currents

Inside Island Health

Summer 2023



currents







IN THIS ISSUE...

- 3 MESSAGE FROM CEO, KATHY MACNEIL
- 4 ISLAND HEALTH SHINES AT QUALITY FORUM
- 8 OUTSTANDING CARE AT NRGH DURING RESPIRATORY SURGE
- 10 MEET ISLAND HEALTH'S FIRST ENVIRONMENTAL SCIENTIST
- 11 2023 BCCFP AWARDS RECOGNIZE THE WORK OF ISLAND HEALTH RESIDENTS

- 12 PUBLIC HEALTH NURSES IMMUNIZE AT PRIDE FOR THE FIRST TIME
- 13 SPH EMPLOYEE MAKES QUILT TO HONOUR CO-WORKERS
- 14 WESTSHORE TEENS HONOURED WITH YOUTH HARM REDUCTION AWARD
- 16 NANAIMO COMMUNITY ACCESS TEAM GETS WET TO SUPPORT CHILD DEVELOPMENT

- 17 FIRST POST-PANDEMIC STEP UP YOUTH PROGRAM A SUCCESS
- 18 SCENE AND HEARD: ISLAND HEALTH STAFF IN PICTURES
- 19 DR. ROUTLEDGE WINS RURAL SPECIALIST MERIT AWARD
- 20 SPECIAL FEATURE: WE ARE ISLAND HEALTH: COWICHAN DISTRICT HOSPITAL TEAM

Cover photo: Nanaimo Community Access Team member [LPN Karen Thompson (left), volunteer Lynette Hleck-Mcgrath (right) and admin assistant Tonja Henderson (back left)] have fun in the Nanaimo Harbour during the Silly Boat Regatta, in support of the Nanaimo Child Development Center. See their story on page 16. (photo credit: Greg Sakaki, Nanaimo Bulletin)

With great respect and humility, Island Health acknowledges the Coast Salish, Nuu-Chah-Nulth and Kwakwaka'wkaw cultural families; whose homelands we occupy. We also recognize the Inuit, the away from home urban Indigenous people, and the Metis chartered community. In making this acknowledgement, we commit to walk softly on this land and work to uphold the self-determination and health of Indigenous peoples and communities.





Summer is here and the warm sun is gracing us. In Island Health, our staff, medical staff, students and volunteers continue to shine brightly with unwavering passion for our shared work and the people we serve, despite the incredible challenges our teams face in meeting the needs of those who we are privileged to serve.

As you read through the summer edition of Currents, you'll learn about the people and teams making improvements in the delivery of health and care in Island Health. Quality is at the heart of the work we do every day. I was grateful to attend Quality Forum in Vancouver in June, where the Island Health team was well represented by staff and medical staff who shared their project solutions and knowledge to drive excellence in service delivery. These teams and their work are highlighted on pages 4-7.

Some of these stories are about lifting each other up. I was particularly touched to read a grandmother's appreciation for the care her young grandson received at Nanaimo Regional and Victoria General Hospitals during the respiratory surge. His care was supported by the proactive planning of the NRGH pediatric team, and their foresight helped the site maintain high-quality care, and ultimately save the child's life (page 8). I raise my hands in gratitude to both teams for providing culturally-safe care. I was also inspired to read about Carole-Anne Arndt, who shared her talents

to recognize her colleagues at Saanich Peninsula Hospital through a handmade quilt (page 13).

Several stories in this edition celebrate individuals who are making a difference. Read about Dr. Robin Routledge. who was recognized by his peers in rural medicine (page 19), two residents who were recognized by the BC College of Family Physicians for their passion for family medicine and social justice (page 11), and the trio of teens from Belmond Senior Secondary who received Island Health's Youth Harm Reduction Award for providing naloxone training to their peers (page 14). We also celebrate more teens in our Step up Youth Volunteer program (page 17), which offers youth ages 15-18 with valuable experience in the healthcare system.

The recent Cameron Lake wildfire impacted communities and our teams on the West Coast. It's a sober reminder of how climate change affects us all. I am so grateful to the emergency operations response teams for their extraordinary efforts to keep our services running. I'm also impressed by the commitment and dedication of our community, long-term care and acute care staff and medical staff who are experiencing daily impacts as restoration work continues on Highway 4. Sadly, climate change is not going away, but I am very pleased to have you meet our new Environmental Scientist, Kobby Awuah (page 10), who is helping us advance our organizationwide priorities to take action for the years ahead.

Summer is also a time of activity in our communities, and Island Health teams and individuals showed up to raise awareness and offer support. Read about our public health nurses who attended the Victoria Pride festival to offer mpox vaccines and distribute naloxone kits (page 12), and the Nanaimo Community Access Team who got wet to raise almost \$1,800 to support the Nanaimo Child Development Centre (page 16).

In this month's feature, We are Island Health (page 20), we learn more about the Cowichan District Hospital (CDH) team. Recently, the Board of Directors, senior leaders and I visited the Cowichan Valley and CDH, to engage with the public and connect with staff and medical staff. I was able to witness some of the daily operations at the hospital and it was inspiring to see a group of people who care so deeply about each other and their community. I appreciate them for sharing their lived experiences.

