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ST. JOSEPH'S CARE GROUP

# COMMUNITY *REPORT* 2013/14



## MISSION

St. Joseph's Care Group is a Catholic organization that identifies and responds to the unmet needs of the people of Northwestern Ontario, as a way of continuing the healing mission of Jesus in the tradition of the Sisters of St. Joseph of Sault Ste. Marie.

## VISION

A leader in client-centred care.

## CORE VALUES

### CARE

St. Joseph's Care Group will provide quality care for our clients, body, mind and spirit, in a trusting environment that embraces diversity.

### COMPASSION

St. Joseph's Care Group will demonstrate dignity and respect for those in need, accepting people as they are, to foster healing and wholeness.

### COMMITMENT

St. Joseph's Care Group is committed to our community, the people we serve, the people we employ, and our faith-based mission through a continued pursuit of excellence.

## CEISS UPDATE *On Time and On Budget*

**The Centre of Excellence for Integrated Seniors' Services (CEISS) project continues, with Phase 2 well underway. Phase 1 was the construction of a 132-unit supportive housing building, the Sister Leila Greco Apartments, which is now complete and fully occupied.**

Progress on Phase 2, a significant addition to Hogarth Riverview Manor (HRM), is evident to anyone in the vicinity of its North Lillie Street location. With an anticipated completion in the fall of 2015, the 416-bed building will be one of the largest long-term care homes in Ontario, consolidating Dawson Court, Grandview Lodge, and Bethammi Nursing Home, and providing increased comfort and safety to the residents.

"On time and on budget, the project is moving along well," says Scott Potts, Vice President, Infrastructure & Planning and Chief Financial Officer, St. Joseph's Care Group (SJCG). Scott is especially pleased with the design. "This will be the residents' home, so it is designed to be homelike, yet state-of-the-art and based on today's standards," he says. "We look forward to providing this level of comfort to the residents."

The seven-storey building will have 13 separate resident home areas, each with 32 resident rooms and its own living, dining, recreation and activity areas. Spa areas will be equipped with hydraulic lifts, allowing those who require assistance to enjoy the benefits. With some

*This will be the residents' home, so it is designed to be homelike, yet state-of-the-art and based on today's standards*

renovation and expansion, a number of common services – such as kitchen, laundry and maintenance – will continue to be supplied from the existing HRM facilities.

A physical connection between Sister Leila Greco Apartments (SLGA) and the new

building is expected to open at the same time. This component of the project, called "The Link," will house services to residents and tenants, and potentially to the surrounding neighbourhood and community. It is expected that The Link will include a pharmacy, offices for dental and other health care practitioners, a hair salon, and a small café.

Connecting the buildings in this way provides a common area, easily accessible to residents and tenants, and encourages socialization and engagement – so important

to a quality life experience. Development of The Link is in the final planning stages and is the result of a community partnership between SJCG and the private sector.

With the finalization of CEISS Phase 2 in sight, planning for Phase 3 is also progressing. This element of the development of CEISS will see the current HRM, now at 96 beds, expanded to a total capacity of 128. The expansion will bring consistency to all the resident home areas, and will support efficiencies in provision of essential services and staffing.

Building or renovating long-term care homes is a complex process. But, at the heart of it, the quality care and support of our residents is the primary focus. SJCG is very proud of the efforts of our staff, our community partners, the North West Local Health Integration Network (LHIN), and the Ministry of Health and Long-Term Care in bringing CEISS ever closer to completion.



**Scott Anttonen**  
PROJECT MANAGER, TURNER TOWNSEND (LEFT)

**Scott Potts**  
VICE PRESIDENT, INFRASTRUCTURE & PLANNING  
AND CHIEF FINANCIAL OFFICER (RIGHT)



# MESSAGE FROM BOARD CHAIR AND PRESIDENT & CEO



**Gary Johnson**  
CHAIR, BOARD OF DIRECTORS



**Tracy Buckler**  
PRESIDENT & CHIEF  
EXECUTIVE OFFICER

Each year, our Community Report provides the opportunity to celebrate with you our accomplishments of the past year. Most visible is the ongoing construction of Phase 2 of the Centre of Excellence for Integrated Seniors’ Services (CEISS) – the 416-bed long-term care home being built on North Lillie Street. It is with pride and anticipation that we look forward to its completion.

We are also encouraged by the positive results we see in the enhanced withdrawal management services at Balmoral Centre. This would not have been possible without the funding provided by the North West Local Health Integration Network (LHIN) and we are grateful for the LHIN’s support.

In spite of the challenges of ongoing construction and access to some of our sites, the Auxiliary has made a record contribution of \$80,000 to SJCG this year. The commitment of the Auxiliary members, and our almost 500 volunteers, helps us continue to provide the service for which the Care Group is known.

We are humbled by the support of the community in the particularly successful Hospice Palliative Care Campaign. St. Joseph’s Foundation of Thunder Bay, the co-chairs of the Campaign and its many donors have made possible a physical transformation that now matches the emotional warmth and caring of this very special place. It is indeed gratifying that the public recognized this need and provided the means for change to take place.

Receiving Accreditation with Exemplary Standing by Accreditation Canada was an exciting and proud acknowledgment. This level of achievement is only possible through the consistent and extraordinary efforts of our staff, physicians and volunteers and we are most appreciative. The results of our staff and client satisfaction surveys have proven once again that if our people are happy and fulfilled in their work, our clients ultimately feel well cared for and respected. We are very pleased with our recent survey results.

