

Docs' Digest is a quarterly newsletter for IWK Health Centre Medical, Dental, and Scientific Staff (MDSS). Here is an update on projects of particular interest to physicians and dentists:

**IWK Structure and Co-Leadership:** Several 'pilot' pairs of physicians or clinicians/directors or managers have been oriented to the new approach to co-leadership. The pilot will be short -- about three months -- with a rapid evaluation immediately following. Then any needed changes to the model will be made and all co-leader pairs throughout the Health Centre oriented to our new framework to fully involve physicians and clinicians in collaborative decision-making and accountability. Meanwhile, several areas are being examined where realignment of groups of teams that work closely might provide for better collaboration and leadership.

**IWK Youth Strategy:** Specialty-by-specialty discussions have started to develop an evidence-based recommendation on the best age (or ages) for transition to adult care, and therefore the age 'limit' for the IWK's services. Interviews and focus groups with youth to determine how best to deliver those services will start in the New Year.

**IWK Physician and Dentist Resource Planning:** The Project Team has held its final meeting and the Steering Group is now finalizing recommendations to MAC and ELT. Those recommendations will include a suggested new impact analysis process for end appointments, a process for evaluating and prioritizing requests for new appointments and an information system to support medical/dental resourcing and appointments.

**IWK/CDHA Shared Lab Services:** The Request for Proposals to design this project has been written and has gone to Government. A few changes have been proposed following that review and once those are made the final RFP will be approved by Cabinet and then released. Once the resulting proposals have been evaluated and a successful bidder chosen, the project will finally be ready to move full steam ahead.

- Dr. Robin Walker, Vice-President Medicine

## 2007-2008 IWK Annual Report to Our Community

~Public Relations

The 2007-2008 IWK Annual Report to Our Community is now available on the [IWK website](#) and on Pulse.

If you would like to pick up your own print copy of the Annual Report, please visit the Public Relations office.

## Changes to After-Hours Access at the IWK Health Centre

~A message from Steve Smith, Director of Engineering and Facility Services & Jen Feron, Director, Risk Management & General Counsel

On September 30, the IWK Health Centre launched a new security initiative to ensure more controlled access to the Health Centre after hours.

All external entrances will now be locked from 8 p.m. to 6 a.m. - including the Women's & Children's Buildings, the Link Building & the research area in the Richard B. Goldbloom Clinical Care Pavilion. The Emergency Department remains open 24/7 for emergencies.

Staff and physicians continue to have 24-hour access by swiping their ID badge/access card at any of the main entrances. Please remember that you are required to wear your ID badge at all times. If you do not have an active ID, please contact Protection Services or stop by the ID Room (located in the hallway nearest the Children's Boardroom, main floor) between 11 - 11:30 am or 2 - 2:30 pm, Monday through Friday.

Family members and visitors continue to be welcome at any time; however, entry after 8 p.m. is restricted to the Women's Building main entrance at 5980 University Avenue. Families / visitors will use an intercom to gain access to the Women's Lobby, where they will be required to check in with Protection Services.

If you have questions or concerns, please contact Steve Smith, Director of Engineering and Facility Services, at 7787 or Jen Feron, Director, Risk Management & General Counsel, at 6577.

If you receive the newsletter by email, click the links in the text, which will take you to PULSE. If you receive this by fax or mail, you can click the new "Docs' Digest" button located in the bottom right-hand corner on PULSE. If you do not have access to PULSE, you can also find "Docs' Digest" on our website [www.iwk.nshealth.ca](http://www.iwk.nshealth.ca) located under the "Health Professionals" section. From time to time, you will also see Docs' Digest Bulletins, which I will send to you if there is a news item that is time-sensitive, or of particular importance.

**First Phase of Children's Perioperative Renovations Complete**

~Allan Horsburgh, Chief Financial Officer and VP, Operations and Support Services

I am pleased to share with you that another major phase of the Children's Site Redevelopment project is wrapping up. On Tuesday, December 16th, the Children's OR team will begin to move into new Operating Rooms - representing the completion of phase one of the perioperative redevelopment. The Children's ORs will be closed to elective surgeries from December 16th to 19th to enable the move into the new rooms. Emergency surgeries will be unaffected by the move and will take place in a designated OR within the "old" space during this period.

Opening to their first elective surgery patients on Monday, December 22nd are five new rooms, to be followed in February 2009 by the completion of a sixth OR.

Phase two set to begin

Beginning in March 2009, phase two of the perioperative portion of the Children's site Redevelopment project will get underway with the closure of a portion of the remaining "old" space in preparation for further renovations.