Reading the stories in this edition fills my heart with gratitude for the truly remarkable team members we have in the Island Health family. Thank you for showing up the way you do, and for your ongoing commitment to providing quality care to the people and communities we serve.

Kany Mackeil

ISLAND HEALTH SHINES AT QUALITY FORUM

The Quality Forum is an annual three-day conference, hosted by Health Quality BC, that brings together BC's healthcare community to learn new strategies and discuss opportunities and challenges. At this year's Forum, Island Health was well represented by staff and medical staff – all interested in sharing their quality improvement ideas, findings and experiences. The following are some of the topics shared.



CARDIOVASCULAR SCREENING AT GORGE ROAD UPCC

Hypertension and diabetes can often develop with no noticeable symptoms. Without proper screening, diagnoses may occur only when there is already damage to vital organs. This not only affects quality of life for the patient, but it puts additional strain on a resource-limited healthcare system.

Urgent Primary Care Centres (UPCCs) in BC serve as crucial facilities for providing urgent care to residents, but their role in preventive care is not clearly defined. Currently, a staggering 70 percent of patients seen at the Gorge UPCC (GUPCC) do not have a primary care nurse practitioner or doctor. In an effort to address this gap,

the GUPCC initiated a quality improvement project to offer cardiovascular screening as an additional service for individuals aged 40+ with no regular access to primary care, while seeking help for other reasons.

As part of this project, qualified people are offered cardiovascular screening based on established guidelines. With patient consent, a nurse conducts the screening, which involves assessing risk factors and performing measurements such as blood pressure and weight using a co-created checklist.

Should the screening indicate a positive result, the patient will undergo further assessment and bloodwork.

A follow-up appointment with the nurse (and physician if needed) will be scheduled to discuss results, receive education and talk next steps. To enhance self-management by the patient, the project makes use of existing programs, such as Island Health's virtual community care and diabetes education.

There was much interest in this work at the Quality Forum, and enthusiasm among nursing staff during a recent education session. And, so far, the feedback from patients has been positive. We're excited to see where this work to providing enhanced care and promote preventive measures will go!



Primary Care Team L-R: Dr. Tia Pham, GUPCC; Elizabeth McGrath, Manager DVUPCC; Johanna Bagabuyo, Program Coordinator DVUPCC; Dr. Daisy Dulay, Cardiologist and Medical Director of Patient Safety and Quality, and Amber Hay, Director SI UPCC Optimization

"To excel in the provision of high quality healthcare, we must innovate and grow. I'm so proud of the way Island Health showed up and the ideas and enthusiasm shared by our people." ~ CEO Kathy MacNeil

HIGH VALUE CONVERSATIONS: I OW VALUE CARE

In a breakout session, Dr. Adele Harrison and Director Jennie Aitken, from the Medical & Academic Affairs team, led a discussion around appropriateness – care that is specific to a person's or community's context and the benefits and risks of interventions to prevent the overuse or underuse of treatments and services.

Participants worked together to identify factors that contribute to the prevalence of unnecessary tests and treatments, examined the influence of personal narratives, and developed critical insights to conduct high value conversations from the perspective of both patient and provider.



Dr. Adele Harrison

COWICHAN VALLEY QUALITY IMPROVEMENT

The Cowichan team was on hand to highlight the great QI work happening across the Cowichan Valley.

Psychiatrist Dr. Rachel Grimminck, CDH Emergency CNE Terra Lee, and QI Manager Brenda Aguiar, presented Reducing Coercive Care in Emergency Psychiatry – a project with two aims: 1) to decrease the length of stay in seclusion within the ED at CDH, and 2) to improve care provider knowledge of seclusion guidelines and principles. Notably, this project was highlighted by Health Quality BC in their annual Patient Voices Report as exemplifying patient voices in quality improvement.

Cowichan Health & Care Plan (CHCP) Director Donna Jouan-Tapp and Brenda Aguiar presented the Cowichan Health and Care Plan: A Community-Based Initiative to Enhance System-Wide Flow. This project was the national winner

of the 3M award for improvement across a health system in 2022 and generated a lot of provincial interest because of its impact on reducing acute care occupancy at CDH.

A separate poster presentation, co-authored by ED Physician Dr. Ava Butler, Terra Lee, and Med Student Liam Raudaschl, focused on reducing the time it takes to obtain the equipment needed for difficult airway management in the ED. During the project, the average time it took physicians and nurses to obtain this critical equipment decreased from 319 seconds to 63 seconds! Change ideas included the development of a shared mental model for difficult airway management, a new colour coded airway cart in the ED and simulations in the department to assess the changes and for implementation.



L-R: Terra Lee, Dr. Rachel Grimminck and Brenda Aguiar



L-R: Brenda Aguiar and Donna Jouan-Tapp



L-R: Terra Lee and Dr. Ava Butler

currents



Dr. Celia Culley (left), and Dr. Valeria Stoynova (right) connect with CEO Kathy MacNeil (centre) at the Quality Forum.

