

# Reaching

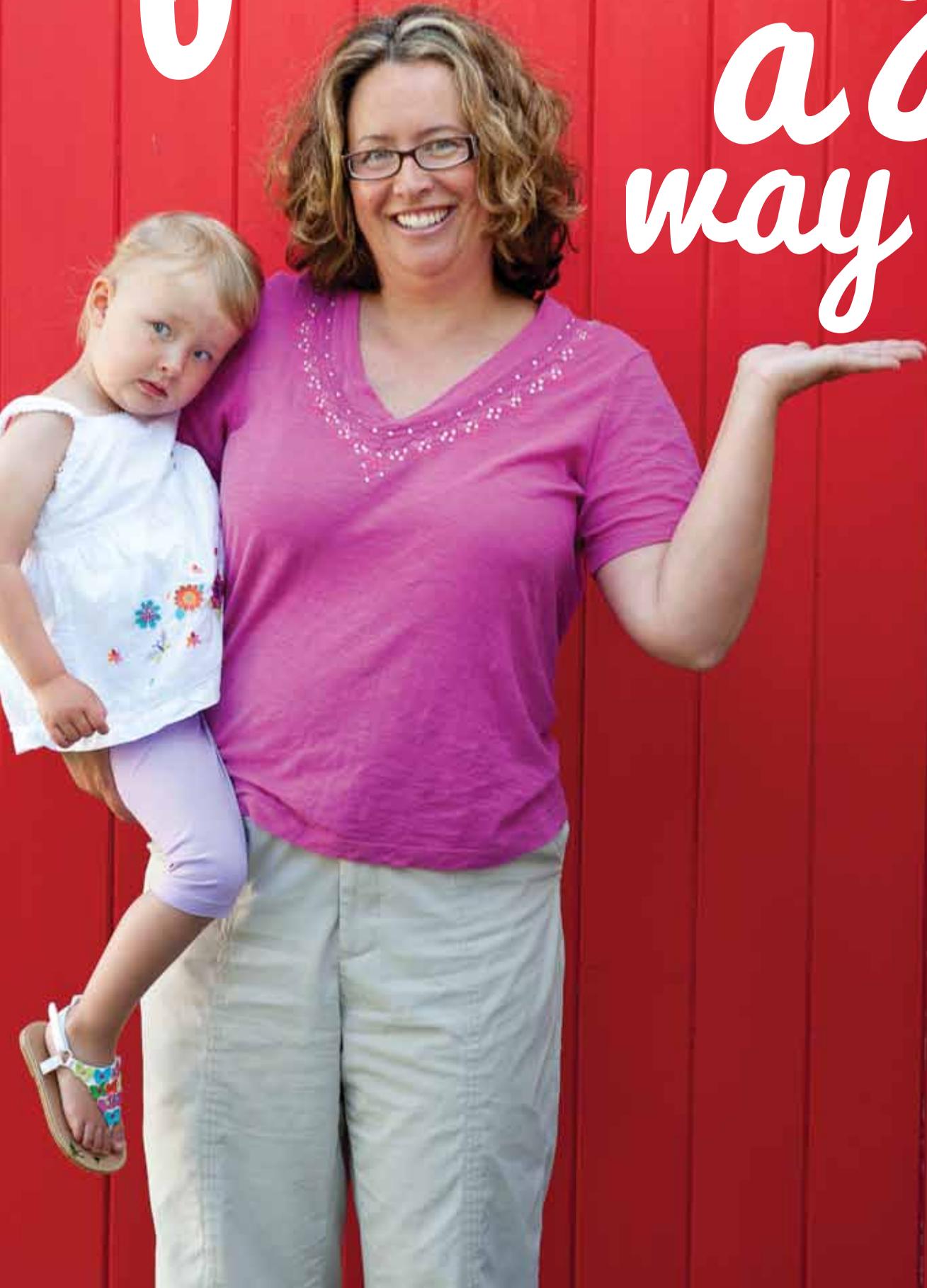
2010/11 REPORT TO THE COMMUNITY

# Out



IWK Health Centre

# finding a way



“We wanted to breastfeed Mikaela, but it wasn’t as easy as we hoped it would be. We needed help to make what seemed like the impossible happen.

In the NICU, we were encouraged to participate in Mikaela’s care. Because we were able to be involved, we had support to find a way to keep Mikaela’s feeding as natural as possible. Participation helped us move forward because working with our care team allowed us to feed Mikaela with breast milk despite the complications, which was really important to us.”