Phase two will include renovation of the area that currently houses some of our existing ORs and adjacent support spaces. This phase is expected to be complete in the fall of 2009, at which point the Children's perioperative space will consist of a total of seven new operating rooms with updated technology and equipment. In addition, there will be a new combined Post Anaesthetic Care Unit (PACU) and Day Surgery space to serve patients and families to today's standards of family centred care, as well as much improved staff spaces and storage and support spaces.

When this second phase of renovation is complete, the existing Recovery Room will move into the new PACU area and Day Surgery, which has been located on the 5th floor of the Children's Site since the start of this project, will reunite with PACU on the 3rd floor. Once vacated, the old Recovery Room space will be reconfigured for use as a teaching area and additional office space.

Congratulations to the Children's Perioperative Team on this significant achievement. I know the work isn't over yet, but the opening of these first ORs is a major milestone on our path to building better care. Your new space will mean safer, state-of-the-art care to countless families from across our region and beyond.

Thank you to all IWK staff for your ongoing patience with the Children's Site Redevelopment project. It is understandably challenging to work in a construction zone, but your professionalism and commitment to this initiative have enabled our project completions and successes to date.

**Family Advisory Council**

~A message from Robin England – Patient and Family Centred Care Coordinator

The IWK's centre-wide Family Advisory Council (FAC) is in its final development stage and will begin recruiting this December. The Development Team behind this initiative includes Robin England – Patient and Family Centred Care Coordinator, Helen Morrison – Director of Professional Practice, Angela Arra-Robar – CNS PMU, and two family consultants: Chuck Livingstone and Patti Green.

The Council itself will report directly to the Health Centre's senior management committee level and ELT, and begin with quarterly reports to the Board. Its work will focus on five key pillars including Patient Safety, Operations, Facilities, Staff Education – including Family Faculty, and Family Information. Additionally, the Council will operate as an oversight committee and support mechanism for all existing and yet to be developed advisory bodies and individuals within the Health Centre.

As an institution we are moving away from talking about family centred practice towards the doing, and this means the active inclusion of patients and families as partners in all aspects of their care, and at all levels in the organization.

The FAC Development Team will be making rounds throughout the Health Centre this November and December to share this model in more detail with physicians and staff. To book a time with your department, or if you have individual questions or comments, please contact Robin England, Development Team Lead, at 470.6527 or [Robin.England@iwk.nshealth.ca](mailto:Robin.England@iwk.nshealth.ca)

## **Capital Health establishing new Community Health Teams in partnership with the IWK**

*~A message from Anne Cogdon, Executive Director, Primary Health*

What if you had a role in shaping programs and services to enhance health in your community? What if you had access to a Community Health Team that would work with you to help you achieve better health?

The communities of East Dartmouth and Spryfield-Herring Cove are a step closer to answering these questions. They've been selected as sites for the first Community Health Teams, a collaborative initiative led by Capital Health's Primary Health Care team in partnership with the IWK Health Centre. The IWK has been involved from the early stages of this project and is currently involved in helping the communities identify their service needs.

The Community Health Team is a new community-based model of addressing chronic disease prevention and management. Community Health Teams focus on supporting individuals and families to build knowledge, confidence and skills to better prevent and manage chronic disease.

The Community Health Team model recognizes that each community has unique needs. As a result, the Community Health Team in East Dartmouth will probably look different from the team in Spryfield. However, there are some elements that will be similar. Community Health Teams will:

- Be made up of health professionals from varying backgrounds and disciplines. Teams will be determined based on the needs of the community.
- Be located in the heart of the community and be easily accessible to community members.
- Offer personal wellness health assessments to individuals and families.
- Work with interested community members to set and achieve personal health goals.
- Offer free group nutrition, physical activity and education programs.
- Provide space and support for peer support programs.
- Work in collaboration with family physicians and community-based services.
- Work with schools, businesses & community organizations to support health promotion & disease prevention initiatives.

In the coming months, Capital Health and the IWK will engage the communities of East Dartmouth and Spryfield-Herring Cove in discussions around what the Community Health Teams in each neighbourhood will look like. Stay tuned as the Teams take shape.

For more information on how the IWK will be part of these Community Health Teams, please contact Anne Cogdon at 6572.

### **New resources now 'live' on IWK website**

*~Public Relations*

On Wednesday, November 5th, a web-based resource called AboutKidsHealth launched on the IWK website.

