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Over the past five years when my aunt was in care at Bethammi Nursing Home, I had many interactions with staff over the phone, in person and through email. It is not easy being a caregiver when you live three provinces away, but staff helped to bridge this gap by being organized, thorough, and professional. If they didn't have an answer to my question, they found out and responded in a timely manner. Losing a family member is never easy and COVID-19 added another layer of complexity as family and friends were not able to visit freely. Staff made a difficult situation bearable by providing truly commendable care. I am grateful for the help and support given to me at one of the most challenging times in my life.

Family, Bethammi Nursing Home



As we advance our vision of becoming a leader in client-centred care, we plan through the lens of Quality, Safety and Risk. Our **Strategic Plan 2016-2020** will focus on four key Strategic Directions:

#### **Here for Our Clients**

We will address unmet needs through our programs and services

#### **Here for Our Partners**

We will collaboratively define our role in the provision of care for our communities

#### **Here for Our People**

We will work to advance our culture and continue our caring mission with our staff and volunteers

#### **Here for Our Future**

We will plan for continued financial sustainability

HERE FOR OUR

# Clients

### Remote Care Monitoring Pilot for Geriatric Assessment Rehabilitative Care and Geriatric Psychiatry

St. Joseph's Care Group has received funding to pilot innovative virtual care delivery models in Geriatric Assessment Rehabilitative Care Post Discharge and Geriatric Psychiatry.

Upon discharge from inpatient Geriatric Assessment Rehabilitative Care (GARC), clients will be monitored for 30 days via the technology of their choice (telephone, a tablet which is provided, or their own device) to ensure a successful transition home, and mitigate risk of emergency department visits and readmission. A partnership with Community Paramedicine supports an escalation pathway for clients to be seen in their home, if needed. The Remote Care Monitoring (RCM) Program went live on November 1st and within the first three weeks, had 10 active clients. RCM aims to support 130 clients discharged from GARC during the pilot period, which ends on March 31, 2022.

The Geriatric Psychiatry pilot provides support for clients with depression and anxiety who are living at home. St. Joseph's Care Group partnered with the North of Superior Counselling Programs to serve clients in the city and district of Thunder Bay. Clients have the option of using a tablet provided by the program, or loading the app onto their own device. The program provides clients education to assist them with self-management of their condition. Clients will also answer standardized health questions at regular intervals, which are monitored by the outpatient team. If a client is struggling, an escalation pathway will be triggered, directing clients to an appropriate care provider - Outpatient Geriatric Psychiatry Program, or Community Paramedicine, or the emergency department. It is projected that the program will serve up to 5 clients a month through to March 31, 2022.



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#### Physical Rehabilitative Care - Social Worker

As a step to fulfil the *Wiidosem Dabasendizowin: Walking with Humility – A Plan to Develop Relationships and Practices with Indigenous Peoples*, the physical rehabilitation Social Work team at St. Joseph's Hospital welcomes Valerie Shawinimash. Valerie is specialized in Indigenous Social Work. As part of her role, Valerie will build capacity for culturally-safe care.

#### **Gambling and Behavioural Addictions Program**

The Gambling program at Sister Margaret Smith Centre has resumed educational presentations for students with a record number of requests from local schools. The *iCraze: Growing up in a wired world* is offered to Grades 4-6 and focuses on normal versus excessive use of screens, online safety and alternative coping strategies to encourage non-screen activities for entertainment and/or manage stress.

#### **Enhancing Care Program - Care for Care Partners**

In January 2022, St. Joseph's Care Group will embark on a new program called Enhancing Care (EC). This program will provides one-to-one support and group programing for care partners who are providing care at home to people living with dementia. Coordination of this community-based service is through St. Joseph's Care Group's Community Psychogeriatric Resource Consultant Program.

The EC Program helps care partners manage the stress and complexities associated with caring by focusing on problem solving techniques. The EC Program interventions include Coaching Advocacy Respite Education Relationship Simulation (CARERS) and Training Education and Assistance for Caregiving at Home (TEACH) clinical groups. Referrals are currently being accepted for this new offering.

HERE FOR OUR

# Partners

#### The Regional Palliative Care Program and Indigenous Health Services

The Regional Palliative Care Program and Indigenous Health Services with St. Joseph's Care Group (SJCG) presented at the 2<sup>nd</sup> Annual Northern Ontario Home and Community Care Network conference. The presentation focused on the Indigenous Palliative Care Education initiatives, program resources and supports available to service providers. Indigenous Health Services provided information on the current health team and services available to clients at SJCG and discussed the importance of current services, including strong community linkages and

collaborations that support comprehensive care approaches while respecting and implementing Indigenous traditional methods when planning transitions for clients.

