing quality improvement efforts in the Emergency Department, mental health services and perioperative services and invasive procedures. Recently, Accreditation Canada has placed a growing emphasis on patients' involvement in their care in a number of respects – from individual and family input into care plans to participation in the development of hospital policies and procedures. YHC, too, sees patient-centred and directed care as a priority. Our renewed mission, vision and values clearly put the patient at the centre of providing safe and excellent hospital care.

#### **Watson Lake and Dawson City Community Hospitals**

In July, both community hospitals celebrated their five-year anniversaries since the opening of the new facilities. Work is ongoing to enhance lab services and other hospital programs within our facilities in Dawson City and Watson Lake. YHC has also initiated a review and evaluation of hospital services provided at DCCH and WLCH to ensure we can continue to provide quality programs and services that meet health needs for these communities and surrounding areas. Consultation and engagement with local physicians, allied health

providers, patients and other clients who use the facility is a priority and will be critical to the success of this review. A formal report will be provided to YHC Executive, the Board of Trustees and the Minister of Health and Social Services in the next few months.

Our clinical team also continues to meet on a regular basis to discuss programs, services and other issues within our community hospitals to ensure we are able to continue to meet community health needs.

### **Lab Services in Yukon**

Providence Health Care (St. Paul's Hospital) is an accredited laboratory which has provided quality lab services and support to Yukon Hospitals for over 20 years. After a competitive Request for Proposal (RFP) process, YHC renewed three-year service agreement with Providence that included medical leadership, laboratory consulting, laboratory testing and a joint commitment to improve microbiology services.

After a review process that included consultation with physicians, lab staff, union partners and community partners, YHC made the decision to send routine microbiology samples to St. Paul's laboratory starting later this fall. The decision was made in order to improve the quality and sustainability of lab services in Yukon and followed an endorsement by the Medical Advisory Committee.

Rapidly advancing specialization in microbiology testing has resulted in a trend across the Canadian health system toward consolidation of lab services from lower volume sites to larger centres. St. Paul's lab is equipped and resourced with advanced technologies and microbiologist (specialized physician) oversight, which is not practical or sustainable in the Yukon at this time. After due consideration and testing of processes, it was determined that there will be no overall negative impact to specimens' turnaround times (TAT) as a result of sending routine microbiology samples outside the territory. We continue to value the skill and dedication of our laboratory team and YHC is pleased that there will be a position available for all existing microbiology staff. YHC will continue to assess, with medical staff involvement, its programs and services to ensure safe and quality patient care.

### **Medical Staff Bylaws and Rules**

Revised Medical Staff Bylaws and Rules were approved by the Board and the Minister in June 2018 and are now in full effect. Amendments will be required prior to the introduction of the hospital midwifery program and services. These bylaws outline medical staff structures and practices as well as set clear expectations that reflect current standards and accountabilities for medical practice within our hospitals.

### **Medical Staff and Visiting Specialists**

YHC clinical activities are supported by a group of 59 General Practitioners with active privileges (4 are located in Dawson City and 2 in Watson Lake). A number of these physicians have specialized expertise in ER and ICU services, obstetrics (15), anesthesia (6), oncology (3), palliative medicine (2), sport medicine (1), ob/gyn ultrasound (1). Our resident specialists group includes 4 surgeons, 2 obstetrician-gynecologists, 1 certified anesthetist, 1 psychiatrist, 1 orthopedic surgeon and 1 pediatrician. The medical community is also well served by a large contingent of locum physicians who often return to provide clinical work coverage and/or eventually settle in the community. Physician recruitment remains a priority both at the GP and specialist level as a number of our present medical staff is near retirement or beginning to lessen clinical activities.

YHC through WGH's Visiting Specialist Clinic has a contingent of 13 medical specialties, which provide consultation services at the hospital on a defined rotational basis.

Our Visiting Specialist Committee, comprised of representatives from HSS, Yukon Medical Association and YHC, is involved in the recruitment process and meets on a monthly basis to discuss a range of issues, including service needs, wait times, travel costs and telehealth among others. Specifically, the committee has identified and started to address wait time issues for ophthalmology (cataracts) consults.

### **Continuous Quality Improvement and Patient Safety**

YHC is dedicated to helping, healing and not harming patients. To this end, our patients, health care providers, support staff and leaders significantly benefit from a hospital environment which continually fosters a culture of safety. This approach sees a collective commitment to quality improvement processes anchored in fairness and trust.

As we work diligently to prevent and reduce harm, we recognize that adverse events do occur and this may result in patient harm. YHC uses a number of auditing and assessment tools to improve our understanding of any incident that occurs in our hospitals, learn from each case, and implement right changes to enhance patient safety, and overall patient experience while in hospital.

To further prevent harm, our patient care teams – doctors, nurses and other allied health professionals – regularly meet to review adverse events and make recommendations on system changes. While our hospitals have exceptional overall patient satisfaction, from time to time, we receive complaints or have incidents reported that require further review or investigation by the Office of the COS. As part of our improvement process, this can include conversations between patient and physician(s) so we can learn and take the appropriate action. In general, we can address most concerns through improving communication and/or in addressing hospital process or health system gaps. We also share high-level learnings with our general medical staff to help illustrate some of the issues our patients experience and suggest changes in practice that could result in better outcomes and increased patient satisfaction.

### **Conclusion**

I strongly believe that YHC's strength and resilience comes from within, and I have been able to witness first-hand during the first few months as Chief of Medical Staff, the dedication, increased engagement and skills and knowledge at all levels of the organization. YHC and its medical staff leadership are striving to further strengthen collaboration, to the benefit the organization and our patients.

I want to thank our medical staff and entire hospital team across all disciplines for working together towards safe and excellent hospital care each and every day.

Finally, I would also like to take this opportunity to offer a heart-felt word of gratitude to Dr. Wayne MacNicol, who provided obstetrical services in this community for more than two decades and served as Chief of Staff for the last three years. His dedication to patient care, clinical and administrative expertise, strong work ethic and experienced perspective have greatly contributed to the advancement of safe and excellent hospital care at YHC. We wish Dr MacNicol a well-deserved and healthy retirement.

Respectfully submitted,

Dr René L. Soucy, B.Sc., M.D. CCFP.  
Chief of Medical Staff/Chef de l'Équipe Médicale  
Yukon Hospital Corporation