THE CRITICAL AIR PROJECT AND SUSTAINABLE INHALER PRACTICE

2021 set a record for climate disasters in B.C. The province experienced a heat dome, forest fires and extreme flooding. These events caused havoc to communities, led to severe health impacts for people and provided a grim reminder that climate change is the single biggest threat of the 21st century. This year, B.C. is experiencing a record-breaking forest fire season, leading to poor air quality, amongst other negative health effects.

Dr. Valeria Stoynova, an internal medicine physician, and Dr. Celia Culley, a clinical coordinator of Pharmacy at Royal Jubilee Hospital, recognized they were in a unique position as healthcare professionals. On one hand, they are familiar with the health consequences of forest fires and poor air quality, including heart attacks and strokes. On the other hand, the healthcare sector is a key contributor to Canada's

greenhouse gas emissions. Canada's healthcare system is responsible for 33 million tonnes of CO2 equivalents yearly, or 4.6% of the national total.

When researching attainable, highimpact initiatives to lower greenhouse gas emissions within hospital settings, Stoynova and Culley noted some healthcare-related emissions relate exclusively to medications. Metereddose inhalers warrant special mention as they are particularly carbon intensive to manufacture, use and dispose of. The inhalers contain a potent greenhouse gas called hydrofluoroalkane, which is released every time the canister is pushed. A single B.C. health authority's inhaler use is equivalent to driving a gas-powered car around the earth's circumference 979 times.

While confronting hard truths about health-care related greenhouse gas emissions, Stoynova and Culley are not challenging the necessity of inhalers for patients. Instead, they are targeting duplicate or unnecessary dispensing of inhalers to promote quality patient care and decrease carbon emissions. They are also calling for better access to diagnostic testing to confirm accurate respirology diagnosis, and for consideration of alternative inhalers with low carbon impact.

But reducing the carbon impact of metered-dosage inhalers is not the sole responsibility of prescribers. Stoynova and Culley note that dispensing logistics play a critical role in waste reduction. Several stakeholders, from nurses to porters to waste managers and pharmacy members, are involved in the 'inhaler pathway' to patients. Inhalers can be misplaced or mislabeled, which can result in the distribution of multiple identical inhalers for a single patient.



Patient education of correct inhaler usage and disposal also requires a spotlight. Many people are unaware that inhalers should be returned to pharmacy for safe disposal, and the 40 percent of people who do return their inhalers to a pharmacy do so when there is still medication in them.

The doctors emphasize that no one should feel badly about needing an inhaler – including a metered-dose inhaler – for their health. Excellent respiratory disease management will always be better for patient health and will ultimately have a lower carbon footprint than an exacerbation of respiratory disease.

Culley and Stoynova have turned their research into action by developing a robust programme of sustainable inhaler practices in the inpatient care setting, and it is gaining momentum.

Last year, their work was selected as a national innovation in partnership with Creating a Sustainable Canadian Health System in a Climate Crisis (CASCADES), who supported the duo in creating a 'playbook' of their work so sustainable practices can be shared across Canada. Healthcare authorities in Ottawa, Halifax and Toronto are already looking to adopt sustainable practices outlined by Stoynova and Culley, which is a testament to the great strides that the duo have made at a local level.

By sharing their work and findings at the Quality Forum in June, they let their provincial healthcare colleagues know that change is within reach: each individual health care provider can make a difference.

View the playbook at the CASCADES Canada website: <u>Climate Conscious Inhaler</u> Practices in Inpatient Care Playbook

BUILDING TEAM-BASED CARE FROM THE GROUND UP

When the Downtown Victoria Urgent Primary Care Centre (DVUPCC) opened in July 2021, the staff and medical staff were clear on the purpose of the new clinic – to increase access to primary care services – but a problem remained: How do you create and embed a team-based care culture into a group of people who are not only new to each other but are learning how to deliver trauma-informed, culturally safe primary care?

This was the topic shared by DVUPCC Manager Elizabeth McGrath, RN Julie Grant, and Social Worker Davana Harlow, who shared their experiences and advantages of "new team energy."

So how did they do it? Together, with the support of leadership and utilizing change management fundamentals, the team developed a clear vision; established weekly meetings to discuss process changes, and included input from all staff to support engagement and group decision making. There were staff surveys, team-building activities and genuine interest from all team members. Individuals were also encouraged to work on special projects supporting low-barrier care.

Since opening, there has been zero turnover in nursing staff, regular enquiries from physicians seeking employment, and recognition from an Accreditation Canada Surveyor.

"When the clinic first opened, we had to temporarily adjust our expectation of what team-based care culture is, to ensure we built trust in leadership and among each other. This was crucial to making it work," said Elizabeth McGrath. "Believing in the team and having patience was essential in our journey towards trust." Δ



OUTSTANDING CARE AT NRGH DURING RESPIRATORY SURGE





Team NRGH during a workshop for difficult airway simulation for pediatrics

Last fall, cases of a severe respiratory syncytial virus (RSV) impacted pediatric intensive care units across Canada, BC and Island Health. Nanaimo Regional General Hospital (NRGH) battled its own pediatric respiratory surge while also dealing with staff shortages. Several critically ill children with croup and asthma were brought to the Emergency Department (ED) by worried parents to seek treatment.