The issue of alternate level of care is still a great concern and at St. Joseph’s Hospital we do whatever we can to mobilize people and get them home as quickly as possible. We are pleased to report that almost 80% of our clients in geriatric rehabilitation at the hospital are discharged to their homes – a most satisfactory outcome. This trend will continue with the concerted efforts that are underway to ensure safe, yet earlier client discharges whenever possible.

Our community is understandably concerned with the ongoing shortage of long-term care beds. This is, of course, a challenge to all of us in healthcare. At SJCG, we have an obligation as a system partner to work collaboratively with Thunder Bay Regional Health Sciences Centre, the North West Community Care Access Centre, and the North West LHIN to resolve the issues of flow throughout the system. We are all committed to providing the appropriate level of care for clients and, while progress has been made, our efforts in this area continue. Our thanks go out to our partners for the spirit of cooperation that prevails as we work together to resolve this ongoing issue.

On behalf of the Board of Directors and the Leadership Team we extend our most sincere thanks to the Catholic Health Corporation of Ontario for its constant support, and to our staff, physicians, volunteers, and Auxiliary, for the commitment they demonstrate in providing client-centred care to the people served by the Care Group. With this commitment as our foundation, we look forward to further meeting the healthcare needs of the people of Northwestern Ontario, in the continuing tradition of the Sisters of St. Joseph. We are honoured to be a part of this 130-year tradition.

## SENIORS IN OUR COMMUNITY

### Keeping Seniors Healthy

When Meaghan Sharp is asked for an update on community-based seniors’ care, she hardly knows where to begin. “With our focus on keeping seniors healthy, there are so many areas of positive progress,” she says. Meaghan is Vice President, Seniors’ Health & Chief Nursing Executive, St. Joseph’s Care Group (SJCG) and she is passionate about helping seniors stay healthy!



**Carina Barrie**  
NURSE PRACTITIONER (LEFT)  
**May Matson** (CENTRE)  
**Helen Kroeker**  
NURSE PRACTITIONER (RIGHT)

Meaghan emphasizes seniors’ care is not just about caring for seniors in long-term care homes. “It certainly includes long-term care homes, but it’s the other services we provide that help keep seniors healthy and prevent or delay their need for long-term care,” she explains. Three areas of community care spring to mind.

SJCG has received enhanced funding for PR Cook Apartments, equalizing the funding with that of other supportive housing. This enables the provision of additional services, including exercise programs aimed at strengthening seniors’ mobility – vital to help prevent falls and generally improve their quality of life.

Meaghan sees telemedicine as an important part of the future in seniors’ care. Simpler, more portable technology (e.g. the accessibility of iPads and their ease of use) has increased the Care Group’s ability to

innovate and use virtual outreach in providing services more effectively and economically.

As program lead for Regional Behavioural Health Service – a provincial initiative with the philosophy of helping clients stay in their own homes – SJCG looks forward to Geriatric Telemedicine Nurses playing an expanded role in providing services to seniors. Their specialized knowledge, along with the technology, will support clients and outreach teams in the community and in the region.

Thirdly, under the umbrella of SJCG’s Long-Term Housing & Support Services, the Adult Day Program at Manor House continues to provide respite care to clients, and support to caregivers. With the elderly often caring for spouses who may be experiencing dementia, supporting and providing respite for these caregivers is critical. “They rely on us, but we rely on

them as well. It is a true partnership that is client-centred,” Meaghan says.

Meaghan wonders if we do enough. “What supports do we have to give these healthy caregivers, so that they stay healthy and don’t end up needing more intensive services themselves?” she asks. “We continually look at what we can do to provide the needed respite. If more is needed, we look for ways to fill that need.”

An important aspect of healthcare is feeling empowered in one’s own health journey. It’s heartening to see that this empowerment is extended to the seniors who rely on services provided by the Care Group. “Our focus is on the health and wellness of our clients,” Meaghan says. “We work with them to maintain their functioning and try to prevent or at least delay decline.”

## A HISTORY OF CARE, COMPASSION & COMMITMENT

### VISUAL TIMELINE

**1881** Five Sisters of St. Joseph arrive at Prince Arthur’s Landing to teach and to provide spiritual support in the parish. This role quickly expanded to caring for those that were disease ridden (typhoid), ill or injured, common occurrences in the frontier town.

**1884** Prince Arthur’s Landing is formally recognized as a town, and renamed Port Arthur.  
**1884** Newly constructed classrooms in the Sisters’ convent were converted to ‘hospital’ rooms to care for the sick and injured – the foundation of what is now St. Joseph’s Care Group (SJCG), with Sister Monica in charge.



**1885** St. Joseph’s General Hospital (SJGH) opens a new 2-storey hospital on land adjacent to the convent. It is the only hospital in the District of Thunder Bay from 1885 to 1900.

**1895** A Ladies Aid organization is formed. It has evolved to become the Auxiliary to SJCG, one of the oldest hospital auxiliaries in Ontario.  
**1900** Demand for service increases and a 3-storey wing is added to SJGH.  
**1904** A third wing is added to the front of SJGH.  
**1904** Sister Monica establishes the St. Joseph’s Hospital School of Nursing.



**1907** The first six students graduate from St. Joseph’s Hospital School of Nursing.



**1918** Construction of a 5-storey wing with state-of-the-art surgical facilities is completed.  
**1924** X-ray, pediatric and physiotherapy departments are added.