Carolyn Davison, mother of former IWK NICU patient

Breast milk is recognized as the best food for new babies. It is recommended that mothers breastfeed exclusively for the first six months of a baby’s life. At six months, babies are ready for other foods, but breastfeeding can continue until two years of age and beyond.

Passionate about the benefits of breastfeeding, Carolyn Davison was determined to breastfeed her new daughter, Mikaela.

Born in June 2009, Mikaela suffered from spontaneous congenital chylothorax, which caused fluid to build up in the lining around her lungs. Infants who have this condition are usually unable to use fats from their diet properly, which makes it difficult for their little bodies to gain the right nutrition unless they are given special formula with a different type of fat. The fats found in breast milk are necessary and are highly beneficial for healthy newborns, but they posed a dangerous risk for Mikaela until her condition improved.

Following a discharge and then readmission to the IWK’s Neonatal Intensive Care Unit (NICU), it seemed unlikely that Mikaela would be able to be nourished by her mother’s milk, but Carolyn was not ready to give up, and neither was her care team. IWK staff helped locate a centrifuge, a piece of machinery that enabled staff to skim Carolyn’s breast milk so that Mikaela could receive its unrivaled nutritional benefits.

Following Mikaela’s recovery, she was able to return to normal breastfeeding and continued to be breastfed well into her second year.

The IWK is focused on being “breastfeeding friendly,” with efforts underway toward the goal of certification using the World Health Organization/UNICEF Baby Friendly Initiative (BFI) standards. Significant progress towards BFI designation is helping the IWK support women with breastfeeding, and contributes to the overall health and well-being of Maritime women, children and families.



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# MAKING CONNECTIONS

“While updates in technology play an essential role in improving care and safety, it is clinicians who provide the care. The electronic Fetal Monitoring, Archiving and Documentation (eFAD) project gave us the opportunity to think about how we make decisions regarding interventions for high risk versus low risk patients. Updating technology is about more than equipment – it is an opportunity to examine how we provide care and evaluate our day-to-day processes.”

Lisa Courtney, RN, Clinical Leader, IWK Birth Unit

In 2009, the IWK was notified that it would be receiving funding from the Nova Scotia Department of Health and Wellness to replace its fetal trace archival system – the system that electronically monitors and documents a baby’s heart rate and a mother’s vital signs during labour.

This funding resulted in a project that became known as eFAD, or electronic Fetal Monitoring, Archiving and Documentation, which included the implementation of new fetal monitors, clinical computers, an archival system and software for electronic documentation during labour.

Currently, care providers rely on handwritten notes to keep track of a mother and baby’s care during labour and delivery. With the implementation of eFAD, many notes will become electronic, providing easier access to better managed information. The team involved in a patient’s care will be able to view all this data before entering a patient’s room or at the bedside – providing an up to the minute picture of the mother and baby’s health status.

eFAD is about more than just technology and equipment – it will help improve how care providers interact with patients and families. The new monitors are smaller and move easily, so that staff and physicians can engage directly with their patients, leading to better communication and understanding. These advances in technology are in line with the IWK’s strategic directions of providing the best care and keeping patients safe.

Ultimately, the vision for this work is a system that allows the IWK to maintain electronic documentation of a mother’s whole pregnancy – from her initial visit, to labour and birth, to post-natal care. In the future, the hope is to connect this information with other hospitals and health care providers, toward more informed care throughout the system.



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# It takes a village

"We are parents, foster parents, adoptive parents. As an early childhood educator, I have extensive experience working with children, particularly children with behaviour issues. So when our youngest adopted son began to display significant behavioural issues and all our 'tried and true' techniques were not working, we sought help.

We really did not think our family would make it; things were so out of control at home. When I saw the ad at our school for the Incredible Years™ program, I signed up right away. My husband and I were wondering what they could teach us that we didn't already know. But we also knew that it could not hurt.

While much of the information we already knew, much of it we were not using anymore. The way the information was presented and the homework that accompanied it was just what we needed to begin to re-build our relationship with our son and help manage his behaviour. We had not realized how little of a relationship we had left.

Our son loved the skills that we learned and responded right away. Our family has been changed forever and when things begin to slip, as they can, we go back and look at what we have stopped doing, put it back in place and we see a difference in a short time."

