

St. Paul's Hospital Staff Shine During Riot Emergency Response

Teamwork and planning help St. Paul's Hospital respond to higher than usual emergency levels during Stanley Cup riot.

See story on page 5



Dr. Sunil Mangal, emergency physician, St. Paul's Hospital and Jeanette Beattie, leader, Emergency Preparedness, PHC in front of the entrance to the emergency department.



Caring Hearts

Hello,
I am writing to thank the wonderful staff at St. Paul's Hospital on the high quality of care that I recently received. I was admitted to the emergency room with a confirmed pregnancy and an IUD in place. The IUD was removed, and over the next couple of weeks and several emergency room visits, it was confirmed that my pregnancy was most likely ectopic. From the first day that I was admitted, through the countless nurses, staff and doctors that I have encountered, I have only been treated with the utmost in compassion and respect. Everything has been clearly explained to me through each step of the process, and all of my questions have been answered. Losing my pregnancy has been a difficult process for many reasons, but the staff of your hospital have made it much more bearable. I especially want to thank the amazing emergency room team, the ultrasound technicians and the gynecological team.

Sincerely, M.

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Strategic Direction: Lead Through Exceptional Care, Service, Teaching and Research

Heart and Elder Care Ambulatory Clinic Opens at MSJ

Mount Saint Joseph Hospital offers health in-hospital and at home for heart and senior patients

Seniors and heart patients now have access to much needed cardiac testing and outpatient seniors' services, thanks to a new clinic at Mount Saint Joseph Hospital (MSJ).

The new Heart and Elder Care Ambulatory Clinic, located on the third floor of MSJ, brings together much needed cardiac diagnostic testing and outpatient seniors' care services under one roof.

"MSJ's new cardiac testing services will provide clinicians the information they need to determine lifesaving care for patients while in the hospital and after they are discharged home," said Dr. Sammy Chan, cardiologist and associate director of Providence Health Care's Healthy Heart Program.

This new clinic is made possible thanks to more

than \$390,000 raised by Tapestry Foundation for Health Care through its annual Scotiabank Feast of Fortune fundraising dinner, and through individual donations. These donations helped fund the purchase of a brand new echocardiography (ECHO) machine and a Holter monitoring and analysis unit, as well as renovations to the unit.

"I want to say how grateful we are for the Tapestry Foundation's ongoing commitment to fundraising for the tools and facilities we need to provide the best care possible to our clients," said Dianne Doyle, President and CEO, Providence Health Care. "Without the work of the Tapestry Foundation and their supporters, this new Heart and Elder Care Clinic would

not have been possible."

Outpatient seniors' care will be an integral part of this new clinic. The goal of the new clinic is to combine cardiac and seniors' care services to help patients transition successfully from the hospital back to the community.

"The streamlined and improved coordination of heart and seniors'

care, thanks to the close partnership of all services in this new clinic will result in more efficient, effective care and better health outcomes," said Dr. Janet Kushner-Kow, a geriatrician at MSJ.

This interdisciplinary approach means better health outcomes for seniors in hospital and after they return home.



The opening of the Heart and Elder Care Ambulatory Clinic at MSJ was marked with a traditional ribbon cutting in June, 2011. (L-R) Dianne Doyle, President & CEO, PHC; Dr. Janet Kushner-Kow; Mrs. Anita Law, co-chair of the Scotiabank Feast of Fortune Fundraising Committee; Father Vincent Nguyen, Chaplain, MSJ; Dr. Marla Kiess, director, Pacific Adult Congenital Heart / ECG, Cardiac Programs, St. Paul's Hospital; Dr. Sammy Chan; and Mark Spelliscy, former Tapestry Foundation board chair.

Summer Blooms for Residents of Brock Fahri Pavilion

Vancouver rain was held at bay on June 1 as residents, family members, care staff and invited guests celebrated the official re-opening of the Brock Fahri garden.

The new garden space includes wheelchair paths, new garden sheds, a host of native plants and shrubbery, and is complemented with new patio furniture. Focal points include a cenotaph to honour the many war veterans who make their home at the site, and a

donor wall to acknowledge the groups, organizations and individuals who helped put the bloom back in the garden.

The completion of this renovation project follows a successful two-year fundraising campaign by Tapestry Foundation for Health Care, who received significant support from various branches of the Royal Canadian Legion, the Vancouver Poppy Fund, the Legion Fund, Veteran Affairs Canada, and St. Mary's Health Foundation,

as well as numerous residents and family members. The garden now provides a welcome refuge for residents to enjoy outdoor visits with family and friends, and will

also be the venue for a host of activities including barbecues, pub nights, and other recreational activities. The garden is also a benefit to Brock Fahri's thriving gardening program.

Brock Fahri resident Bob Cholyk (front) helps cut the ribbon for the opening of the garden with grandsons (l to r) Eric and Peter, and Royal Canadian Legion zone commander Ken Harvey.





Annual Community Meeting Recognizes the Difference PHC People Make

With the theme "Making a Difference," PHC's annual community meeting on June 15 celebrated the past-year achievements of staff, physicians, and researchers with over 200 attendees, including representatives from health authority partners, community and business stakeholders, municipal leaders, and faith-based community organizations and parishes. PHC distributed its annual community report to the attendees, which can be found at PHC's website www.providencehealthcare.org.

Dianne Doyle, PHC President and CEO, emceed the event, commenting on the importance of the theme "Making a Difference" for the meeting and for the annual report.