**1931** Reverend Mother Monica dies, having dedicated 50 years of leadership to SJGH.

1914-18

1930-39

# MENTAL HEALTH & ADDICTIONS

## Putting Clients First

One year into a three-year pilot project, the Withdrawal Management Program at Balmoral Centre is meeting its primary objectives. With all 22 beds fully utilized, the need for emergency services relating to substance use issues has been reduced, as has the impact of volume on first responders from Emergency Medical Services and Thunder Bay Police.

Clients at Balmoral Centre are receiving more than just withdrawal management services. The availability of nursing staff and primary healthcare supports their overall health and well-being, which, in many cases, has been neglected. They not only ‘get clean’ with encouragement and care from dedicated staff, they are able to start thinking about their substance use issues, and attend group meetings that give them hope and the sense that they are not alone.

Janet Sillman, Vice President, Addictions & Mental Health, is very pleased with the progress of the project. “This is a time to connect with and encourage these clients. Hopefully, we can help them transition to treatment and a better quality of life,” she says. “We are opening a door to their next steps.”

### Improving Access

Resource management in these challenging days of fiscal restraint is

more important than ever. Mental health issues are now surpassing physical issues in workplace absences. How do we best utilize our existing resources to provide quality service to an ever-expanding client base?

The question has led to Sister Margaret Smith Centre and St. Joseph’s Health Centre working together to restructure and realign their systems with models of care that support matching resources to the level of client needs.

Strategies to improve access to mental health services - and to make navigation of mental health and addictions services easier, are being reviewed with the ultimate goal of having the most appropriate level of care available, and the flexibility to adjust that level of care efficiently and quickly when clients need change.

Critical to our ability to provide the best client care possible are our partnerships with community health

providers. We encourage the involvement of family physicians in primary care when mental health or substance use issues are stable. We empower our clients by educating them in self-management techniques.

“The importance of partnerships with clients, family, care providers, and community health partners cannot be overstated,” Janet says. “These clients don’t just have substance use and/or mental health issues; they have the same life challenges we all do. They need a place to live, food, access to primary health care. It takes all of us, working together, to support them.”

Client-centred care is a strategic priority for SJCG, so the need to listen to the people we serve is imperative in designing our new models of care. Recognizing that the lived experience holds the most valuable direction, we will continue to engage our clients, asking how we can best support them at their most vulnerable, and as they continue their journey.

*The importance of partnerships with clients, family, care providers, and the many community health and other services cannot be overstated.*

# CALLING ON OUR COMMUNITY

## St. Joseph’s Foundation of Thunder Bay



**The Board, volunteers and staff of St. Joseph’s Foundation of Thunder Bay have had a busy year. “St. Joseph’s Care Group (SJCG) is growing and its needs are growing along with it,” says Katrina O’Neill, Executive Director of the Foundation. “We’ve devoted a lot of time considering what we can do to further support those needs.”**

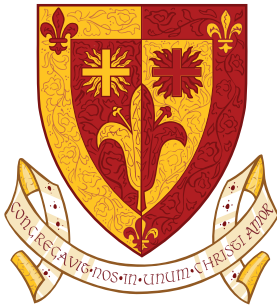
Community participation has been phenomenal for all capital projects – most recently the renovation of the Hospice/Palliative Care Unit at St. Joseph’s Hospital. But the reality is that day-to-day needs are ever increasing.

Costs for equipment and furnishings are high, and renovating an older hospital is expensive. While the essence of care is not in a building or its furnishings, it cannot be denied that pleasant surroundings and appropriate equipment add to both safety and healing. The Foundation is committed

to helping provide the funds needed to support the work of SJCG.

In that spirit, Katrina explains the Foundation will be making a special effort to ensure Thunder Bay and the region have an accurate reflection of the SJCG’s needs. “We have loyal donors who give year after year, and the broader community gives when it is asked,” Katrina says. “We want to be sure we let people know what our needs are. The community is very generous and we are confident that people will rise to the challenge.

“Our community wants and needs the essential services provided by SJCG to continue,” Katrina says. “The Foundation’s efforts are directly tied to the comfort of the clients of the Care Group. Most of us have a loved one or a friend that has been helped by SJCG – the Foundation provides a means of tangibly saying thank you.”



**ST. JOSEPH'S FOUNDATION**  
OF THUNDER BAY



### DONATE TODAY!

Visit us online for more info on how you can give today!  
[www.sjftb.net](http://www.sjftb.net)



**1934** SJGH celebrates its Golden Jubilee. The Auxiliary donates an outdoor memorial statue of St. Joseph and a multiple wave generator for the massage department.

**1937** A Physiotherapy Ward is established. Rehabilitation is already one of the primary focuses of care for SJGH.

**1939 - 1945** SJGH grows from 234 beds to 500 beds.

**1950** Sister Margaret Smith begins her tenure as the first Director of the School of Nursing.

**1955** Nurses’ residence is replaced with a 5-storey building for 108 students.



**1958 - 1960** Demolition of the original hospital begins and the new structure includes an Emergency Ward, administration offices and a cafeteria.

**1959** Sister Margaret Smith is appointed Administrator of SJGH.

**1967** Total replacement of all buildings not included in 1958 to 1960 renovation is completed as the Sisters of St. Joseph’s Centennial project.

**1967-1968** The Special Medical Unit – the first addiction treatment program of its kind in Canada – was founded by Sister Margaret Smith and received government funding.



**1968-1978** Sister Leila Greco’s tenure as Administrator of SJGH.

**1972** The Special Medical Unit is renamed the Smith Alcohol and Drug Abuse Program and moved to the former Nurses’ Residence.

