

The Health Beat

A newsletter for employees of Health PEI



Toolkit will help manage traumatic events

Health PEI managers now have an online resource to help them support their staff when a critical incident occurs.

The *Critical Incident Staff Support (CISS) Managers' Toolkit* contains links to useful policies, articles, checklists, and key contacts and resources for use at various stages of an unanticipated adverse or sentinel event. These could involve a professional error or a response to a traumatic event that involves clients, patients or staff.

"Managers are often our system's 'first responders' to staff affected by critical incidents," said Pamela Trainor, executive director of Corporate Development and Inno-



vation. "Our managers set the stage for how an event plays out for their staff, and we needed to provide them with useful information to support them in this role."

Trainor led a working group that was tasked with developing employee resources like the toolkit, which included Joanne Donahoe, director of Quality and Access Manage-

"There is information on planning for the initial response, right through to information on peer supports and clinical expertise for staff who may have difficulty coping down the road," Donahoe said. It is divided into tiers that managers can reference through each phase of a critical incident, and more information will be added over time.

"It is definitely something that managers will want to bookmark, since the timing of sentinel events is unpredictable," she said. The toolkit was launched April 19 and is located on the Managers' Resource Centre at www.healthpei.ca/mrc.

Hard work of Collaborative Model of Care showing benefits

There has been a great deal of challenging work done by the Health PEI staff and physicians who have been involved with planning and implementing Collaborative Model of Care (CMOC) across our health system, and it is resulting in benefits for our staff and those using our services.

CMOC work on Prince Edward Island began after the 2008 Corpus Sanchez Report suggested that the way we deliver health services must change in order to be sustainable now and into the

For more on Collaborative Model of Care, see inside

future. The first five "showcase units" launched CMOC in 2010 and more sites have followed (see map on page 2).

Few would say these changes have been easy. Our nurses and other health professionals have been called on to work together in new ways, and staff are be-

ing located to where they are needed the most. However, they are critical to ensuring the long-term sustainability of our health system.

For patients, this change has led to an increase of 78,400 patient-care hours provided by front-line staff, or 40.2 full-time equivalent employees. For more on what's happening with Collaborative Model of Care, please turn the page.



COLLABORATIVE MODEL OF CARE: A CHECK UP

Working group focuses on education

To initiate Collaborative Model of Care, substantial amount of support was placed on education of staff.

Nurse and Allied Health managers completed leadership training through Ceridian and LPN education was increased to help boost the number of LPNs practicing to the full scope of their education within CMOC sites. In April 2011, the CMOC steering committee created an Education Working Group to explore and address RNs education needs within CMOC.

A later survey found that RNs wanted education in 1) role clarity, 2) updating nursing assessment skills, 3) care and discharge planning, and 4) collaboration and teamwork.

“Continuing education is an expectation of all professionals,” said Heather Rix, chair of the Education Working Group. “We are focused on identifying education opportunities that are appropriate, available, and equip our nurses to work to the full scope of their practice.”



Role clarity

Rix said that role clarity emerged in the survey as a paramount concern. The two nursing associations are working together on a presentation to address this and will be partnering with Health PEI to reach to ensure as many nurses as possible attend these information sessions.

In addition, on every computer desktop across Health PEI is an icon titled “RN-LPN Role Clarity”. Double clicking on this launches an 18-minute video by the College of Nurses of Ontario called “Three-Factor Framework” that clearly depicts the difference in roles between the RN and the LPN.

Nursing Research Day – May 28

One upcoming session addressing conflict in the workplace, and collaboration and teamwork is “Nursing Research Day,” May 28 from 8:30 to 4:30 at MacDougall Hall, UPEI, Room 242. Advanced registration is recommended, however with capacity for up to 150 participants there will also be registration at the door. It will feature the presentations “Leadership in Tough Times” and “Nursing and Primary Care Networks on PEI.”

Steering committee tracks quality and safety

A key priority throughout Collaborative Model of Care has been to maintain safe, high-quality patient care, and ensuring that this happens is the role of the CMOC Steering Committee.

The committee oversees ongoing feedback, evaluation, and monitoring of the change. It includes members from Health PEI representing quality and safety council, nursing and allied health, and administrators from community and facility-based care delivery.

An evaluation was conducted on the launch of CMOC at the five showcase units. Staff from these units was interviewed to provide feedback on what went well, what didn't go so well, and what improvements they recommend. The complete report may be found at www.gov.pe.ca/photos/original/hpei_CMoCPh1Eva.pdf.

The CMOC Steering Committee also ensures safety and quality by measuring key performance indicators including

patient and staff satisfaction, falls, medication incidents, length of stay in hospital, and staff sick time and overtime. According to these performance indicators, safe and quality care has been maintained at all sites as they have progressed through this change.

The Health Information Management division is exploring ways to make indicator results available to leaders at all sites across the system.

COLLABORATIVE MODEL OF CARE: A CHECK UP

'Coaches' help front-line staff adjust to roles

Employees in the role of "clinical practice champions" are beginning to help front-line staff better understand their new roles in Collaborative Model of Care.

The clinical practice champion (CPC) is a staff member with strong skills and knowledge in a specific area who can coach staff through the change in practice. Prince County Hospital's (PCH) Surgery/Restorative Care Unit – one of the original five "showcase units" for Collaborative Model of Care – was the first to add a clinical practice champion in September 2011.