"Health care has that built-in aspect where you know you're making an important difference in people's lives every day," said Doyle. "But, it is also true that the patients and residents we work with make an equal difference in our lives. The interactions we have with people, the will they demonstrate to take on their personal challenges and tragedies, the spirit and courage they demonstrate...these interactions feed the soul, embolden our resolve and further enlighten the mind."

Keynote speaker LGene Romeo Dallaire (Ret.)

made an impassioned and inspirational presentation with accounts of challenges and key learnings from the devastating events in Rwanda in the 1990s. His presentation made appeals to every individual's spirit to "make a difference" in the world for social justice and through good, selfless actions to help the most vulnerable in society.

The main highlight again this year was the celebration of PHC people through the presentation of the 2010 Faye Meuser Memorial Leadership Award, the new "Best" Patient Safety & Quality Award, the Mission Awards and the Research and Mission Award.

Faye Meuser was an exceptional nursing leader who spent 27 years in various nursing management positions at PHC until her retirement. She passed away in June 2007 and, in recognition of her contributions to PHC and her strong leadership, PHC and St. Paul's Hospital Foundation have established this award in her memory.

This year's recipient is Jennifer Duff, operations leader, Maternity and the Neo-natal Intensive Care unit. She was nominated for being a highly respected, visionary leader with a solid reputation as a mentor, role model, colleague and change agent. She was chosen from across the country

as an emerging leader in health care, under the age of 40, for the 2011 Emerging Health Leader Scholarship, and was sent to Sweden to study health care models.

The new "Best" Patient Safety and Quality Award is named for Lynette Best, who worked at PHC until her retirement in 2007 as Chief of Professional Practice and Nursing. The award is granted annually to recognize and celebrate a team or individual that has made a significant contribution to improving patient safety and quality of care, while advancing PHC's culture of safety, quality improvement and innovation.

This year's recipients for the "Best" Patient Safety and Quality Award are the team members for the Residential Care Medication Reconciliation initiative. This team set out to continuously improve the medication delivery system in residential care, create a workplace culture of safety and build capacity at the point of care to enable both timely communication and staff engagement. They have achieved a significant reduction in medication errors, spread the improved processes across all residential care sites, and sustained improvements over time. In last year's safety culture survey they also achieved significant improvements in six of



"Best" Award winners (l to r): Kushma Nand, Tina Ross, Myrna Guevara, Ali Nazeem, Bill Moore, Anna-Marie Afable, Julia Duda, Heather Mak, Ruth Stout and (in back row behind Julia and Heather) Grant McCullough and Pam Kelly.



(l to r) Annemarie Kaan, Acute Mission Award recipient; Dianne Doyle; and Jennifer Duff, Faye Meuser Memorial Leadership Award recipient.

the seven dimensions of a safety culture. The team was represented by Heather Mak, interim program director for Elder Care; Grant McCullough, professional practice consultant; Julia Duda, quality improvement specialist; Ruth Stout, nurse educator in residential care; Bill Moore, clinical nurse leader, Residential Care; Pam Kelly, pharmacy section head; Myrna Guevara, nurse educator; and residential care assistants Ana-Marie Afable, Kushma Nand, Ali Nazeem, and Tina Ross. Doyle also acknowledged

all residential care staff and leadership who participated on the Residential Pharmacy Nursing Committee and cross-site Medication Safety Improvement Working Groups; the success and sustained improvements from this initiative would not have been possible without them.

The Mission, and Research & Mission awards had been previously announced internally and were celebrated during Providence Day in May and at other recognition events.



Strategic Direction: Promote Partnerships

Tapestry Trailblazers Finished Strong in Scotiabank Group Charity Challenge

Under sunny skies on June 26, 2011, Tapestry Foundation for Health Care team members reveled in the sweet success of having raised more than \$63,000 for dementia care research.

This year's participating team faced the Charity Challenge at the Scotiabank Vancouver Half-Marathon & 5K with more than 15 captains who rallied the energies of 100 colleagues, family and friends to collect pledges.

Tapestry Foundation

was chosen as one of three featured charities for this year's event.

"It was a great honour to be featured this year," noted Ann Corrigan, CEO for the Foundation. "In three short years of taking part in the event, we've raised more than \$100,000, and every year we've had great support from PHC staff. It's been a great team effort."

Proudly demonstrating their commitment on event day were a number of Providence Health Care

and Tapestry Foundation board and staff members. The following individuals joined the ranks of the Foundation's "Team Spirit" for having each collected more than \$1,000 in pledges.

Congratulations and special thanks go to: Colleen Tracy Torrison, Dianne Doyle, Doris Chang, Imelda Villeneuve, Mark Spelliscy, Mary Procter, Dr. Nancy Van Laeken, Nazeem Ali, Rae Johnson, Dr. Ronald Carere, and Yolanda Bouwman.



Silvija Goodyer (right), Volunteer Resources coordinator at Mount Saint Joseph Hospital, made it a family event with parents Rita Harnden, and Fred Harnden, a resident of Holy Family Hospital.



Strategic Direction: Live Our Mission

Brother and Sister Reunite at Brock Fahrni After 20 Years



Jasmine and Mimoso in front of the hockey playoff wall at Langara residence.

Brock Fahrni that day, they had not seen each other in over 20 years.

"You are all angels," Jasmine said when she met the staff at Brock Fahrni. "You have taken good care of my brother, who I thought was dead many years ago. And, now I am blessed by your good care

to see him again". Jasmine was very tearful as she kept reiterating these words to the different staff members she met at Brock Fahrni.