Through this collaboration, the AboutKidsHealth resource centres, the equivalent of online textbooks for a number of conditions and health topics, and "How the Body Works", an animated interactive tool illustrating the anatomy and physiology of a number of organ systems, have been adapted to ensure relevancy no matter the website user's location.

The resource centres offer family-focused health information on Brain Tumours, Heart Conditions, Diabetes, Epilepsy, Pain, Premature Babies, and ADHD, with more to come as time and resources permit.

Sincere thanks to all those who have assisted with this initiative to date. Representatives throughout the Health Centre have contributed their expertise to reviewing AboutKidsHealth content. We look forward to building the IWK-AboutKidsHealth Educational Partner Review Committee (with membership from across the IWK) in the weeks ahead and digging deeper into our partnership as content contributors. Please stay tuned!

If you have any questions about this initiative, please contact Gillian Batten in Public Relations at extension 6764.

## **Gunshot Wounds Mandatory Reporting Act came into effect October 31**

*~A message from Jen Feron, Director, Risk Management and General Counsel and Kate Mahon, Director, Perioperative, Emergency and Critical Care*

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The Gunshot Wounds Mandatory Reporting Act is effective as of October 31, 2008. This new legislation requires every hospital, facility or service that treats an individual for a gunshot wound disclose to the local police service the following information:

- The fact that an individual is being treated, or has been treated, for a gunshot wound;
- The individual's name (if known);
- The name and location of the hospital, facility or service.

Under this new legislation, the local police service must receive verbal notification regarding gunshot wounds as soon as possible, so long as it does not interfere with the individual's treatment or disrupt the regular activities of the hospital, facility or service.

Police must have either a warrant, court order or the consent of the patient or substitute consent giver in order to obtain any further information and/or evidence.

In the event that a gunshot wound is identified, a member of the care team is required to notify the Clinical Director On-Call. The IWK has designated the Clinical Director On-Call as responsible for ensuring the required notification is made to the Halifax Regional Police whenever a gunshot wound is reported.

Please ensure you are aware of whom you should contact (as outlined in the paragraph above) in the event that a patient is identified as having a gunshot wound. While mandatory reporting may be done when the patient is in the emergency room, the patient may be transferred to PICU or to one of the floors by the time police arrive.

If you have any questions about the Gunshot Wound Reporting Act, please contact Jen Feron, Director, Risk Management and General Counsel, at extension 6577 or Kate Mahon, Director, Perioperative, Emergency and Critical Care at extension 8735.

### **Update on Health Centre's 2008-2009 Budget**

*~Allan Horsburgh, CFO and VP, Operations and Support Services, November 28, 2008*

You may have been hearing about deficit situations at other DHAs, in the media and from colleagues. With that in mind, and since we haven't been in touch on this topic since the Town Hall we held on November 12th, I wanted to take this opportunity to bring you up to speed on our current situation and our actions to date.

As many of you know, the IWK is faced with significant budgetary concerns. We are forecasting a deficit of approximately \$1.2 million for this fiscal year. We had substantial increased costs this year, many of them out of our control, including volatile energy prices, an increase in birth rates and a high demand on our Mental Health & Addictions program.

We have been working for the past several months on our action plan, with involvement from directors, managers, staff, and physicians across the Health Centre. Our plan has focused on cost saving measures in non-clinical areas, including travel, professional development, education and attrition. We remain hopeful that there will be no impact to patient care.

The Health Centre's priority is to reduce our spending by \$1.2 million in the next four months to avoid carrying a deficit into the 2009-2010 fiscal year. The province has indicated that there will be no additional funds, as was the case in previous years.

And underpinning all of this is the significant need to change how we do what we do at the IWK and as a health system as a whole. The IWK is working closely with the Department of Health and the other District Health Authorities to transform the way we deliver health care in the province to make it sustainable.

Anne and I have embarked on a series of face to face meetings with individual groups and units throughout the Health Centre to discuss our need for transformation. If your department would like to meet with us, please contact Theresa Rogers at [theresa.rogers@iwk.nshealth.ca](mailto:theresa.rogers@iwk.nshealth.ca), or 470-6896.

**Changes in BlackBerry protocol to take effect December 16, 2008**

~A message from Jen Feron, Director, Risk Management and Legal Counsel, Brenda MacDonald, Manager, Privacy, and Ferne Mardlin-Smith, Interim Director, Technology Programs & Services of Quality and Decision Support Services

In our roles at the Health Centre, we are privy to sensitive business information and confidential patient information. We are obligated to take steps to protect this information. As our use of technology increases and the places we provide care extend beyond the walls of the Health Centre, we want to remind you of the additional steps we must take to protect this information and the upcoming activation of the password capability on your BlackBerry.