This influx of critically ill children sparked an unprecedented flurry of education, simulations and interdepartmental collaboration at NRGH that resulted in exceptional patient care and improved surge plans that have since been shared regionally.

PLANNING AHEAD TO MEET CHALLENGES

NRGH's proactive planning for staff shortages in pediatrics helped the site maintain high-quality care. The pediatric nursing team worked closely with staffing to adjust scheduling and found creative ways to fill baseline shifts, including saving their floats for short call and booking workload nurses to fill weekend and call shifts.

The NRGH team engaged physicians, obstetricians and midwives to support pediatricians where possible, including for deliveries, and ensured that the Neonatal Resuscitation Program was up-to-date to ease pediatricians' workloads. Several NRGH nurses had also enrolled in Pediatric Acute Life Support (PALS) training. Two on-site members of staff were certified PALS instructors, which enabled many staff to complete training during the surge.

To reduce pressure on the ED, the team collaborated on how to safely transition pediatric patients from trauma to pediatrics. Remarkably, during this time, wait times in the ED actually decreased.

The team was resourceful and created contingency plans that allowed the adult intensive care unit to treat patients aged 15+, with a pediatrics consult, to maximize the number of patients seen. They also identified additional spaces to care for critically ill patients during patient backlog, while carefully identifying safe pathways for escalations. Many neonatal intensive care unit (NICU) staff were cross-trained in pediatrics so that some could provide direct patient care during the surge, with other NICU nursing staff supported peripherally. The pediatric outpatient clinic also supported heavily during the surge with space and nursing staff.

Despite the constant steam of sick patients and system pressures, NRGH provided exceptional clinical care with unwavering compassion. Staff took the time and care to effectively communicate with patients and their families, providing reassurance and addressing their anxiety.

BILLY'S STORY

One case highlights the value of the work NRGH took on before and during the respiratory surge. Billy, an Indigenous infant, was brought to NRGH with laryngotracheomalacia and was intubated in the trauma room for severe croup. He stayed at NRGH for over 12 hours and was eventually routed to the Victoria General Hospital, where he recovered without complications.

Billy's recovery was a result of exemplary collaboration and collegiality amongst the staff at NRGH. Multiple teams, including pediatrics, ED, anesthesia and adult critical care, worked together to provide the safest clinical path for Billy in challenging circumstances. He had a difficult airway and was treated by ear, nose and throat specialists, and by NRGH anesthesiologist Dr. Sarah Hall, who was leading interdepartmental workshops on difficult airway simulation for the pediatrics team. She had developed difficult airway carts that were deployed on both the pediatrics and ED wings prior to Billy's arrival.

Connie Paul is Billy's grandmother, a registered nurse, and nursing and community support manager for Snuneymuxw Hulit Lelum Health Centre. She expressed her gratitude for the quality care that Billy received, noting, "So often I hear the negative feedback. We were consulted as a family. Our anxiety was addressed. All of our questions were answered. From the moment [Billy] arrived in ER to discharge planning, our family could not have been treated better." Δ

IT'S OKAY SON I'VE GOT YOU

"Everyone saved his life. I wrote this poem on December 23, 2022, the day Billy started to get better and was no longer in the woods."

~ Grandma Teltitelwet (Connie Paul), Snuneymuxw First Nation

As I listened to his mother coo.

To my knees as I listened to his respirations. Suddenly becoming our desperation.

Our chubby, smiley boy struggles to breath in air.

That's all I care.

It is not the fancy gifts that money can buy.

Trust me, it's the family tie.

Bill [grandpa] stood on the other side of the glass wall.

As we watched the doctors and nurses answer their call.

Bill wiped away his tears.

Looking away to hide his fears.

Just like him to be mad.

His way of hiding sad.

I can't sleep. I can't think. I can't feel. I can't taste.

All I know is that I can pace.

I can pray. I can stay.

Hold the ground, as I make no sound.

Listen for the distant steps to walk, then they talk.

Please, Please, Please,

For morsels of better news.

You are our little light.

May our love help you fight.

You are strong.

You have a powerful song.

Hold your Sullea [spirit] inside your chest.

Close your eyes now grandson and rest.

My prayer, a desperate plea.

Not him. Not him. Not him.

I am old, I have lived, I have loved.

Just not him.

Take anything from me, just not him.

Ancestors... ancestors. Did you hear me?

Suddenly walking in the snow and wind.

I could hear my ancestors say, Don't fear, he is clear.

Dad, I can feel you near.

Now I can set up our Christmas tree tonight.

Thank you grandson for all your might.

As I slowly exhale my fear, I did this with many a tear.

Grateful. Thankful. Humbled.



BORING? OUR FIRST ENVIRONMENTAL SCIENTIST SAYS THE JOB IS ANYTHING BUT



Kobby Awuah

Kobby Awuah's consulting colleagues warned him that he'd be bored working at Island Health at a "government job."

But the health authority's first ever environmental scientist wasn't worried. "On my first day on the job in May, I had ten items on my desk to do already."