Mimoso was born in Angola, the fourth of five children. He moved to Sierra Leone as a child. He

eventually moved to the United States and found his way to Vancouver. His sister, Jasmine, the youngest of the family, moved to London, England and lost track of Mimoso along the way. After not hearing from him and failing to locate him, she assumed he had passed away some time ago. A phone call to Mimoso's daughter in Montreal, by the Brock Fahrni care staff in the fall of 2010 to discuss his medical issues, was the spark that began the family reunion. Jasmine was able to reconnect with Mimoso because of this phone call, initiated by the Brock Fahrni staff. A few months later, Jasmine made a very touching phone call to speak with her brother at

Brock Fahrni and wish him a Merry Christmas, after not speaking with him for over 20 years.

When the staff first saw Jasmine on May 25, 2011 they instantly made the connection that this was Mimoso's long lost sister. "They both have the same big brown eyes", noted Jennifer McDowell, unit coordinator. Although Mimoso is not able to talk, his big brown eyes lit up when he saw his sister and he had the widest smile on his face for days.

Staff were interested to learn that Jasmine, is a nurse back in London - initially in midwifery and later switching to elder care nursing. She was very impressed by Providence Health Care's Eden

philosophy and hoped to take some learnings back to the UK to share with colleagues.

Jasmine has led a fascinating life herself. At the age of 60, she started running marathons. Staff told Jasmine about the Scotia Bank marathon which supports PHC's residential sites through the Tapestry Foundation, and hopefully Jasmine will make a return visit to see Mimoso and run with staff in next year's marathon. In the meantime, staff have exchanged email addresses with Jasmine so they can give her updates on her brother and send greetings between her and Mimoso.

May 25, 2011 was a very emotional day for both residents and staff at Brock Fahrni, but especially for Mimoso Sogie-Thomas and his sister Jasmine Gilpin. Little did staff know, that when Jasmine walked into

St. Paul's Hospital Code Orange Response

Within minutes of the June 15, 2011 defeat of the Vancouver Canucks by the Boston Bruins, throngs of troublemakers, fuelled by alcohol and disappointment, turned the normally sedate city into a rioting disaster zone. St. Paul's Hospital (SPH), was to take the brunt of the fallout of injured patients. Luckily, the hospital and its staff had engaged in weeks of preparation for such a scenario.

Planning for the Worst

David Brown, operations leader, Emergency Department, SPH, was just one of many staff waiting to see how things would unfold that night.

"I was following the rioting on the radio. As soon as I heard that people had burned and flipped over a car, I knew it was time to head to work," said Brown. Fuelled by memories of the 1994 Stanley Cup riot, the SPH emergency preparedness team had been working on an emergency response plan since before the playoffs started in April. This "worse case scenario" preparation was to ensure that SPH would be ready in the event that a Code Orange was called (Code Orange is a hospital code for mass casualties and involves increasing staffing and preparing a hospital for a possible surge of patients).

"I like to think of

emergency preparedness planning as the foundation of a house", said Jeanette Beattie, leader, Emergency Preparedness, PHC. "The rest of your house (an emergency response) relies on this strong base (an emergency preparedness plan)."

Beginning mid-May, 2011, PHC's Emergency Preparedness Planning group, led by Beattie, started connecting with the City of Vancouver and municipal groups, including BC Ambulance Service and Vancouver Police Department, via conference calls to discuss the potential need for emergency response during the hockey playoffs. By June, the focus was specifically on SPH – with discussions around issues such as: the development of a rapid response team, security, and extra staffing levels – and from there, a detailed hospital contingency plan was developed.

Code Orange

When the final game rolled around, hospital staff and physicians were prepared. Previous games had drawn upwards of 75,000 people to the area, and with hot weather and alcoholic consumption adding to the situation, they knew that the evening could go either way.

By 10 pm, SPH, along with Vancouver General Hospital, had called a

Code Orange, activating their Emergency Operations Centres in preparation for a mass influx of casualties. Approximately 60 patients were treated in the first two hours of the incident (between 10:00pm – 12:00am), for a total of 147 casualties at SPH resulting from the riot throughout the night. Only four patients were required to be admitted. Injuries included stabbings, minor head injuries, abrasions/lacerations, fractured jaws, sprained ankles, and of course, tear gas and pepper spray exposure.

"To help ensure that the emergency department didn't get congested with minor injuries that could be treated on the spot, we set up a triage system in a courtyard outside of the emergency department," said Dr. Sunil Mangal, an emergency physician at SPH for over 10 years, who worked the night of the riot. "Those needing bandages or water to flush their eyes out were able to do so outside, enabling those with more serious injuries to receive care quicker in the emergency department."

The triage system in the outside courtyard was also useful for keeping tear gas remnants from entering into the hospital where it could spread and affect patients and staff.



Photo courtesy of Andrius Grai.

During the riots, access to downtown Vancouver was restricted. BC Ambulance Service used Comox street, adjacent to St. Paul's Hospital, as a staging area where ambulances could be deployed to emergency incidents within downtown.

Call to Action

Other support teams were also integral to the successful response. Hospital security ensured everyone was safe and able to do their jobs; a psychosocial support team provided support to friends and loved ones of those injured; and communications and public affairs staff fielded media calls and ensured that the correct information about the situation was available to the public – including one important fact – that the hospital continued to be open to the public throughout the incident. "I'm so proud of how

everyone banded together and went above and beyond the call of duty," said Brown. "It's a testament to the amazing staff here and everyone's willingness to pitch in during a time of need." "We really are a 24 hours a day, seven days a week operation and during an emergency situation, we need to ensure that we continue to provide care to our communities," added Beattie. "It's so satisfying to see PHC people put emergency preparedness planning into practice, helping mitigate the impacts of a disaster on the organization."