Use of Technology

Technology is essential to our work. Laptops, BlackBerries and flash drives are used every day in the operations of the Health Centre. All laptops and other technologies that contain or can access business and patient information must be password protected, and business and patient information must never be stored on non-health centre equipment. Flash drives must also be secure, that is password protected and encrypted. Technology Programs and Services will be activating password capabilities on all BlackBerries connected to the IWK network on December 16, 2008. This means you will be required to implement password protection on these devices effective that date. You can activate your password before December 16, 2008, in a few simple steps set out in the instructions attached. If you require assistance in taking steps to protect the information you use on computers, PDAs, flash drives or other technologies, please contact the IT Service Desk at ext. 6700.

Traveling with Patient Information

Over the past few years, the Privacy Manager has assisted groups who travel with patient information or use patient information outside of a health care facility to develop practice guidelines to ensure the confidentiality of the information is protected. If you or your area currently transport or access patient information outside of IWK facilities, please contact Brenda MacDonald, Privacy Manager (extension 8088), to ensure your practice has appropriate security measures applied. Centre-wide guidelines are in development and will be shared soon. If you have input on these, we would appreciate hearing from you. Please contact Brenda with your input.

Taking steps to protect business and patient information must be common practice to those entrusted with sensitive information. The Health Centre and those we serve rely on you to take active steps to protect information.

If you have questions about how to protect information, concerns about existing practices or want to share leading practice ideas, we encourage you to contact the IWK Privacy Manager, Brenda MacDonald (8088).

Over the next few months, watch for more information and sessions related to Privacy and Access topics from Risk and Legal Services and Technology Programs and Services.

(Please see Pulse for helpful "how to" information from Technology Programs and Services regarding applying a password to your BlackBerry device.)

If you have questions or concerns, please contact Kevin O'Reilly, Manager, Infrastructure & Project Management Office, at 7294 or Toni White, IT Trainer, at 6848.

**Dr. Richard Goldbloom**  
**Recipient of the 2008 Gold-headed Cane Award**

Congratulations to Dr. Richard Goldbloom, recipient of the 2008 Gold-headed Cane Award, along with Dr. Lynn Johnson, Professor of Medicine and Division Chief, Infectious Diseases, and Hospital Epidemiologist at Capital District Health Authority.

"Dr. Goldbloom's life and career in medicine wonderfully illustrates the precepts central to the Gold-headed Cane Award: scholarly attainment, humanism and professional skill, and effective role model for students in the medical humanities."

Established at Dalhousie in 2002, the Gold-headed Cane Award recalls the 18th-century practice of presenting a gold-headed cane to the pre-eminent physician in English society of the day.

## **Update: Migration to Microsoft Outlook**

*~A message from IWK Technology Programs & Services, December 9, 2008*

The switch from the Novell networking environment to Microsoft's Active Directory is now underway. As mentioned previously, this should be a relatively transparent move and should be complete in December. After that point, the change from GroupWise to Microsoft Outlook will begin. The majority of IWK Health Centre users will be switched to Outlook in late January.

There are some important things that you need to start now to prepare for the switchover. Rest assured, all of your emails will be moved over to the new system. However, within the new environment you will have much less storage space. Mailbox sizes will be reduced to 200 MB, down from 1 GB – this means you will only have 1/5 or 20% of your current storage space for emails.

Beginning now, we ask that you please clean up your mailbox as much as possible. Try to spend even a few minutes each day going through your email and deleting messages you no longer need.

We would also like to take this opportunity to remind you that your email inbox is not a document management system. When people send you emails with attachments you wish to keep, these should be downloaded and saved – not stored in your mailbox.

If you archive emails, please keep in mind that you can only view your archived messages via GroupWise and there may be a period of time during the switchover where your archived messages are not accessible. All mailboxes will be moved to Outlook first and archives will be moved later. You will, however, be able to read your archived messages in Outlook after they have been migrated.

When cleaning up your mailbox, if you wish to archive emails, we recommend that you archive them locally (i.e. on your C:\ drive) and back them up to CD. If you need assistance with this, please call the IT Help Desk at 6700.

Training and orientation sessions for Microsoft Outlook will begin in mid-January. Both “refresher” courses – about an hour and a half in duration – and longer full-day training sessions will be offered.

There will also be an Outlook launch event on January 19th with cake, balloons, and tons of helpful hints and tips to help make the switch as painless as possible! Please stay tuned to Pulse for details and training session registration information.