**1972** Ambulatory Care program established.

**1974** Lewkin Detoxification Centre is established.

**1976** Audiology Department is added.

**1979** St. Joseph’s Heritage opens, Sister Leila Greco’s dream of a ‘Place for All Seasons.’

1939-45

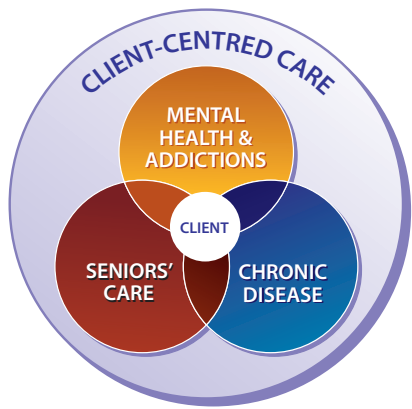
1970



# ENGAGING OUR CLIENTS

## A Model of Care

A key priority in St. Joseph’s Care Group’s (SJCG) current strategic plan is the development of a Model of Care that supports our commitment to Client-Centred Care. Staff input, best practices and quality improvements in health services, respect and dignity for our clients, organizational leadership – are all important and all part of the development of our Model.



Without question, the most significant contribution was made by clients and their families. Their input has given us a template of what Client-Centred Care means to each individual, and SJCG will be guided across the corporation by the principles identified. To emphasize the importance of this direction, clients and families have been and will continue to be included in our education initiatives around Client-Centred Care.

As an indication of our commitment, clients were part of a panel at a recent day-long Management Team workshop, held to introduce the Model of Care. Clients shared their stories about care – both positive and not so positive – with recommendations and suggestions for improvement.

One of the panelists, Stacey Livitski, has been a client of Diabetes Health since childhood. Over the course of 30 years, she has had many different experiences at the Care Group and was pleased to have the opportunity to participate. What was her main message?

“The caregivers need to look through our eyes,” she says. “They have to appreciate that we are doing the best we can at any given time, and try to build on the positives.”

Stacey’s comments resonate. “People don’t just come here, get treated, leave, and that’s the end of it,” she says. “They live their condition every moment of their day, often for their entire life. It affects everything! It’s really important that healthcare providers understand and consider that.”

Jessica Saunders, Client & Community Relations Coordinator, is grateful for the willingness of clients to participate in so many ways. “Sharing their stories takes courage and strength, as well as their time and preparation,” Jessica says. “Their recommendations will effect positive change for the benefit of all clients and help the Care Group provide care that is truly client-centred.”

The benefits of client engagement are so significant that SJCG is also in the process of forming a Client and Family Council, to provide a means of sharing views, concerns

and suggestions for improvement. Stacey is excited to be part of the Council. “As a patient, you watch things happen, but to actually be in the middle of it and able to affect positive change for yourself and others – it’s very empowering,” she exclaims.

Jessica points out that to improve services we must create a welcoming environment for all, and consider our diverse and, in many cases distant, client population. Council membership will extend to the region, with videoconferencing used to address issues of inclusivity. “Council representation must be available to all our clients,” Jessica says. “They are the experts and will be instrumental in helping to guide the direction of some of our initiatives.”

The Council will be functional this fall, and the Care Group looks forward to the valued opinions and expertise of members as they help guide us in Client-Centred Care.



Stacey Livitski  
CLIENT



Robert MacKenzie (LEFT)  
Sean Kennedy  
PERSONAL SUPPORT WORKER (RIGHT)

## MISSION MOMENTS

“I have lived at PR Cook Apartments for over 25 years. I love the activities offered here and the volunteering that I do. It keeps me busy and there is always something to look forward to.”

JUDY SOLTYS  
Resident, PR Cook Apartments

“As a staff member of St. Joseph’s Care Group, I am proud to work alongside colleagues who go beyond their regular duties in order to meet clients’ needs and preferences.”

JOY KOLIC  
Registered Nurse

“Staff have a difficult job but it’s a simple smile from them that means a lot to us residents. There are a lot of smiles here at Hogarth Riverview Manor.”

PEGGY WHYTE  
Resident, Hogarth Riverview Manor

## A HISTORY OF CARE, COMPASSION & COMMITMENT

### VISUAL TIMELINE

1982 The Palliative Care program is introduced.  
1983 Incorporation of St. Joseph’s Foundation of Thunder Bay.  
1984 St. Joseph’s General Hospital celebrates its Centennial.



1987 Balmoral Centre opens, replacing Lewkin Centre with new facility.  
1987 Behavioural Sciences Centre is introduced.  
1987 Day Centre for Alzheimer clients opens.



1990 Carl White appointed Executive Director, the first lay person to hold this leadership position.  
1991 Reactivation Unit opens.  
1994 Thunder Bay District Health Council recommends a two-hospital corporation model for Thunder Bay. SJGH would assume chronic care and rehabilitation service responsibility.



1997 St. Joseph’s Hospital and St. Joseph’s Heritage are integrated and a new corporation, St. Joseph’s Care Group (SJCG), is formed.

1997 The Smith Alcohol and Drug Abuse Program is renamed the Sister Margaret Smith Centre.  
1999 St. Joseph’s Hospital completes a \$20.7 million renovation to align with its new role in complex care and physical rehabilitation  
2003 SJCG assumes governance and management of mental health services (at Lakehead Psychiatric Hospital) in Thunder Bay.



2004 Hogarth Riverview Manor opens.  
2005 Tracy Buckler appointed as new President and CEO.



THE VOICES OF ‘OUR PEOPLE’

Our employees’ satisfaction with their workplace is very important at St. Joseph’s Care Group (SJCG). “We care about our people and we want to hear from them,” says Myrna Holman, Vice President, People, Mission & Values. Fulfilling the provincial requirement to conduct employee satisfaction surveys every two years is seen as a great opportunity to hear what our people think of the work they do and the environment in which they do it.