Since joining Island Health Kobby has been collaborating on projects like a fuel spill, groundwater contamination and an industrial fire. Coming from consulting, working for private companies in gold mining and oil and gas, he's excited to put his knowledge and experience to use for the public good.

"My new role as environmental health scientist at Island Health focuses on people and trying to best prevent the impacts of chemicals on peoples' health. With this role, I actually get to help make meaningful and long-lasting impacts in the community that I live in."

The environmental health scientist role provides technical and scientific support in spill response, human health risk assessments, emergency response and contaminant reviews.

In his role, Kobby works closely with Health Protection, medical health officers, environmental health officers, and multiple community partners and the public.

Says Gethsemane Luttrell, Director, Public Health Protection & Healthy Communities, "When there is a fuel spill in the marine environment, for example, we get questions from the community about whether it's safe to continue to do traditional fishing, or walk on the beach," she said. "With the voice of the community becoming stronger and environmental awareness growing, climate change, and changes in industries like fishing and float planes, having an environmental scientist like Kobby gives us an in-house expert who can collaborate on community-driven approaches to inform decisions based on risks to public health. It's exciting to have, to help empower ourselves and the communities, and to do the work together in partnership."

Cole Diplock, Regional Manager of Environmental Public Health agrees, "Kobby has a PhD, with a background in toxicology. Having his specific "I've also been exposed to a lot of different environmental situations, basically influenced by the climate differences in these areas. I am really excited to be making a difference in the health of the public in this critical role."

~ Kobby Awuah Environmental Scientist

scientific lens and his expertise to review and support in technical and often high-risk situations is hugely valuable."

From growing up in Ghana to getting his master's in Minnesota and doctorate in Saskatchewan, with career stops in Saskatoon, North Dakota, and Vancouver, Kobby believes his varied background will be particularly helpful in this new position.

"I've been exposed to a lot of people from diverse backgrounds, different social economic classes, different levels of education, different professions. And then I've also been exposed to a lot of different environmental situations, basically influenced by the climate differences in these areas. I am really excited to be making a difference in the health of the public in this critical role." Δ

2023 BCCFP AWARDS RECOGNIZE THE WORK OF ISLAND HEALTH RESIDENTS







Dr. Arielle Roberts

Recipients of this year's BC College of Family Physicians (BCCFP) awards are graduates of Vancouver Island programs!

The BC College of Family Physicians' (BCCFP) \$1,500 Dr. Manoo and Jean Gurjar Award is awarded to two resident physicians in the UBC Family Practice Residency Program, and recognizes residents who are passionate about relationship-based family medicine and social justice.

We are happy to share that two of our family medicine residents, Dr. Arielle Roberts of Campbell River and Dr. Nique Seper of Cowichan, have received this special accolade for their passion and advocacy of family medicine.

Dr. Dominque (Nique) Seper was the Co-Site Lead Resident of UBC's Indigenous Family Practice Residency Program and is a tireless advocate for Indigenous rights and social justice.

Dr. Seper grew up on Treaty 7 territory and is a member of the Métis Nation of Alberta Region 3 in Cochrane, Alberta. After completing a Bachelor of Science in Biological Sciences at the University of Calgary, she completed medical school on Treaty 4 and 6 territory at the University of Saskatchewan. During her residency, she was based in the Cowichan Valley and did outreach family medicine clinics for Penelakut Tribes.

Dr. Seper is recognized for her ability to deliver trauma- and culturally-informed practices in her work and is a highly respected member of her community. She has just completed her residency, and has started working in the Cowichan Valley as a family physician, and will also be working in rural Indigenous communities in B.C.

Dr. Arielle Roberts was a family medicine resident of the UBC Strathcona site, situated on the unceded territory of the Ligwilda'xw Peoples, also known as Campbell River. Dr. Roberts is passionate about family medicine and is a tireless advocate for both her patients and peers.

While she was a medical student in the UBC Island Medical Program, Dr. Roberts was the chair of the Family Medicine Interest Group and served as a respected student affairs representative. She did her third year integrated clerkship year in the Cowichan Valley, and received a family medicine scholarship in recognition of the work that she led to support community members and family physicians during the early days of the pandemic.

One of her nominators stated that "[her] commitment to resident resilience and wellness extends to her longstanding and ongoing research pursuits in the area of exercise." Dr. Roberts intends to practicing rural longitudinal family medicine. Δ

PUBLIC HEALTH NURSES IMMUNIZE AT PRIDE FOR THE FIRST TIME



Eddie Dewitt (left) and Leanna Bakker, Public Health Nurses

For the first time. Island Health's Public Health team provided on-the-scene immunizations at the at the Pride festival in Victoria.

Public Health nurses Eddie Dewitt and Leanna Bakker were set up at a booth with vaccine for mpox - and naloxone kits to share. In total they immunized 40 people against mpox, a viral disease that causes skin lesions, fever, aches, low energy, swollen glands and inflammation.

Mpox spreads through close, personal, often skin-to-skin contact. Since early May 2022, cases of mpox have been reported in many countries where the virus does not normally spread. Cases have been identified in Canada. As of June 27, 2023 there have been seven cases in Island Health since it was first detected in July 2022.