Rotary Club of Vancouver's Hearing Foundation Donates \$30,000 to PHC's Audiology Department

The Rotary Club of Vancouver's Rotary Hearing Foundation recently donated \$30,000 to St. Paul's Hospital for new state-of-the-art audiology equipment. With a matching donation from the St. Paul's Hospital Foundation, the Audiology department was able to purchase an IHS Evoked Potential System, an Otodynamics OAE System, an Immittance Bridge and a Real Ear Measurement System.

Cindy Gustin, professional practice leader, Audiology, St. Paul's Hospital; and coordinator, BC Adult Cochlear Implant Program, says the department is very grateful for the support of the Rotary Foundation.

"This generous donation has opened up many options for our hearing centre. The new equipment allows us to provide the most up-to-date audiological testing in a more efficient manner. The features, which allow us to better educate and counsel our patients and their families about the impact of hearing loss, can make a big difference in the day-to-day lives of our patients."

The Audiology Department at St. Paul's Hospital is a centre of excellence which has provided comprehensive audiological services to

hard of hearing individuals for over 30 years. Staff in the department assess hearing loss, provide specialized site-of-lesion testing, evaluate central auditory function, and monitor hearing loss related to ototoxic medication in special populations. Audiological testing is a cost effective tool which assists ear, nose and throat specialists (ENT) in diagnosing the underlying causes of hearing loss.

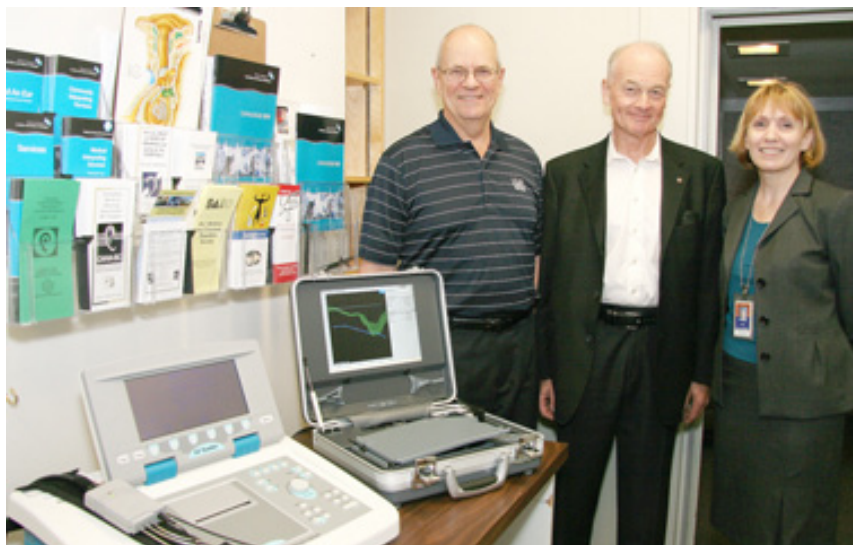
The B.C. Adult Cochlear Implant Program is also located at St. Paul's Hospital and is the only centre providing cochlear implant services to adults in British Columbia. Audiological testing is a crucial part of determining cochlear implant candidacy, in monitoring the progress of our recipients and for evaluating potential soft failures of the cochlear implant.

The New Equipment

The following is a list of the newly purchased equipment and descriptions of the function of each. Thanks to the Rotary Club of Vancouver for their support.

IHS Evoked Potential System

This equipment is used in differential diagnosis of hearing loss enabling us to provide several specialized



Jack Zaleski and Don Waters from the Rotary Hearing Foundation, with Cindy Gustin, professional practice leader, Audiology, on a recent visit to the St. Paul's Hospital audiology department to view the newly purchased equipment.

site-of-lesion tests. We can measure how sound travels along the auditory nerve and learn important diagnostic information.

OAE System

Otoacoustic Emission Testing is a fast, easy test that can be used with all ages. It is an excellent tool in differential diagnosis of hearing loss, evaluation of Central Auditory Processing Disorders and for monitoring hearing loss due to noise exposure and/or ototoxic medication. This test is done with every patient who is seen for a hearing assessment.

Immittance Bridge

Acoustic immittance testing is a fast, easy test assessing the middle ear function of patients. It is done on every patient and is part of the differential

"The (equipment) features, which allow us to better educate and counsel our patients and their families about the impact of hearing loss, can make a big difference in the day-to-day lives of our patients."

*Cindy Gustin
professional practice leader,
Audiology, St. Paul's Hospital*

diagnostic test battery. It also provides important information to physicians regarding potential site of lesion and allows us to check hearing aid settings.

Real Ear Measurement System

This equipment is used to assess whether hearing aids have been adjusted appropriately to match the hearing loss of a particular individual. It is critical in assessing whether a hearing impaired individual may benefit from adjustments to their hearing aids, new hearing aids or may be a candidate for a cochlear implant. A unique feature of this equipment is its ability to simulate hearing loss so that others have a better appreciation of the patient's disability. Anything that can better educate or help a hearing friend or family member empathize with how a hearing impaired person struggles is a powerful counselling tool.