"Our CPC, Mary Ellen Cameron, worked one-on-one with each RN (registered nurse) to help them focus on expanding their scope of practice" said Pam Berrigan,



Mary Ellen Cameron, right, assists Erin Doucette with medication administration at Prince County Hospital.

PCH's Surgery/Restorative Care Unit nurse manager.

She became a valuable resource on the unit, especially for the new practitioners."

Cameron's role is above complement so she is available to work with staff individually throughout their shift without impacting normal patient care activities. She worked mostly days but also nights and weekends as needed to help nurses working those shifts.

Having clinical practice champions in all Collaborative Model of Care sites is the ultimate goal – one has been added to Community Hospital O'Leary and the next will be at King's County Memorial Hospital and at QEH-Unit 3. If PCH's results are any indication, the role will contribute to a more positive experience for both patients and staff.

Lessons of health assessment course improving care

Health assessment was one of the educational areas that RNs requested the most, so Health PEI provided tuition support for 24 nurses from Collaborative Model of Care sites to attend a pilot UPEI course on the subject last fall.

Although they agreed that the course was intense, most nurses have said they are using lessons from the course within the CMOC environment. Susan Doucette, an RN in Summerside Home Care – one of the CMOC "showcase units" – says the course has helped her provide more thorough assessments to her clients that may identify problems earlier and ultimately improve their care.

"Even in a short time, this education has

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made a difference – especially to some of my palliative clients in their complicated symptom management," she said. The health assessments we do will help determine the plan of care for our clients."

"Within CMOC, I may help staff assess the acuity of patients in deciding their assignments and ongoing changes in

their condition," added Natalie Dennis, clinical educator in Unit 3 of the Queen Elizabeth Hospital, another showcase unit. "Interaction with physicians and discussion of treatments is greatly enhanced by being able to better understand and interpret physical exam findings as recorded in patient history and physical documents."

UPEI Dean of Nursing Kim Critchley is exploring opportunities to make this course available to practicing nurses again. Health PEI remains committed to partnering with our educational providers to ensure that our staff meet their professional development goals.

Centennial of Prince County Hospital coming this summer

In July the Prince County Hospital (PCH) will celebrate 100 years of caring for Islanders.

A committee of staff and members of the PCH Foundation are meeting regularly to plan activities for the 100 days leading up to the official centennial on July 27. A broader committee that includes community partners also will be meeting to discuss ways to incorporate the anniversary into community events during the spring and summer months.

Health PEI looks forward to the opportunity to highlight the history of the hospital, staff, physicians, volunteers and



community, who together have contributed so much in the 100 years of service to the people of Prince Edward Island.

According to the book "This Caring Place: The History of Prince County Hospital and School of Nursing" by Wayne Wright and Katherine Dewar, the first

Prince County Hospital opened in Summerside on July 27, 1912 at the southwest corner of Central and Market streets – where the Valufoods and its parking lot exist today.

The property was donated by Thomas E. Ramsay, a miner who was "one of those bewhiskered veterans of the storied 1849 California Gold Rush" – according to the book – who had amassed a fortune excavating precious ores in the American Wild West.

The PCH moved into its current facility at 65 Roy Boates Ave. in April 2004.

Employee survey results improve

Overall staff satisfaction in the eight areas measured by the most recent Health PEI employee survey increased to 72 percent, up from 69 percent in 2009.

More than 30 percent of employees completed the survey, which measured staff satisfaction in eight different areas: job satisfaction, work environment, communication, team work, workload, training and development, supervision, and leadership. The average response to questions in the area of job satisfaction was 80 percent, consistent with past survey results.

"I am very pleased that we have been able to maintain and improve our employee satisfaction rate, especially with all the changes the health system has gone through over the past two years," said Keith Dewar, CEO of Health PEI. "This reflects the commitment of our dedicated staff and physicians to providing the safest, highest-quality care possible to Islanders."

Feedback from the 2009 survey resulted in the implementation of several initiatives, such as new policies focused on supporting staff, new training initiatives, the introduction of the Health Beat newsletter, and specific improvements within individual work units.

Results from the most recent survey are currently being distributed at work sites and shared with employees across Health PEI. Staff and physicians will review results, discuss progress that has been made and identify areas to focus efforts over the coming two years.

"We are committed to using the survey results and feedback obtained from discussions between managers and team members as a means to continue our on-going efforts to improve staff satisfaction," Dewar said.

Advertising process unified for government - including Health PEI

Communications PEI (CommsPEI), the division of Executive Council that coordinates all government communications, is now administering all paid advertising in local media.

Health PEI divisions will no longer need to manage their advertising placed in Island media outlets, including job ads. If an ad is planned for outside the province, the division remains responsible.

The first step is for the advertiser to contact Health PEI Communications with the proposed content and where the ad will be placed. The content then goes to Communications PEI Creative Services for design, returning a proof (for print ads) for final approval. Communications PEI will book the space with the media outlet and handle payment.

Health PEI will fund a single account that CommsPEI will administer to pay for the ads, sending us a monthly statement. Individual divisions can track their ad spending using the ad cost that appears on each proof.

More information is available on the Managers Resource Center at www.healthpei.ca/mrc under "Templates", or contact Brad Chatfield at bpchatfield@gov.pe.ca.

Send us your comments and story ideas!

If you have a story for us – or just an idea for one – e-mail us at bpchatfield@gov.pe.ca or phone us at 902-368-6135.

www.healthpei.ca