Paula, Incredible Years™ participant

Parenting is one of life's biggest challenges. It can bring with it feelings of stress and frustration, particularly when a child's behaviour becomes difficult to manage. Add to that concern about a child's social or emotional well-being and parents can feel overwhelmed and isolated.

But there are people and strategies that can help – and that's where IWK Primary Health's Incredible Years™ program comes in.

In the fall of 2010, Primary Health at the IWK, as part of Capital Health's Dartmouth and Chebucto Community Health Teams, offered this free 10-week program for parents of six- to 12-year-olds. Already successfully used by the IWK's Mental Health and Addictions program, the Incredible Years™ focuses on helping parents improve their children's social and emotional skills, and reduce behavioural problems.

Through the Incredible Years™, IWK Primary Health is enabling stronger parent-child relationships, and is focused on the critical importance of health and well-being in childhood. With the right caring, social and emotional support, every child is better able to meet his/her full potential.

Now with additional community-based Incredible Years™ course offerings in the works, IWK Primary Health looks forward to continuing to make a difference in the lives of families.



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# SUPPORTING me



“When I was very sick at the IWK, I remember all the people smiling at me and telling me that I will get better. I liked the food and the kind nurses who brought me the medicine I needed. They helped me feel better and I felt safe there.

I remember having fun in the recreation room where I could practice using my left arm again. The clown was doing magic and smiling to me to make me feel happy, and I did.

I think the IWK helped me by supporting me and my family and by letting me go back to school. I want to tell all the children in the hospital that they should not feel sad because they will get better soon.”

Maximo Mathenge, patient, age 6

On February 20, 2011, six-year-old Maximo Mathenge was playing on his computer when he fell to the floor. At first, his father thought he had been goofing around on his chair. But when he couldn't get up, his parents rushed him to the IWK's Emergency Department.

Emergency Department staff knew something was very wrong, potentially life threatening, and quickly began addressing the situation. Maximo was immediately placed on a cardiac monitor so that his vital signs could be tracked carefully. Constant monitoring and continuous reassessments allowed the health care team to respond to subtle changes in vital signs indicating a change in Maximo's condition.

Within approximately 45 minutes, it was determined that Maximo had a hemorrhage, or bleed, in his brain. Thanks to the speedy action of the health care team in the Emergency Department and early detection of this hemorrhage, treatment was initiated quickly and today Maximo is back to being the healthy, happy boy his parents know and love.

The health care team at the IWK Emergency Department is passionate about helping children and youth receive the best possible care in a safe and timely manner. One of the ways they help ensure their readiness to respond is by conducting regular events on a “simulator” that has its own heart beat and is able to breathe. Health care professionals have the opportunity to perfect clinical techniques and practice collaborating with others before they go to the bedside. The Emergency Department aims to increase the frequency of these exercises over the next couple of years. Doing so will continue to improve the skills required to meet the needs of patients, like Maximo, and their families.



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“Pivotal Response Treatment (PRT) has a number of advantages as a basis for Early Intensive Behavioural Intervention (EIBI) over more traditional behaviour therapies for young children with autism. PRT is used to teach children in their natural environments, allowing it to be used during play and everyday activities. Teaching parents pays off because they are always there to build their child’s skills. This extends the intervention and it makes it more likely that the children will continue to make progress after they leave the program.

Our research helped prove that this program is a good investment. We know that a small program can make an enormous difference! Since the study was released, the Government of Nova Scotia has invested new money into EIBI and we hope that our data helped contribute to that decision.”

Dr. Isabel Smith, Psychologist, IWK Health Centre, and Associate Professor of Pediatrics, Dalhousie University

# INVESTING IN FAMILIES



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The IWK is home to many world-class researchers pursuing projects that will lead to better care for women, children and youth. This research can also help ensure that we are investing in cost-effective health care.