Strategic Direction: Live Our Mission

St. Vincent's Langara – 20 Years of Caring People Changing Lives

St. Vincent's Langara celebrated its 20-year anniversary in a week long celebration commencing Saturday June 4 and ending Saturday June 11, 2011. Celebrations included performances, an official birthday cake, and anniversary mass celebrated by Monsignor Stephen Jensen.

The celebration was an opportunity to commemorate 20 years of providing wonderful care for our residents and families and also celebrating the rich history leading back to St. Vincent de Paul and our founding Sisters (the Sisters of Charity). We also honoured Providence Health Care's mission, vision, and values, and the hope of good to come over the next 20 years.

The following is a summary of the various events held over the course of our celebrations at Langara submitted by various staff members:

Saturday, June 4

The Borealis String Quartet, composed of Patricia Shih, violin; Yuel Yawney, violin; Nikita Pogrebnoy, viola; and Shih-Lin Chen, cello, played some magical Beethoven songs. One resident had this to say about the performance, "The way they played the songs was just beautiful".

Monday, June 6

The morning began with a traditional pancake breakfast and opening remarks from Arif Padamshi, site/operations leader. Our residents were served pancakes on their morning meal trays while staff, volunteers, family and students were invited to the atrium to enjoy pancake breakfast there.

Wednesday, June 8

A formal cherry tree planting celebration was held at Langara, with the following people in

attendance: Mary Procter, VP of Finance and Planning and Langara's adopted member of the Senior Leadership Team; Thomas Salley, Acting VP, Mission, Ethics and Spirituality and Director of Mission Services; and Ann Corrigan, CEO of the Tapestry Foundation for Health Care. The tree was planted in the garden off the atrium by Chris Bernard, Pastoral Care Service, Arif Padamshi, and resident Glenn Fraser. Those who spoke during the ceremony remembered our history and the goodness that has thrived at Langara. Resident Marguerite Stanlow did a fantastic job reciting a poem at the celebration.

Thursday, June 9

With the help of Leah Rosling, the music therapist and Shanna-Lee Sanchez, from Pastoral Care, Langara's Rehab Team hosted an impromptu sing-a-long with some of the residents' favourite and most popular tunes. Leah played the piano beautifully, while Shanna-Lee, Liza Lino and Steph Gockeln led the residents in song!

Also on Thursday, Mr. David Shih and his friend Solina Sze performed two sonatas and four pieces by Dvorak. The performance was dedicated in praise of the Langara staff. David Shih's father has lived on the Birch unit at Langara for four years.



(l to r) Thomas Sally, director, Mission Services; Mary Procter, VP, Finance and Planning; and Arif Padamshi; St. Vincent's Langara site leader, cut Langara's 20th anniversary cake.

When David approached the unit's social worker, Erin Fowler to discuss arranging a performance in honour of the staff, Erin recognized how this could fit in beautifully with the anniversary celebrations. David was motivated by "the high level of spirit, personality and culture at Langara".

Friday, June 10

Residents, families and staff were privileged to witness a performance by EnChor, a 40 member choir of seniors under the artistic direction of Dr. Diane Loomer. All members of the choir are fine musicians, many of them formerly performing with Chor Leoni, Electra, the UBC Opera singers and the Vancouver Symphony Orchestra. EnChor is renowned for its vibrant and extensive repertoire of Canadian folk and

traditional songs, especially those from the Maritimes and Quebec. They bring warmth, humour, passion, playfulness and tenderness to their performances, with many of those in attendance moved to tears, by the beauty and the memories evoked.

Saturday, June 11

On the final day of celebrations Michael and George sang some Western songs for residents. The residents were clapping their hands and tapping their feet as the duo sang song after song.

As time moves forward, may Langara continue to flourish in its mission, vision, and values and continue to make a difference in the lives of those we serve! Happy anniversary Langara Residence!



A view from above during EnChor choral performance at Langara Residence.



Strategic Direction: Engage and Develop our People

Boehringer Ingelheim Establishes Physician Scholar Awards at St. Paul's Hospital and Vancouver General Hospital

Boehringer Ingelheim (Canada) Ltd., one of the world's top 20 leading pharmaceutical companies, is making \$225,000 in donations to both St. Paul's Hospital and Vancouver General Hospital (VGH) to support the scientific development of young cardiology specialists.

"Boehringer Ingelheim believes in the importance of maintaining excellence in scientific research and training," said Dr. Theodore Witek Jr., President and CEO of Boehringer Ingelheim (Canada) Ltd., at an event held May 26 to mark the contribution. "The establishment of the Boehringer Ingelheim Physician Scholar Awards will support this goal by equipping the next generation of cardiologists

and cardiac surgeons with the tools they need to create a healthier future for the people of British Columbia."

The Boehringer Ingelheim Physician Scholar Awards will provide cardiologists and cardiac surgeons at each hospital with funding that will allow them to dedicate time to clinical research, in addition to the time they spend with patients. In particular, the awards were created to kick-start innovative research projects and maximize information gained from larger projects, as well as provide opportunities for mentoring. These donations will ultimately benefit the thousands of British Columbian heart patients who are treated at St. Paul's Hospital and VGH each year.

"We are pleased that a leading pharmaceutical company like Boehringer Ingelheim is supporting the continued growth of patient care and clinical research at St. Paul's Hospital," said Stephen Shapiro, President and CEO of St. Paul's Hospital Foundation. "The Boehringer Ingelheim Physician Scholar Award will play a vital role in helping the provincial Heart Centre at St. Paul's attract and retain the world's top talent and continue offering inspired care, research and teaching that benefits our patients."