With the objective of increasing employee participation, the Every Voice Counts campaign was developed. The first step was to send the confidential survey electronically to staff work email addresses; managers were asked to ensure all staff had access to computers – and the time to complete the survey.

The response rate was 61.5%, an increase of more than 18% over the last survey.



Allison Hill, Manager, Recruitment & Retention, explains some of the different ways the survey was promoted. “We used buttons, posters, draws, and various reminders to staff that Every Voice Counts.”

A significant incentive was provided by our Leadership Team. They committed to a donation to the St. Joseph’s Foundation based on response rate. The message to staff was: Your response not only helps improve your workplace, through the donation it will also make a difference to our clients.

The response rate was 61.5%, an increase of more than 18% from the last survey. “The Ontario Hospital Association average is 49%, so we are thrilled with this result,” Myrna says.

A few highlights:

- Our physicians showed their appreciation for the healthcare teams and professionals with whom they work, with a much higher rating than is seen in other organizations;
- Our employee engagement scores indicate they are satisfied with their current jobs and are proud to tell others where they work;

- Staff feel they have opportunities to show initiative, provide input into how work is done and learn new skills; and
- Kudos to the housekeeping staff at SJCG! The cleanliness of the work environment has always been rated extremely high, and remained so in this recent survey. Their efforts have a significant impact on infection control and client safety, as well as contributing to a pleasing physical environment for our clients and staff.

“It’s wonderful to have such validation of our corporate culture, confirming that our values are ones that our employees believe in. They are proud to work in a values-based environment, where they feel respected,” Myrna says.

Receiving positive results does not stop the work, as the survey is used as a springboard for further improvement. As an example, how we share information, how we communicate on a daily basis is always near the top of employee concerns. “We want to work on this,” Allison says. “Analysis of the results has provided some good ideas, and we’ll be looking for further input from our staff on where and how we can keep improving.”

SENIORS’ CARE  
Managing & Supporting Clients

What are responsive behaviours in older people? They can include aggression, wandering, and agitation, and are sometimes referred to as challenging behaviours. Responsive behaviours are usually triggered by something external and are a message that something is wrong. Unfortunately, due to the disease process of dementia, clients are unable to verbally express what is bothering them; thus, these behaviours are triggered.

Caring for individuals exhibiting responsive behaviours can be difficult, either in long-term care home settings or in their own homes, where caregivers are often elderly spouses struggling to care for their life partners. In the past, these clients were most often transferred to an acute care or psychiatric hospital – distressing to clients and their families. To address this issue, 64 regional behavioural health beds are planned for Phase 2 (the long-term care home) of the Centre of Excellence for Integrated Seniors’ Services (CEISS) project.

However, a more immediate need to manage and support these clients was recognized and led to an interim measure. A 24-bed Behavioural Support Unit opened at Hogarth Riverview Manor last year. Funded by Behavioural Supports Ontario, St.

Joseph’s Care Group (SJCG) was able to enhance services already in place, with additional personal support workers and registered nurses for the unit.

Meaghan Sharp, Vice President, Seniors’ Health & Chief Nursing Executive, is encouraged by the progress she sees. “It’s really important to determine what the behaviour triggers are, and what the clients are trying to tell us,” she says. “We’re focusing on the quality of our staff, making sure that we provide them with the education and tools they need to recognize these triggers, to best manage and support our clients.”

The emphasis to date has been on long-term care homes, with a plan to eventually extend the reach of these specialized healthcare professionals to community settings, helping

caregivers identify and understand the meaning of responsive behaviours, and teaching how to best manage them.

The Behavioural Support Unit is one aspect of improving the care provided to clients within our long-term care homes. Meaghan’s vision of seniors’ health goes far beyond that. “How do we go from good to great?” she asks. “How do we keep the strengths in what we do so well, but keep improving?”

“Our goal is to keep seniors at home – healthy and active,” she says. “We think we can prevent or at least delay long-term care for seniors – and we should do everything we can to do that! But, should they need long-term care, their health and wellness remains our priority. Our goal then becomes helping them to maintain

and even increase their functioning versus declining.”

These are high ideals, but at SJCG, high ideals are the only ones worth having!



2008 Sister Margaret Smith receives Order of Canada for her groundbreaking work in treatment of addictions.



2009 New Sister Margaret Smith Centre opens.  
2010 Ground preparation for new Sister Leila Greco apartments begins.



2012 Site preparation for St. Joseph's Hospital's new East Wing begins.



2013 New Sister Leila Greco Apartments open



2013 Groundbreaking for 416-bed addition to Hogarth Riverview Manor (Phase 2 CEISS)



2014 A new accessible mental health high-support home opens.

2012

2013

2014



# HOSPICE *Recognizing our Supporters*



**Marianne Larson**  
CLINICAL MANAGER, TRANSITION & HOSPICE/PALLIATIVE CARE

**St. Joseph’s Care Group (SJCG) recently completed a thorough renovation of the Hospice/Palliative Care Unit at St. Joseph’s Hospital. The project was funded through a capital campaign, spearheaded by Karen Sitko and Clint Harris, two community members who identified the need for renovations and wanted to support this in a meaningful way.**

The original plan was to renovate the client rooms only, but with the resounding success of the fundraising campaign, all rooms, hallways, and the client lounge were refreshed. Structural and electrical upgrades were completed, along with new lighting, window coverings, furnishings and accessories.