#### **eConsult**

The Ontario eConsult Program, part of the Ministry of Health funded Ontario eServices Program, is a free and secure webbased tool giving physicians and nurse practitioners timely access to client-specific specialist advice, often eliminating the need for an in-person visit. St. Joseph's Care Group is the regional lead for deploying eConsult to primary care providers across the Northwest.

In October 2021, there were 131 eConsults bringing the rate per 1000 people to 7.62, up from 6.58 in October 2020. The program is on track for their annual target of 1,951 eConsults in the Northwest. On average, primary care providers will receive a response from a specialist within 1.2 days. Primary care providers can access advice from 109 different specialty types (8 of which are staffed by specialists in the North), including a number of specialty groups related to COVID-19.



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#### Rehabilitative Care Alliance (RCA) Post-Fall Pathway Pilot

The 3<sup>rd</sup> Plan-Do-Study-Act (PDSA) improvement cycle of the City of Thunder Bay Post-Falls Rehabilitation Pathway launched November 1, 2021. Co-led by the Regional Seniors Care Program and the Regional Rehabilitative Care Program, the pilot's goal is to standardize care for frail older adults who present to the emergency department or primary care with a fall, ensuring a referral to the appropriate level of rehabilitative care services thereby mitigating functional decline and improving patient outcomes. System partners include the Nurse-Led Outreach Team, TBRHSC Emergency Department, St. Joseph's Hospital's inpatient Geriatric Assessment and Rehabilitative Care and Seniors Outpatient Assessment & Rehabilitation, Home and Community Care Support Services Northwest, Partners in Rehab, Creative, and VON Community Exercise and Falls Prevention.

#### The Adult Palliative Care in Rural and Underserviced Areas

The Regional Palliative Care Program, in collaboration with SJCG's Chronic Pain Extension for Community Healthcare Outcomes (ECHO) and the Centre for Education and Research on Aging & Health (CERAH), hosted the first session of the Adult Palliative Care in Rural and Underserviced areas ECHO Hub series. Thirty-three participants from across the region and province attended where participants had the opportunity to ask questions and discuss tools and best practices that could be utilized in a case with the interprofessional Palliative Care Hub panel.

HERE FOR OUR



#### Welcome Back, Volunteers

Volunteers are back and they have been BUSY! In the month of November, volunteers contributed 1,380 hours of their time. We have volunteers across the organization conducting visits with residents in long-term care, assisting with therapeutic recreation programs, staffing the Gift Box, and participating in improving the care experience as Client & Family Partners.

#### **Student Recognition**

Corporate Learning and Recruitment & Retention hosted twenty-two Student Recognition events for 140 second-year nursing students at St. Joseph's Hospital in November. These events provide an opportunity to meet and thank each student, and to share information about preceptorships and employment opportunities.

#### **LEADS** the Way Lite

In November, 17 staff from across SJCG participated in the inaugural LEADS the Way Lite Learning Day. The Learning Day is an interactive workshop that explores the core concepts of the LEADS Framework with a focus on the domains of Lead Self and Engage Others. It supports our informal leaders within their current roles, and builds capacity and skills for those seeking a future career in management. LEADS the Way Lite participants then complete a minimum of four self-directed activities that support the application of and reflection on leadership capabilities in their everyday work. Upcoming session of LEADS the Way Lite are scheduled for January and March 2022.

#### Sacred Fire of Praver

In recognition of National Addictions Awareness week, the Indigenous Health and Traditional Health Teams hosted a Sacred Fire of Prayer on November 24th, 2021 at Sister Margaret Smith Centre in the GreenWerks Garden. This was open to all staff,



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clients and community members with clients and staff of Sister Margaret Smith Centre attending the fire throughout the day and the closing ceremony.

HERE FOR OUR

## **Future**

#### **Regional Referral System**

Operationally, the Regional Referral System has processed 370 referrals since April 1, 2021 through the Wound Care Central Intake pathway. Initial assessments are booked with advanced practice clinicians across the Northwest. Following assessment, referrals are made to one or more agencies as part of a coordinated care plan.

The year one target was 500 referrals, but we are projecting 800 referrals by March 31, 2022. The new "Power BI Dashboard" software shows that after initial

assessment, over 50% of the wounds referred are considered high risk or urgent by the advanced practice clinician. The pathway triages and refers clients with high-risk wounds to emergency care.

Development work on the Rheumatic Diseases and Autoimmune pathway is focused on the future state design and engagement in under way on the Diabetes pathway. A sub-group of the North West Referral and Consult Steering Committee has been working on a framework to determine which pathways required central intake support.

#### AdvantAge

On November 22, 2021,SJCG attended AdvantAge Ontario's virtual Supportive Housing forum. The focus was on innovative ways to increase the supportive housing presence in communities, including redevelopment of existing infrastructure. This information and the contacts made through the forum will help St. Joseph's Care Group as it explores and envisions new supportive housing models.