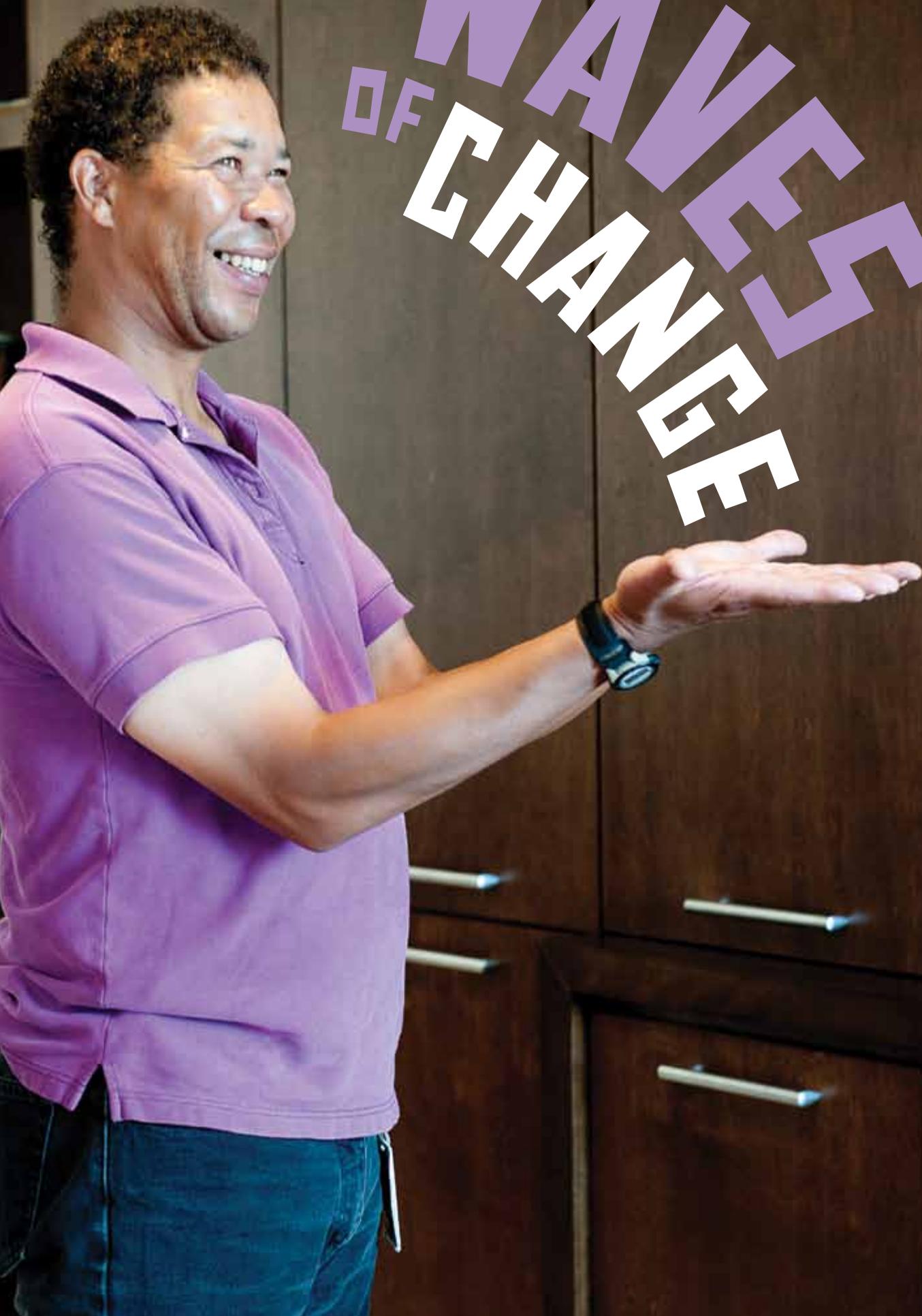
A recent study by Dr. Isabel Smith, an IWK Psychologist and Associate Professor of Pediatrics at Dalhousie University, and others found that the Nova Scotia Early Intensive Behavioural Intervention (NS EIBI) program is improving communication and other skills of preschoolers with autism. The study was published in the *American Journal on Intellectual and Developmental Disabilities*.

NS EIBI was launched in 2005 by the Government of Nova Scotia as an innovative community-based autism treatment program. The IWK is one of nine providers of the program across the province.

Based on the Pivotal Response Treatment (PRT) model, NS EIBI’s approach is unique, combining time with PRT-trained interventionists (up to 15 hours per week) with training for parents to make teaching part of the child’s everyday life. Typically, early intervention for children with autism involves between 20-40 hours per week of specialized one-to-one teaching by a trained interventionist.

Dr. Smith and her co-authors found Nova Scotia’s model of combining therapist and parent intervention produced effective outcomes for preschool children similar to published results from other more intensive EIBI programs, while also being a more feasible, sustainable and cost effective autism treatment model, compared to EIBI programs elsewhere.