Support for the project came in many ways, including 46 quilts made and donated by the Thunder Bay Quilters’ Guild, for the comfort of Hospice clients. “The quilts are absolutely beautiful, in different patterns and colours,” says Marianne Larson, Manager, Transition & Hospice/Palliative Care. “They give us the

option of picking just the right one for each client, and are symbolic of the holistic care provided in Hospice. Every little touch is special and personalized.”

Dignity and respect are vital in those intimate moments at end-of-life. The renovations are very reflective of the environment of warmth and comfort that prevails in Hospice, enhancing privacy in aesthetically pleasing, yet always practical surroundings.

Renovations to a hospital are difficult and disruptive, and the Care Group wants to acknowledge the incredible support of clients and families who were being cared for in Hospice at that time. “We learned from the experience,” Marianne says. “We learned that we need to communicate well with families and be even more supportive of those who are in emotional stress at the time.”

Meaghan Sharp, Vice President, Seniors’ Health & Chief Nursing Executive, agrees. “We realize that this affected clients and their families at a very difficult time,” she says. “We did our best to address and accommodate their concerns, but we certainly appreciate that the circumstances placed additional stress on them.”

Acknowledging the tremendous donor support was important. The idea of creating a donor recognition art piece to suit the uniqueness of the project came from Karen Sitko, Co-Chair of the campaign. A piece that would be peaceful and serene was envisioned and resulted in a call-out to local artists for ideas that would achieve that vision. Artist Biljana Baker’s submission captured it perfectly.

The art consists of a series of paintings that blend into a whole and are indicative of Northwestern Ontario. The colours and light are also representative of Hospice. “Biljana was able to convey the tone of Hospice in her art,” says Katrina O’Neill, Executive Director, St. Joseph’s Foundation of Thunder Bay. “Hospice is not a dark place; it’s very powerful, yet soothing. The art encompasses that. It’s beautiful, timeless and sets the tone of the place you are entering.”

The names of donors are etched into the glass of individual paintings, honouring their financial contribution to improve the physical environment of Hospice. The Donor Wall is a powerful testament to what they have collectively achieved.



**Peggy Whyte (LEFT)**  
**Samantha Kelly, PSW(RIGHT)**

## COME JOIN US

**It is well-known that Northwestern Ontario has a growing seniors population. At St. Joseph’s Care Group (SJCG), services in seniors’ health are expanding to meet the needs of this aging demographic. The expansion in services brings an increasing demand for personal support workers (PSWs) – the wonderful people who work directly with seniors in caring for their everyday needs.**

*Contact [careers@tbh.net](mailto:careers@tbh.net) for more information on these career opportunities.*

Today’s seniors want to stay in their own homes for as long as possible and the Care Group provides many services to support their independence. Providing these supports as care needs change has created a greater need for PSW support in the community, both as home support workers and in long-term care homes. Opportunities for PSWs in healthcare have increased substantially, requiring a considerably shorter period of education than for many other roles.

Allison Hill is SJCG’s Manager, Recruitment & Retention. She sees this as a great opportunity for those who are thinking of a career in healthcare, those who find they have a special connection with seniors, and those want to work with people. PSWs provide the hands-on care needed, and are a part of a caring team of healthcare providers.

While there are ongoing recruitment efforts at SJCG for many other healthcare professionals, tradespeople, and occupations, the primary need at this time is for personal support workers.

“The opportunities will only grow as our population ages,” explains Myrna Holman, Vice President, People, Mission & Values. “We cannot offer our seniors’ services without the PSWs – their role is indispensable.”

“They provide a different kind of care,” Allison adds. “PSWs are part of a team that builds long-term relationships with the clients and their families, connect with them on a personal level, and really make a difference in their lives.”

Samantha Kelly, a personal support worker at Hogarth Riverview Manor, agrees. “The most enjoyable part of being a personal support worker is getting to know the clients and their families. Dedicated teamwork and making work fun is how we get through our day.”

# VOLUNTEER RECOGNITION *Maria Bilyk*

**We are very proud of Maria Bilyk, Volunteer, St. Joseph’s Care Group (SJCG), who recently received the Ontario Senior Achievement Award from the Ministry of Citizenship and Immigration. This award honours Senior Ontarians for outstanding contributions to their community.**

For more than 65 years, Maria has been an active volunteer with the Auxiliary to SJCG, as well as holding several executive positions including President. In addition to helping with fundraising efforts, Maria is a member of the Caring Hearts Team at

Hogarth Riverview Manor, providing companionship and support to residents.

Maria’s volunteer activities are not limited to SJCG. Remarkably, she finds time to assist the community of Thunder Bay in other ways as well, both as an active volunteer and as a representative on several committees.

***Congratulations on this well-deserved award, Maria, and a huge THANK YOU for your service to St. Joseph’s Care Group, our clients, and the community.***



**Maria Bilyk**  
ACTIVE VOLUNTEER FOR MORE THAN 65 YEARS



# CHRONIC DISEASE MANAGEMENT

## Moving Towards Self-Management

For several years, staff at St. Joseph’s Care Group (SJCG) have focused on shifting from being healthcare providers solely in charge of care, to assuming the role of health coaches by empowering clients to self-manage their disease or chronic health condition. This shift in approach is part of Client-Centred Care and highlights the partnership between healthcare provider and client, recognizing that clients’ self-knowledge is most vital to the successful management of chronic conditions.

In addition to working closely with the North West Community Care Access Centre (CCAC) to promote and encourage attendance at Healthy Change Workshops, SJCG is committed to ensuring its own staff is knowledgeable and familiar with self-management fundamentals.