"We know that every year thousands of patients

with heart disease and related conditions depend on the experts at VGH for specialized cardiac treatment and care," said Ron Dumouchelle, President and CEO, VGH & UBC Hospital Foundation. "Through

their donation, Boehringer Ingelheim is helping young cardiology physicians and cardiac surgeons at our hospital do more for today's and tomorrow's patients."



(left to right): Dr. Theodore Witek Jr., President and CEO of Boehringer Ingelheim (Canada) Ltd.; Dr. Ken Gin, head of the VGH and UBC Division of Cardiology; and Dr. Bruce McManus, Co-Director of the Institute for Heart + Lung Health and and director of the UBC James Hogg Research Centre at St. Paul's Hospital.



Creative Souls

Supporters across Metro Vancouver opened up their homes and restaurants and donated their time and services as part of the inaugural St. Paul's Supper Club on June 14.

The first edition of the St. Paul's Supper Club featured five private dinner parties held at either the home of a

Inaugural St. Paul's Supper Club Raises Funds and Awareness for SPH

local philanthropist or at one of the city's finest restaurants. Guests at each party enjoyed a truly unique dining experience featuring a customized meal prepared by one of the city's premier chefs.

The dinners raised funds to support the world-leading patient care, research and teaching taking place right here in Vancouver at St. Paul's Hospital. Guests at each dinner had the

opportunity to learn more about this innovative work through an intimate evening of conversation with some of St. Paul's brightest physicians and researchers, including Andy Ignaszewski, Michael Krausz, Adeera Levin, Bruce McManus, Don Sin, Nancy Van Laeken and John Webb.

St. Paul's Hospital Foundation thanks everyone who helped make this year's St. Paul's

Supper Club a success, including Cecile and Gurval Caer, Chantelle and George Wong, Jake and Judy Kerr, Fleuri Restaurant and Chef Michael Deutsch, Hawksworth Restaurant and Chef David Hawksworth, Tojo's Restaurant and Chef Hidekazu Tojo, West Restaurant and Chef David Gunawan, and YEW restaurant + bar and Chef Grant MacDonald.



Pictured (left to right): St. Paul's Hospital Foundation Past-Chair Paul Hollands with Chef Hidekazu Tojo and PHC's Dr. Michael Krausz.



Strategic Direction: Foster a Culture of Innovation and Improvement

Biomarkers to Diagnose and Prevent 'Lung Attacks' That Can Kill



COPD patient Vivianne Toupin (right) with physiotherapist Fiona Topp (left) who runs the Respiratory Rehabilitation Program at St. Paul's Hospital.

Vivianne Toupin knows firsthand just how deadly chronic obstructive pulmonary disease (COPD) can be. In her lifetime, three of her family members have succumbed to the disease, which damages the airways and air sacs of the lungs, making it hard to breathe. Among them were her two uncles, and her father who spent his last years waiting to die from the progressively debilitating condition. The disease has not spared the women in her family either, as both Vivianne and her youngest sister continue their ongoing battle with COPD. Nevertheless, Vivianne is determined to be more than another statistic in the growing number of individuals afflicted by the disease. As a supporter of and participant in COPD research, she is determined

to stop the disease that has victimized her family. Unbeknownst to most, COPD affects close to three million Canadians, approximately half of whom remain undiagnosed. Although it is one of the most common lung diseases and is a disease that kills one person every ten seconds, COPD frequently remains undetected due to inadequate diagnostic tools. Lung function tests that are presently being used for identifying COPD are not very specific to the disease, as lung function can be affected by a number of different reasons including asthma, pneumonia, heart failure and even a cold.

"Lung function measurements are not very specific for COPD; clinicians – especially those who are inexperienced

– often guess at the diagnosis. This may lead to the wrong treatment and expose patients to unnecessary costs and side effects," says Dr. Don Sin, Canada Research Chair in COPD and head of the Respiratory Division at St. Paul's Hospital.

In addition to the lack of tools for diagnosing COPD, there is no existing way to predict the onset of acute worsening that some COPD patients like Vivianne suffer from. Often referred to as "lung attacks" or exacerbations, they sharply worsen COPD symptoms like breathlessness, coughing, and fatigue. Lung exacerbations which are commonly triggered by viral or bacterial infections can be fatal, and are the leading cause of hospitalization and death for patients with COPD. Indeed, such exacerbations

Although it is one of the most common lung diseases and is a disease that kills one person every ten seconds, COPD frequently remains undetected due to inadequate diagnostic tools.

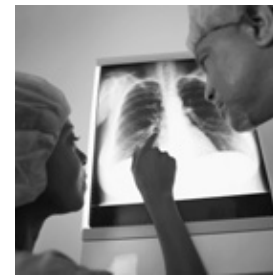
are the leading cause of hospitalization among all ailments seen in emergency rooms across Canada.

For Vivianne, experiencing an exacerbation is akin to being in a breathless paralysis.

"When you get a lung attack, your capacity to breathe is reduced to half," shares Vivianne who suffers from an exacerbation at least once a year. "Your mind stops working, you are constantly gasping for air, and you have no energy. You basically become a vegetable."

It takes at least a few weeks before Vivianne is able to resume life normally after suffering through an attack. Such episodes leave her frail and devoid of energy to carry out even the simplest of her daily tasks.