The creation of the NS EIBI program was spearheaded by Dr. Susan Bryson, Psychologist and Craig Chair in Autism Research at the IWK and Dalhousie University, and Clinical Leader, NS EIBI, and designed in partnership with Drs. Robert and Lynn Koegel, PRT’s developers, from the University of California at Santa Barbara.



# WAVE OF CHANGE

“When I first started at the IWK, I was worried that we wouldn’t get our message across. But we have. Participants are learning about drugs and alcohol prevention in a safe, fun, comfortable environment.

Approximately half of the youth who participate in the workshops I put on are involved in risky behaviours. When I have the opportunity to talk to them one-on-one, they really open up. We communicate as peers as we build relationships and move forward together.

We also invite an elder from the community to participate in the workshops. They share their experiences and offer advice. This prompts discussions about ancestral beliefs, language, crafts, traditions and respect, which helps participants reconnect with their culture and the community.

What an honour it is to be part of the wave of change that is sweeping our First Nations Communities in Nova Scotia! We are successfully building trust and respect with our Mi’kmaq partners.”

David “Max” Maxwell, First Nations Community Outreach Worker, IWK CHOICES – Mental Health & Addictions Program

In 2009, in an effort to bridge the gaps in culturally-specific addiction treatment services for Aboriginal youth, David “Max” Maxwell was hired as a First Nations Community Outreach Worker at the IWK’s CHOICES program. CHOICES is the provincial adolescent addiction treatment service provided by the IWK’s Mental Health and Addictions Program.

In his role, Max focuses on meeting the needs of at-risk Aboriginal youth with drug and alcohol use problems in settings where they feel safe and comfortable. He provides a range of supports and advocacy services to those in the Aboriginal community in Nova Scotia who have been affected by harmful involvement with substances and/or gambling.

Working with Aboriginal community partners, which include all 13 First Nation Bands and both tribal councils in Nova Scotia, Max is also focused on relationship building and advocacy for all First Nations youth so that we can continue to assess the services that are needed.

Since Max has been with the IWK’s CHOICES program, significant progress has been made in linking with Aboriginal community organizations. Educating First Nations communities about the services provided by CHOICES has increasingly led to referrals and outreach.

From here, the IWK hopes to enhance collaboration and coordination with community partners, supporting continuity of care across the continuum of treatment services and support. For CHOICES, these efforts will focus on working with community supports to enhance capacity and promote the delivery of evidence-based early intervention services to benefit those First Nations youth who need support.



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“The new improved Teen Lounge is an amazing place to be. After all the stress and sadness that overcomes me or other patients in the IWK, coming to the Teen Lounge brightens up our day with the pool table, rock band, etc. It brings a smile to my face, and lets me be relaxed and happy in that moment. I love the Teen Lounge!”

Drew Kirvin, patient, age 17

# PARTNERS IN CARE

The IWK Health Centre, the IWK Foundation and the Auxiliary of the IWK work closely together. While the Health Centre focuses on providing the best care, enabling teaching and research, and supporting a healthy population, the Foundation and Auxiliary help make this work possible.

The Foundation tells the IWK story and raises much-needed funds to support the areas of greatest need at the IWK, including the purchase of state-of-the-art medical equipment, innovative research and special programs such as Spiritual Health, Child Life and Bilingual Services.

At the heart of the Auxiliary are dedicated volunteers, fundraising to provide the smaller items that bring comfort to the patients and families of the IWK. From playrooms and the Family Resource Library to the Pediatric Rehabilitation Equipment Loan Program, the Auxiliary prides itself on supporting innovative projects as well as the daily needs of patients and families.

The newly renovated IWK Teen Lounge demonstrates how these organizations work together to benefit patients. This project was made possible thanks to generous contributions from both the Sidney Crosby Foundation (through the IWK Foundation) and the IWK Auxiliary.

The Teen Lounge is designed to meet the unique needs of patients 12 years and older – a gathering space for them to experience normal social interactions. Music, video games, pool, group activities and special events are all part of the fun! The new Teen Lounge will improve the experiences of teens during their time at the Health Centre and is a wonderful example of collaboration by IWK partners in care.



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# USING RESOURCES WISELY

Using our resources wisely, and with accountability to taxpayers and our donors, is essential. The IWK is committed to living within our means and ensuring that we get the best possible value for the resources we have. This effort has allowed us to balance our budget and not run a deficit. We are always exploring new and creative ways to improve program delivery and reduce costs.