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## **Update on the Model of Care Initiative in Nova Scotia**

*~A message from Heather Simmons, IWK Project Lead, Models of Care in Nova Scotia, December 2, 2008*

Since the approval of the newly designed collaborative care model by the Council of CEOs on June 20th, the Provincial Model of Care Implementation Team has been working closely with the Vice Presidents of Acute Care / Patient Services and with our health system partners across the province to prepare for implementation.

The newly designed model will initially be implemented in a select acute care inpatient unit in each of the nine DHAs. At the IWK, the Family Newborn and Adult Surgery Unit has been selected as the site for the first wave of implementation. Throughout the implementation phase, the model will be constantly evaluated and improvements will be made as required.

As discussed previously, the newly designed collaborative care model will be patient-centred, high quality, safe and cost-effective. It recognizes that all care starts with the patient and the family while providing the interdisciplinary care team with the supports they need to allow them to work to their full scopes of practice.

New background information is now available in the Models of Care in Nova Scotia sub site on Pulse, as well as a Question and Answer section, to address some of the many questions around Licensed Practical Nurses that have come up in different forums throughout the Health Centre. A number of frequently asked questions have been answered so far, and more will be added in the future. If you have a question that has not been answered yet, please feel free to submit it via email to [QandA@iwk.nshealth.ca](mailto:QandA@iwk.nshealth.ca).

Jocelyn Vine, Vice President, Patient Care, and Heather Simmons, IWK Project Lead, Models of Care in Nova Scotia, will also be visiting numerous forums to share information and discuss the project in more detail.

Further information on the initial implementation at the IWK Health Centre will be shared in the coming weeks.

## Lab Move Fast Approaching

~Fran O'Brien, Director of Lab Operations

Construction of a new lab space on level 0 of the Health Centre, Children's Building, is nearing completion. A phased move-in to the new space is planned for the period of January 5th to 30th, 2009; however, the Lab move to level 0 does not include all Lab components. Anatomical Pathology, Cytogenetics, and Molecular (DNA Lab) will remain at locations on the 3rd and 4th floors of the Children's Building, and 3rd Link, respectively. In short, Chemistry, Hematology, Transfusion Services and Microbiology will move. This update summarizes the details of those moves.

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The following Lab components will be relocating to the new Level 0 Lab throughout January:

Jan 5 <sup>th</sup> – 9 <sup>th</sup>	Centralized materials management to support lean work processes on level 0
Jan 12 <sup>th</sup> - 16 <sup>th</sup>	Management and support staff offices, Pathology Conference Room
Jan 14 <sup>th</sup> – 15 <sup>th</sup>	Microbiology serology and molecular applications
Jan 19 <sup>th</sup> /20 <sup>th</sup>	Microbiology main lab
Jan 20 <sup>th</sup> – 22 <sup>nd</sup>	Biochemical genetics (metabolic chemistry) and specialized testing
Jan 27 <sup>th</sup>	Routine Chemistry, Hematology, Urinalysis and Coagulation
Jan 28 <sup>th</sup>	Transfusion Medicine

This means that there will be impacts for clients of the Lab, particularly around specimen drop-off to the Level 0 Lab:

Effective	Specimen Type	Drop-off at
Jan 19 <sup>th</sup>	Microbiology specimens	Level 0 Lab
Jan 27 <sup>th</sup>	Chemistry, Hematology, Urinalysis and Coagulation	Level 0 Lab
Jan 28 <sup>th</sup>	Transfusion specimens	Level 0 Lab

**Note:** The above specimen types will be dropped off at the Specimen Receiving window of the Level 0 Lab, directly across the hall from Stores.

Of course, we will do everything we can to minimize any disruption to Laboratory service during this period, but we ask that you bear with us as we work through these major moves.

Deliveries of outside orders from receiving and blood products from Canadian Blood Services (CBS) will be made directly to the Level 0 Lab. We will communicate these changes with vendors and CBS at a later time.

A chart of "what's going where" based on the services our clients may be seeking is in the works and will be posted soon.

An open house is planned for February 2nd, Groundhog Day, from 1 to 3 p.m., to provide all IWK staff, physicians and volunteers an opportunity to visit the new Lab. Mark your calendars now. Additional details to follow closer to that date.

Please stay tuned to Pulse for more information. In the meantime, if you have any questions about the Lab move, please contact Fran O'Brien, Director of Lab Operations, Pathology and Laboratory Medicine at extension 8262.