Following chronic disease self-management principles developed by Stanford University, SJCG recently completed an education initiative for an additional 150 practitioners, providing techniques to help them implement the strategies with their clients. “We’ve been focusing on ‘brief action planning,’” explains Shana Magee, Physiotherapist. “It’s a very straightforward process that ensures clients guide their own care. Based on their answers to specific questions, the practitioner is able to help them lay out an action plan and set



Lorrie McKevitt  
REGISTERED NURSE, DIABETES  
NURSE CLINICIAN  
Kaitlyn Skinner

attainable goals – and provides follow-up to support confidence-building.”

For Diane Tracey, a client of the Rheumatic Disease Program, participating in one of the two-week workshops has been most helpful. “The program gave me the knowledge, education and practical tools to manage my rheumatoid arthritis,” she says. “I came away feeling empowered by the support and I now have the confidence and strength to take good care of myself.” She continues to practice setting functional and attainable goals, and finds her increased understanding of body cues, such as fatigue and inflammation, helps her better manage her own health.

Based on their answers to specific questions, the practitioner is able to help clients lay out an action plan and set attainable goals – and provides follow up to support confidence-building.

The concept of self-management has been very well-received by clients. This response has led to a new goal for SJCG – to expand the reach of self-management techniques to clients in long-term care and to mental health clients.

Susan Franchi, Director, Outpatient Rehabilitative Care & Chronic Disease Management, believes there is a larger role for self-management in healthcare. “We have a steering committee that has developed a self-management action plan for the Care Group, examining where we are now and how we can move forward,” she says. “For example, is there a bigger role that we can play in prevention of some chronic disease?”

Kathleen Lynch, recently appointed Vice President, Rehabilitative Care & Chronic Disease Management, is excited about this positive movement in the provision of care for people with chronic diseases.

“Our healthcare providers are not with the clients 24/7, so it is really important that they have the tools to manage their own care on a daily basis,” she explains. “They need to know the signals of when things are going well and when they may need help. That’s where we come in – we’re always there to help.”

# SMHRP

## Rehabilitation for Mental Illness



Sylvie Muller  
RPN (LEFT)  
Ron Turpin  
CLIENT (RIGHT)

When a major capital project is in the works, it’s often difficult to reconcile the passage of time with the progress visible to the community. This has certainly been true in the case of the planned 38-bed Specialized Mental Health Rehabilitation Program (SMHRP), part of St. Joseph’s Hospital East Wing expansion.

The care of clients with mental illness has changed over the years. Mental illness, like many other chronic illnesses, can have periods of intensity – where symptoms are not manageable by the individual alone and professional assistance and care is required. This may involve admission to acute care for stabilization, and a period of rehabilitation to regain the maximum functioning that a person can achieve. St. Joseph’s Care Group (SJCG) will offer that period of rehabilitation to mental health clients in the new SMHRP.

The design is the result of close collaboration with local architects, FORM Architecture Engineering, in partnership with Montgomery Sisam Architects Inc. from Toronto, as well as user groups, and healthcare staff. It was fine-tuned to be functional and aligns with the needs of this client population.

From start to finish, there are several steps in a capital project, each of which must be approved by the Ministry of Health and Long-Term Care. Tracy Buckler, President & CEO, SJCG, explains that the Master Plan, the Functional Plan, and a number of other phases have been approved.

“It’s a lengthy process, but we’re very pleased to be nearing the final step,” Tracy says. “We look forward to approval from the Ministry to begin the tendering process and to see the start of the actual construction of this important project.”

The ground preparation has been completed and signage is in place. Tracy is optimistic that the community will soon see active construction as the East Wing addition gets underway.

Providing the appropriate level of care and ensuring client flow through the system is also part of preparation for the SMHRP. The model of care is one of mental health rehabilitation – supporting persons with mental health issues in making the transition back to community living. Working closely with community partners, we can ensure the appropriate supports are in place when a client is ready for discharge.

SJCG provides high and medium mental health support to clients in the community at six locations in Thunder Bay. The newest home opened in February 2014. It is an accessible, purpose-built home, able to accommodate clients with physical limitations. Clients have their own bedrooms with access to shared living and dining areas.

Our goal is to provide specialized support and skill development so clients can return to their homes and be successful in the community.

# ACCREDITED WITH EXEMPLARY STATUS

St. Joseph’s Care Group is very proud to announce Accreditation Canada has elevated our accreditation status to “Accredited with Exemplary Standing,” the highest award possible.

Accreditation Canada is a not-for-profit organization that sets standards for quality care and safety in healthcare. In order to achieve Exemplary standing, SJCG met 100% of all Required Organization Practices (an essential practice in place to enhance client safety), and a minimum of 98% of all the applicable 1,399 standards of excellence.

“It’s very challenging to meet the required criteria, and will be even more challenging in the future,” says Shelby Poletti, Manager, Planning & Performance. “The bar keeps rising with new and revised standards, but our goal is to maintain our Exemplary standing. At SJCG, we focus on providing quality care to our clients, so we’re very proud of this recognition of our efforts.”

The Care Group is honoured to have its staff and leadership recognized for their dedication to the provision of safe, quality health services – client-centred care!