## Waste Streaming

The IWK's Neonatal Intensive Care Unit (NICU) – the Health Centre's largest inpatient unit – developed a new waste management plan. By directing waste into the appropriate streams (general or bio waste), NICU staff are on track to save the Health Centre approximately \$40,000 a year, which can be put back into patient care.

## 3rd Party Reprocessing

In October 2010, the IWK's operating suites began reprocessing select single-use medical devices. All devices are thoroughly sterilized and functionally tested at a certified reprocessing facility, and must meet original manufacturer's standards before being returned for use. To date, this initiative has saved the IWK \$16,000.

## Balance Sheet

2011

2010

### Assets

Cash and cash equivalents	\$21,591,000	\$18,088,000
Receivables and prepaids	\$52,201,000	\$47,670,000
Inventories	\$1,969,000	\$2,179,000
Property and equipment	\$179,742,000	\$173,438,000
	<b>\$255,503,000</b>	<b>\$241,375,000</b>

### Liabilities

Payables and accruals	\$38,886,000	\$32,455,000
Retirement allowances and benefits	\$26,230,000	\$23,699,000
Facilities loan payable	\$12,156,000	\$12,786,000
Appropriations and reserves	\$10,645,000	\$11,802,000
	<b>\$87,917,000</b>	<b>\$80,742,000</b>

### Equity

	\$167,586,000	\$160,633,000
	<b>\$255,503,000</b>	<b>\$241,375,000</b>

## Statement of Operations

2011

### Revenue

Retail revenue	\$7,675,000
Taxpayers	\$199,997,000
IWK Foundation*	\$250,000
Out-of-province and out-of-country	\$9,145,000
<b>Total Revenue</b>	<b>\$217,067,000</b>

\*The IWK Foundation also provides \$3.75 million to the IWK to purchase priority equipment, and fund research and fellowships.

### Expenses

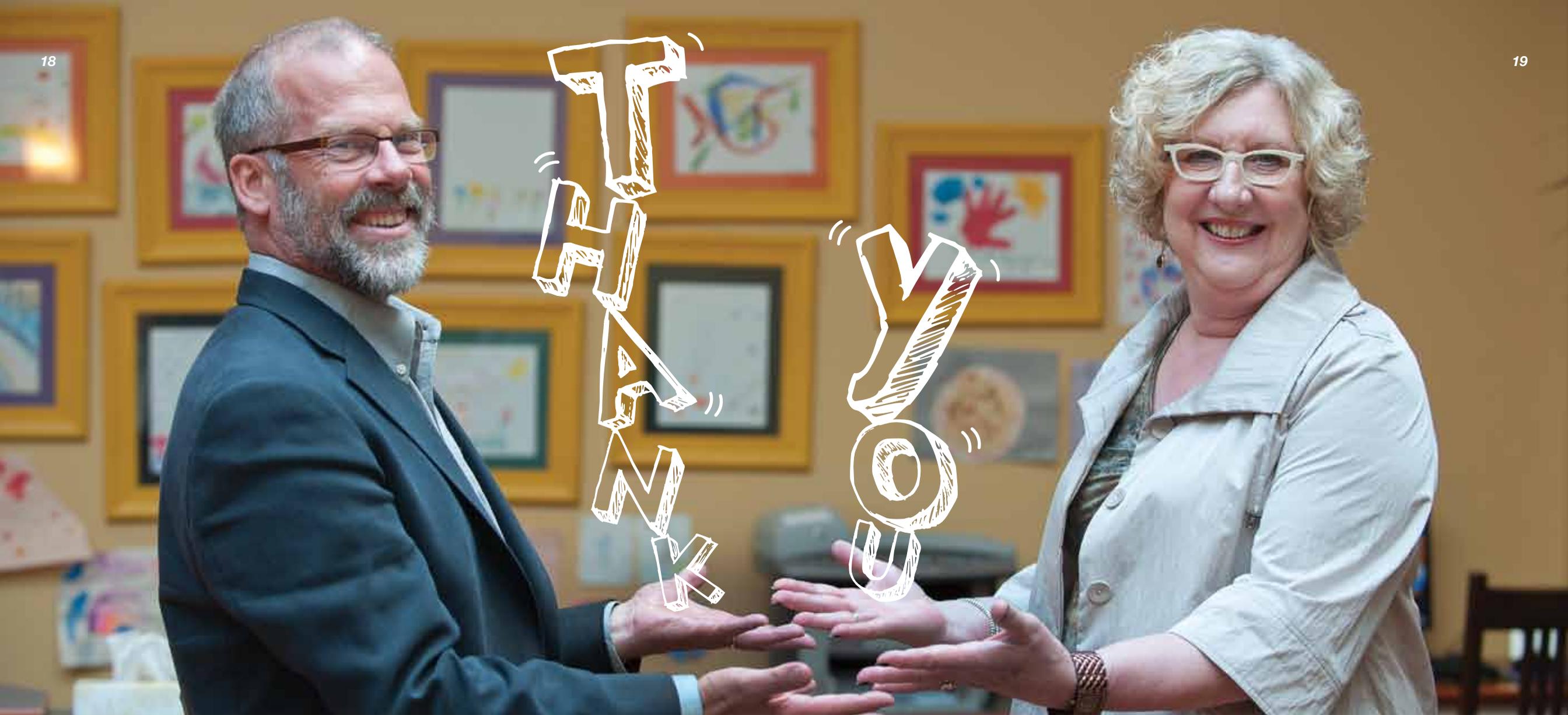
Administration	\$3,788,000
Operations & Support Services (Utilities, Information Technology, Maintenance, Housekeeping, Food Services, etc.)	\$53,380,000
Medical Services (Pathology, Lab, Diagnostic Imaging, physician administration, etc.)	\$24,801,000
Women's & Newborn Health (Neonatal Intensive Care Unit (NICU), Birth Unit, Operating Rooms (ORs), Breast Health, etc.)	\$46,946,000
Mental Health & Addictions (CHOICES, Adolescent Centre for Treatment, Compass, etc.)	\$26,177,000
Children's Health (Pediatric Intensive Care Unit, ORs, Inpatient Units, Ambulatory Care, etc.)	\$59,480,000
Capital investment (Fetal monitoring, NICU monitoring, Fluoroscopy Unit, Anaesthesia System)	\$2,495,000
<b>Total Expenses</b>	<b>\$217,067,000</b>