To help COPD patients like Vivianne cope better, Dr. Sin is leading a multi-million dollar program within the Centre of Excellence for Prevention of Organ Failure (PROOF Centre) to discover and develop biomarker blood tests to help clinicians diagnose the disease more accurately and predict which COPD patients will experience life-threatening lung attacks. The biomarkers will help doctors guide therapy after diagnosis, and may be used to help facilitate the development of new therapies to treat



COPD in improved ways. The program is well underway, and researchers in the PROOF Centre are expecting to have candidate biomarker sets identified by the end of 2011.

For Dr. Sin, spearheading a program that will eventually lead to improved patient management of those suffering from a disease without a cure makes perfect sense.

"We absolutely need blood biomarkers in COPD", he reiterates. "We need them to prevent hospitalizations, further lung damage, and even death."

Having survived numerous lung attacks that are extremely difficult to treat, Vivianne recognizes the importance of the research undertaken to develop biomarker blood tests in COPD.

"This research could possibly enhance the life of COPD patients, and maybe even extend their lives," says Vivianne.

For more information on the COPD Biomarker Program, visit www.proofcentre.ca.



Strategic Direction: Lead Through Exceptional Care, Service, Teaching and Research

PHC Critical Care Researcher Receives Distinguished UBC Killam Research Prize

The University of British Columbia Killam Research Prizes are awarded annually to full-time faculty members in recognition of distinguished research and scholarly contributions of international significance.

Dr. Keith Walley, professor in the Division of Critical Care Medicine (Department of Medicine) and assistant head of Basic Research in the Department of Medicine at St. Paul's Hospital, was the recipient of a Killam Research Prize in the Science/Applied Science category in 2011.

Dr. Keith Walley completed his Medical Degree at the University of Manitoba, his Internal Medicine Residency at



Dr. Keith Walley, recipient of the Killam Research Prize.

McGill teaching hospitals in Montreal, and his Critical Care Research/Clinical Fellowship at the University of Chicago under the supervision of Dr. Larry Wood.

Dr. Walley has lectured nationally and internationally on numerous topics related to critical illness, including high profile meetings such as the American Thoracic

Society Conference, and the International Symposium on Intensive Care and Emergency Medicine in Brussels. He has published over 140 peer-reviewed manuscripts including studies in *New England Journal of Medicine*, and the *Journal of the American Medical Association*.

Dr. Walley's research interests and accomplishments are broad and include: the pathophysiology of organ dysfunction in critical illness, oxygen transport in peripheral tissues, and genetic determinants of outcome from critical illness. Specifically, his research laboratory is currently located within the iCAPTURE

Laboratories at St. Paul's Hospital where he works closely with many other renowned scientists.

His work is focused on unraveling the disturbances of body functions, caused by disease and improving the care of patients with severe sepsis. Severe sepsis, or organ failure due to severe infection, affects more than 1,000,000 patients per year in North America with a mortality rate of greater than 30 per cent. It is the most common causes of death in patients in the Intensive Care Unit.

Dr. Walley currently works with Dr. John Boyd, a Michael Smith Foundation Scholar and assistant professor in

the Division of Critical Care Medicine, to investigate the basic mechanisms responsible for the impaired heart function and other organ dysfunction during inflammatory disease states, including sepsis and post operative states. He is also working with Dr. James Russell, a professor in the Division of Critical Care Medicine, to identify key markers in genes regulating inflammatory and innate immunity to determine whether they may predict outcomes in patients with critical illness. This work will eventually lead to novel treatments of disease, and improve care of patients with critical illness.



Strategic Direction: Advance Leadership in Health Care

PHC Occupational Therapists Recognized

Lisa Kristalovich and Lindi Cassel, both occupational therapists in the Holy Family Hospital Rehabilitation Program, were recently honoured by their peers at the 14th Annual Building Bridges Education and Research Retreat, a joint effort by Vancouver Coastal Health (VCH) and Providence Health Care (PHC).

Lisa received the Ginny Fearing Learning as a Way of Being Award for her ongoing contributions in the specialty area of Driver

Lindi and Lisa's contributions to the profession of occupational therapy and to PHC are greatly appreciated.

Rehabilitation. She is a mentor to occupational therapist colleagues at HFH and to those working in the same specialty both locally and nationally. Lisa has helped establish practice guidelines

within PHC, as well as regionally via the Driving Special Interest Group with the BC Society for Occupational Therapists (BCSOT), of which she is one of the founding members.

Lindi received the mOTivator in Practice Award for her work to inspire occupational therapy practice. Lindi is a recent graduate who came to HFH in 2010, and she accepts opportunities to learn and to share knowledge and skills



Lisa Kristalovich (left) and Lindi Cassel, occupational therapists at Holy Family Hospital

with her colleagues and her patients. She is able to translate challenging clinical situations into practical learning opportunities, and she encourages excellence in practice through her

dedication in helping others.

Their contributions to the profession of occupational therapy and to PHC are greatly appreciated.



Strategic Direction: Advance Leadership in Health Care

PHC Receives Two Gold Apple Awards

Congratulations to two PHC award recipients recognized by the Health Employers Association of BC (HEABC) at its 5th annual Excellence in BC Health Care Awards on June 20.

Providence's Rapid Access to Consultative Expertise (RACE) project won the Gold Apple this year in the Top Innovation: Affiliate category, and the Infection Prevention and Control (IPAC) Link Nurses project won an Award of Merit in the same category.