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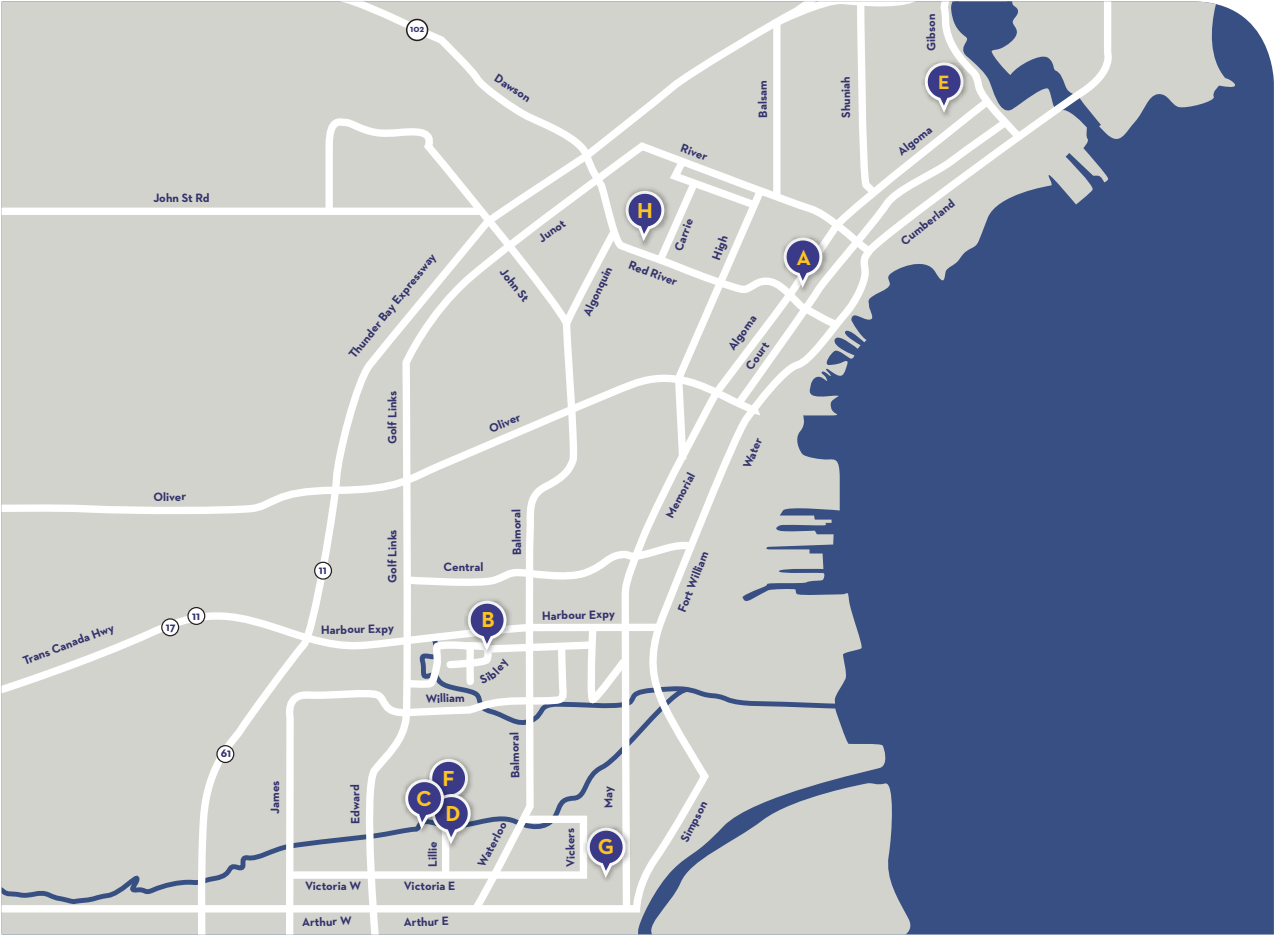
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**ABOUT ST. JOSEPH'S CARE GROUP**

St. Joseph's Care Group provides Long-Term Care, Complex Care, Physical Rehabilitation, Mental Health and Addictions services with Care, Compassion and Commitment to the residents of Northwestern Ontario from eight sites located in the City of Thunder Bay. Access to some services is available to the region via video teleconferencing.

- A ST. JOSEPH'S HOSPITAL (CORPORATE OFFICE)**  
35 Algoma St. N., Thunder Bay  
(807) 343-2431 • Toll free 1-800-209-9034  
*Rehabilitative Care*  
*Chronic Disease Management*
- B BALMORAL CENTRE**  
667 Sibley Dr., Thunder Bay  
(807) 623-6515  
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- C BEHAVIOURAL SCIENCES CENTRE**  
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*Sister Leila Greco Apartments*
- E LAKEHEAD PSYCHIATRIC HOSPITAL**  
580 Algoma St. N., Thunder Bay  
(807) 343-4300  
*Mental Health Services*
- F SISTER MARGARET SMITH CENTRE**  
301 Lillie St. N., Thunder Bay  
(807) 684-5100  
*Mental Health Addiction and Problem Gambling Programs*
- G ST. JOSEPH'S HEALTH CENTRE**  
710 Victoria Ave. E., Thunder Bay  
(807) 624-3400  
*Outpatient Mental Health & Addictions*
- H ST. JOSEPH'S HERITAGE**  
63 Carrie St., Thunder Bay  
(807) 768-4400  
*The Manor House Adult Day Program*  
*Bethammi Nursing Home*  
*Diabetes Health Thunder Bay*  
*PR Cook Apartments*  
*St. Joseph's Foundation*



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If you have any questions or comments, please contact:

**Communications & Engagement**  
580 Algoma St. N., Thunder Bay, ON  
(807) 768-4440 • sjcg@tbh.net  
**www.sjcg.net**

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