Net surplus/ (loss) from operations

0



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Thank you for joining us in our review of the past year. This report is a collection of stories about where we've been and where we are going, and we're pleased to be reaching out to share them with you. We hope you've enjoyed hearing from the people at the heart of what we do.

There is no doubt that health care is changing. In spite of economic challenges and growing demands, we're moving ahead and making progress in many ways, with family-focused quality patient care as our number one priority.

Over the past year, we continued to strengthen our academic mission, expand our research horizons and collaborate with our partners to improve the health of our community. In the continued delivery of the best care, we've also sought to ensure that the right people, processes, information and technology are in place.

Going forward, we anticipate a period of exciting and challenging transformation. For example, we are developing a sustainable model for ambulatory care and improving access to mental health and addictions services. We also soon hope to embark on some major capital initiatives, including new critical care space. All of this will be reflected in updating our strategic plan beginning this fall.

This past year has had more successes than could fit within this limited space – we plan for this momentum to continue! And we have our people to thank for our many achievements. Our amazing staff, physicians and volunteers set this organization apart.

We remain focused on the needs of Maritime patients and families, and how we can better serve them. In the years ahead, we will build on the great work already underway.

  
 Anne McGuire  
 President & CEO  
 IWK Health Centre

  
 John Rogers  
 Chair, Board of Directors  
 IWK Health Centre

## Board Achievements

In 2010/11, our community-based board of 14 volunteers from throughout the Maritimes – and four representatives from the IWK Health Centre – focused on strategic direction, action and accountability.

The IWK Board of Directors:

- Advanced the mission, vision, values and strategic direction of the IWK Health Centre by focusing on key priorities, and developing adaptability for the complex and changing healthcare environment.
- Continued to practice informed governance through oversight of Key Performance Indicators (KPIs), progress reports and sound financial reporting.
- Acted as trusted advisors to Government.

- Supported the Health Centre's strategic planning priorities for 2010/11 and began the process for the upcoming strategic planning cycle.
- Established a Board Quality Committee of the IWK. This committee will ensure that the Health Centre continues its focus on improving patient safety.
- Held the first "Scrub In at the IWK," a day-long, immersive education session, where both the IWK Board of Directors and IWK Foundation Trustees visited various departments throughout the IWK for hands-on learning.
- Visited Prince Edward Island to meet with various government officials and counterparts to further strengthen the IWK's collaboration with the Maritime provinces.



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