WHO IS ELIGIBLE

Care providers should consider offering the IMVAMUNE (mpox) vaccine to eligible clients/patients:

- Two-spirit people, transgender people or cisgender males who also self-identify as belonging to the gay, bisexual and other MSM communities, and at least one of the following:
 - > Have had sex with more than one partner
 - > Have had sex with a partner who has more than one partner
 - Have had casual sex (e.g. cruising)
 - > Engage in sex work either as a worker or a client

More information:

- Island Health MP Vaccine **Appointment Booking**
- The latest info including case numbers, **BCCDC**

THE SECOND DOSE

Anyone who received a first dose of IMVAMUNE and meets the current mpox vaccine eligibility criteria is encouraged to receive a second dose.

- The National Advisory Committee on Immunization (NACI) recommends a complete vaccine series of two doses of IMVAMUNE vaccine for stronger and longer lasting protection against mpox infection. Find more information on second doses.
- It's been longer than 28 days since first dose of vaccine.
- People who have had an mpox infection do not require a vaccine. Prior infection from mpox is expected to provide immunity against future infections.
- Individuals experiencing symptoms of mpox should not attend a clinic to receive the mpox vaccine. Use the Smart Sex Resource site to find clinics to get tested. Δ

currents

SAANICH HOSPITAL EMPLOYEE MAKES QUILT THAT HONOURS HER CO-WORKERS



Carole-Anne Arndt, left, and unit clerk Helen McColl hold the quilt Arndt put together from scraps of leftover surgical hat material

A health-care worker spent two years fabricating a quilt from scraps of pandemic scrub hats, with each square representing a colleague at Saanich Peninsula Hospital.

When the COVID-19 pandemic hit, the hospital suffered from a shortage of scrub hats. Carole-Anne Arndt, 64, who started sewing 10 years ago, took it upon herself to buy fabric and sew about 50 hats for all the nurses and support staff at the hospital. But instead of generic pieces of clothing, she took the time to choose fabrics to reflect her co-workers' traits and hobbies, making each of them unique.

Then, she salvaged the leftover scraps to create a queen-sized quilt.

"It kept getting larger and larger. Some days, I thought this project would never end," said Arndt, a unit clerk in the emergency department.

The quilt, embroidered with hearts and ECG waves, is made up of squares that represent each co-worker she made a hat for and a reminder of their collective struggle through the pandemic.

"We are a very close-knit unit but we are always short staffed and most of us work a lot of overtime. I took on this project as a way to keep me sane," said Arndt, who started quilting three years ago. "I have always admired quilts and found the time to make my own."

Although this was a first attempt at quilting, she is well-known around the hospital for turning up in colourful, one-of-a-kind custom medical scrubs (sanitary clothing) and matching hats, with about 15 outfits in her closet.

"This time around I wanted to do something positive to honour my friends and coworkers," said Arndt, who has worked at the hospital since 2013.

She is unsure on her plans for the quilt and is considering holding a raffle or auctioning it so the money can buy equipment to make life easier for her co-workers.

"I would use the money to buy a \$150 paper laminator, a \$30 to \$40 label maker and a couple of chairs for the unit," she said. "Right now, the night shift staff borrows equipment from the OR when they are not there."

The laminator would be put to good use because almost every piece of paper that remains in the unit must be laminated as all surfaces are wiped down every day.

Although Arndt's co-workers knew of her sewing skills, they didn't know of the existence of the queen-sized quilt until it was completed – but they weren't surprised that she would give it away.

"That's just like Carole," said Helen McColl, who occasionally works alongside Arndt in the emergency room.

"She's always working on something and she is always generous with her time. She is always pitching in to help.

"She leads a crazy life at home but, here she is again, spending two years creating something – with the end goal of bettering the lives of her work family. Who does that?" Δ

~ Shared with permission of the <u>Times</u> <u>Colonist</u> (April 2). Photo: Darren Stone

UPDATE: Director Jessica Johnson ordered the SPH ED new chairs, a nice laminator and a deluxe label maker. What happens with the quilt is still being discussed.

WESTSHORE TEENS HONOURED WITH YOUTH HARM REDUCTION AWARD

A Youth Action Team in the south island that promotes harm reduction education and training at Belmont Secondary School has been recognized by Island Health for its innovation and dedication. This year's Youth Harm Reduction Award was given to teen team members Jaden Lee, Kai Lessard, Samantha Paluch and Matthew O'Connell.

"Wellness promotion, education and prevention can stop small problems from becoming bigger down the road, while harm reduction measures can save lives, reduce the risk of toxic drug poisonings and connect people to lifesaving supports," says Jennifer Whiteside, Minister of Mental Health and Addictions. "Congratulations to the winners of the Youth Harm Reduction Award! The leadership you've demonstrated will go a long way in helping your peers access the supports and help us tackle the toxic drug crisis."

"We're thrilled to offer this award to these Belmont Secondary students for their tremendous dedication, creativity and work to offer their peers naloxone training and harm reduction education," says Jessica Huston, Manager of Substance Use and Harm Reduction at Island Health. "The momentum of this Youth Action Team continues to have a positive ripple effect, including interest from other school districts for their training."