The Rapid Access to Consultative Expertise, or RACE model, is a telephone advice line where family practitioners can call one phone number and choose from a selection of specialty services for real-time consultation. The telephone call is routed directly to the specialist's cell phone or pager for real time educational advice. User satisfaction has been unanimous – all family practitioners said they would use the service again and viewed it as an excellent resource, allowing for practical and specific advice in real time. Ninety per cent of calls were returned within one hour and 75 per cent of the calls were returned within 10 minutes. RACE is also having a financial impact. All of the family physicians using the service said

RACE reduced the number of unnecessary referrals to specialists, prevented some ER visits, reduced costs and placed less of a load on specialists.

RACE is one of the outcomes of PHC's continuing partnership with the provincial Shared Care Committee (a joint committee of the BC Ministry of Health Services and the BC Medical Association) in cooperation with Vancouver Coastal Health to facilitate a new collaboration between specialists and family physicians (FPs) for improving and transforming care for patients with complex chronic conditions.

The Shared Care initiative facilitates interaction between FPs and specialist champions to develop and implement tools and processes to streamline care for patients with chronic conditions. The initiative aims to redefine the role of specialty teams to support FPs in providing comprehensive care to patients, as well as to increase access to specialists through telephone advice prototypes, expedited referral and re-referral processes, with a focus on improving communication, knowledge translation and developing role

clarification for FPs and specialists.

Congratulations to all the RACE winning team members Clay Barber, Shared Care Committee member, BCMA; Carole Gillam, Executive Director, Primary Health Care, VCH; Dr. Gordon Hoag, Co-Chair Provincial Shared-Care Committee; Dr. Scott Lear, SFU Chair in Cardiovascular Disease Prevention Research; Dr. Bob Levy, specialist lead, Chronic Disease Management Strategy, PHC; Dr. Garey Mazowita, family practice lead, Chronic Disease Management Strategy, PHC; Helen Roberts, change leader, PHC; Camille Rozon, change specialist, PHC; David Thompson, VP Seniors Care & Clinical Support Services, PHC; Valerie Tregillus, Co-Chair Provincial Shared-Care Committee; and Margot Wilson, director, Chronic Disease Management Strategy, PHC.

The IPAC Link Nurses initiative was recognized for establishing over 100 nurses as local, unit-based infection prevention and control resources. Link Nurses have been found to be proactive educators, positive role models and an effective resource for staff to turn to with infection control related questions at the front lines. While IPAC Link Nurses



Dr. Marc Romney (centre) accepted the Award of Merit on behalf of PHC's IPAC team for the Link Nurses initiative, from Lee Doney, HEABC President and CEO (left) and Alice Downing, HEABC Chair.



PHC's Margot Wilson (centre) accepted the Gold Apple Award on behalf of her RACE team from Lee Doney, HEABC President and CEO (left) and Alice Downing, HEABC Chair.

are common in Europe, the PHC program is one of the first in North America, and is demonstrating great improvements at PHC. From June 2009 to December 2010, hand hygiene compliance rates increased by 40 per cent. The Link Nurses program continues to enhance PHC's culture of patient safety by reducing the spread of health care associated infections.

Congratulations to the winning IPAC team members: Celia Ambery, Jim Curtin,

Wayne Gilbert, Infection Control practitioners; Dr. Elisa Lloyd-Smith, epidemiologist; Mary McNaughton, Infection Control practitioner; Craig Pienkowski, Infection Control practitioner; Howard Green, leader, Infection Control; and Luz Viereza, clerk, Infection Control. Kudos also to Dr. Marc Romney for his continued leadership of IPAC, and to the more than 100 Link Nurses for their ongoing important contributions to better health care.



Strategic Direction: Live Our Mission

A Father's Day Celebration at Brock Fahrni

One of the neighborhoods of Brock Fahrni – Meadowlane – held its annual Father's Day Celebration in June. Interesting fact – it's all men who live in that neighbourhood at the residence. This year, the fabulous breakfast feast (shared with many throughout the building and those who happened to be drawn in by the irresistible smell of food cooking) was made possible through Eden funds and the culinary skills of Pauline Mah and Cherry Cervantes, with May Espino assisting.

Waffles! Blueberry pancakes! Sausages, eggs, fruit and homemade frittata! What fun with such a great community of residents and staff and friends. Celebrations included: background guitar music (Rick Benoit) and fresh flowers, tablecloths, and place settings.

In the words of Heidi: "I have a place of my own, a place where I belong."

Somehow work doesn't seem like work with events such as these. For all involved, it was a welcome respite of comfort, satisfaction and joy.



Back row, left to right: Cherry Cervantes, RCA; Pauline Mah, RCA; and Meadowlane resident Brother J.J. Heysel. Front row left to right: Meadowlane residents Mike Ward and Al Domlorsky with May Espino, RCA.

Youville Residence, a Gardening Community



*Mila Villar, resident,
(Lavender Place at Youville)
plants flowers at the
residence.*

After a long winter, Youville staff, volunteers, elders and Montessori School students came together in the late spring to turn the dormant soil and plant perennials, tomato plants and blueberry bushes. Stop by and check out their gardens.



Lucy Luongo, Mission Services and Kay Hubball, Volunteer Coordinator prepare the gardens at Youville Residence this spring. In the background, Dr. Lawrence Wong, resident, Marguerite Place at Youville.

WE WANT TO HEAR FROM YOU

Send in your stories, ideas, photos, thank-yous and events (to a maximum of 200 words please) to share with staff across Providence Health Care.

Your submission may be edited for length.

You can mail material to:

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Ph: 604-806-8350
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How you want to be treated.