In spring 2022, the Youth Action Team surveyed 155 Belmont Secondary students as part of a naloxone training event. The aim was to explore their peers' awareness of substance use, and to find out what they needed to further harm reduction efforts.

"It was really surprising for us to know that lots of people felt like the community needed more education regarding substance use," says Jaden Lee, one of the winning youth. "And many didn't know where to access the resources." As a result of their findings, Island Health and Belmont Secondary administrators have developed a plan to help teachers deliver substance use education this fall.

"Substance use should be talked about more, especially to young folks. It's important to know these things," adds fellow award winner Samantha Paluch. "There will always be people affected by drugs and opioids, and if they are going to take them they should at least know how to do it safely."

The team also produced a short video highlighting the project that has been shared with staff from School District 62 and community partners. Using supportive data from the video, the school district was successful in obtaining federal funding to incorporate substance use education into the curriculum.

The Youth Action Team continues to advance its efforts - in May 2023, it held naloxone training days at three secondary schools, including a followup session at Belmont Secondary.

Island Health's annual Youth Harm Reduction Award is open to people under age 19, who live in the Island Health region. Projects focused on public health harm reduction in their communities are eligible. Applications are reviewed each March, with the recipient(s) announced in June.

Harm reduction aims to reduce negative health, social and legal impacts associated with a range of activities. Widely accepted harm reduction practices include the use of seatbelts and bike helmets, condoms, speed limits and sunscreen. With regards to the toxic drug crisis, harm reduction often refers to safer ways to consume substances, safer substance use supplies and the use of naloxone to reduce the effects of drug poisonings from opioids. Δ



Left to right: Jaden Lee, Matthew O'Connell and Samantha Paluch (missing: Kai Lessard)

QUICK TIPS FOR TALKING TO YOUTH ABOUT DRUGS

Educate yourself so you can discuss. If you don't know the answers, offer to find them together.

Be a good listener. Give kids room to participate and ask questions. Respect their opinions.

Stick to the facts. Don't preach, scare and exaggerate. These tactics don't work and may lead to a loss of trust.

Look for natural opportunities to discuss substance use and decision-making, including stories in the news and social media.

Be open and respectful. Ask about what they're hearing, seeing or have learned. Talk about why people use substances and potential consequences.

Focus on your concerns for their safety and a deep regard for their wellness. Avoid stigmatizing language.

THE THREE C'S OF CONVERSATION

Connect to the present. Focus on your five senses to bring yourself into the present - what do I see, hear, smell, feel, taste?

Connect to your body. Take a few deep breaths, feel your toes and the balls of your feet on the ground, touch your hands together; all will help keep you calm.

Connect to the individual. Visualize how you want to look and sound before starting to talk.

Learn more about how to have conversations about substance use at: www.stopoverdose.gov.bc.ca

NANAIMO COMMUNITY ACCESS TEAM TAKES TO THE SEA TO SUPPORT CHILD DEVELOPMENT



On July 16, 2023 Island Health's Community Access Team in Nanaimo participated in a fun community fundraising event to support the Nanaimo Child Development Centre, a non-profit organization that's been integral to Central Island since 1967.

The small but mighty team of 25 in Nanaimo was the top Corporate Sponsor at the event, raising \$1,798 in the Silly Boat Regatta.

The "Boats and Pros" team was organized by Community Health Coordinator Terry Pippy as a team-building exercise, with support from local leaders Jody Huml, Janine Kupiak, Jill Fisher, Kitty Minions and an amazing team of staff and family members.

"We didn't come in first, however we didn't sink so that is a win," said Jillian Fisher, Manager of Community Access Teams in Victoria, Nanaimo and Comox. "I can tell you the harbour water tasted terrible, but it was fun and we'll be back!"

Island Health's Community Access Teams act as the central access point for all referrals for clients needing community health services. Combined the teams process 28,000+ referrals per year, connecting clients to services on the Island and keeping them out of acute care for as long as possible. Learn more here.

Congratulations to all the participants - paddlers, kickers, builders and decorators. It takes a... Community! Δ









Top to bottom: Terry Pippy; Boats & Pros team; Building the 'boat';
Terry and Tonja Henderson (left); and Paul Arnold.

FIRST POST-PANDEMIC STEP UP YOUTH PROGRAM A SUCCESS

After a successful first year back after the pandemic hiatus, the 2022-23 Step Up Youth volunteer program has wrapped!

In Fall 2022, 209 volunteers supported eight different acute care hospitals and long-term care sites from Victoria to Port Hardy. Clad in navy-blue uniforms, bright red lanyards and smiles, volunteers spent their time visiting with patients and residents, helping with activities, playing games, decorating, playing music, providing meal time support and learning about the many careers in healthcare.

Volunteers showed incredible courage and initiative re-entering our health-care landscape amidst ongoing uncertainty. Thank you to all the staff who have supported and encouraged our youth volunteers over the past seven months.

The youth volunteers' time in person has demonstrated that young volunteers are a valued part of our health and care team at Island Health, and have shown that the Step Up Youth program is a valuable recruitment and retention initiative. When surveyed, 92% of Step Up Youth Volunteers indicated they were interested in pursuing a career in healthcare.

From September 2022 to April 2023, Step Up Youth volunteers visited with over 5,600 patients and residents, provided 23 hours of musical entertainment, and helped with 34.5 hours of activities for residents in long-term care. Volunteers' time spent visiting with patients and residents is cherished by family and staff alike.

The Youth volunteers not only spent time volunteering in person, but also

met online monthly to connect with guest speakers in the healthcare industry. This year they learned from Island Health physicians, nurses, medical imaging technologists, and communications professionals. They also heard from our Human Resources team about student jobs and entrylevel careers after high school.

The Step Up Youth program (SUYP) was created to help grow the next generation of healthcare workers by providing opportunity for youth aged 15 - 18 to gain experience in the healthcare system through learning modules, guest speakers, and active participation in volunteer roles.

The three tenets of the SUYP are:

- Step up and C.A.R.E.,
- Step up and Learn, and
- Step up and Lead.

Victoria-based volunteer Tanvi says her favourite part about volunteering with the Step Up Youth program is, "...the meaningful and diverse interactions I make! From dropping off a card and having a conversation, to keeping a patient company, to making friends with other volunteers during our team huddles, Step Up Youth has been an amazing experience."

NRGH Step Up Youth Volunteer Team Leader Jasmine also emphasized how much she enjoyed the social aspect of the role. "Volunteering with older residents at Dufferin and patients at NRGH has taught me new ways to hold conversations," she commented. "I especially enjoyed hearing their excitement about getting discharged!"

Many know that volunteering is a fantastic way to give back to others, but often don't realize just how much one



can gain from the experience as well. Summit Volunteer Team Leader Madison said, "Talking with the residents at Summit long-term care leaves me feeling very comforted and it helps alleviate my school stress. I love that every resident has a different story to tell, and it widens my understanding of individuals and of the world."

Most volunteers also reported that they felt more confident and compassionate by the end of the program, with many reporting their social skills had also improved.

Volunteer Resources & Engagement is expanding the program to four new locations: Campbell River Hospital, Tofino General Hospital, Ladysmith Community Health Centre, and Victoria General Hospital. This brings the total locations to 12 Island Health facilities where local youth have the opportunity to impact the lives of patients and residents.

For more information about the Step Up Youth program, visit: <u>www.island-health.ca/step-up-youth</u>. Δ

currents

SCENE AND HEARD: THE FACES OF ISLAND HEALTH



L-R: Nanaimo's Community Oncology team fly in to support Port Alberni patients - Dr. Bruce Robinson, Dari Bennet, Janice Lillywhite & Megan Dives



Campbell River Hospital crew share their Pride



L-R: Clinical Research team's Sethany Vorng & Linh Vu



L-R: Victoria's Palliative Outreach team's Kate Leahy & Robyn Kyle





L-R: BMO incident responders Jackie Demmy, Shuen King, Al Hayashi, Beth Romeril, Robyne Maxwell, Damian Pellew (GVERT), Cathy Edwards, Jolene Milkowski, Dennis Kim & Mark Vu

L-R: MHSU Recovery/Support Workers Kendra Cyr, Nadeen Jones, Kelsie Zelizney,



L-R: North Vancouver Island's Juliet Bullock & David Grainger



Jennet Bohlin, Josefina Mabilangan, Krizia

Tumambing & Efren Pagaoa

DR. ROUTLEDGE WINS RURAL SPECIALIST MERIT AWARD

Duncan's Dr. Robin Routledge was recently honoured with the Rural Specialist Merit Award from The Society of Rural Physicians of Canada.

This annual award, which has been bestowed on small community doctors for the past 30 years, recognizes the invaluable contributions of individuals and organizations in advancing rural medicine in Canada. After being nominated by a colleague this past fall, and careful consideration, the SRPC nominations and award committee announced that Routledge was one of this year's award winners during the society's 30th Annual Rural and Remote Medicine course.

"It felt unreal at first, then embarrassing, like undeserved with so many others more worthy. Then I accepted the process because I was not the motor driving this," said Routledge. "I realized this is an award to my community and physicians like me."

"I hope that local doctors, and health-care workers realize that we are part of something larger and that we are not forgotten, and can be noticed," said Routledge as he accepted his award at an event in Niagara Falls, Ont. "Also, and importantly, that there is such a thing as the SRPC and that it can touch us, as well as us touch it."

For the last 40 years, Routlege has been serving as a psychiatrist in the traditional, unceded territory of the Cowichan Tribes in Duncan. Over the course of his career he has both worked and played in the rural community providing care and improved mental health to some of the community's most vulnerable members out of the Cowichan Lodge Tertiary Mental



Dr. Robin Routledge

Health Facility, providing team-based mental health care as a community psychiatrist.

Throughout his own medical journey, he has mentored generations of medical learners, rural generalists and rural specialists across the Cowichan Valley. He has championed mental health and primary care in numerous leadership roles within Island Health, the Cowichan District Medical Society and Cowichan District Hospital Medical Staff Association, Doctors of B.C. and the Rural Coordination Center of BC.

"In 1989 I was the only practicing psychiatrist in Cowichan and realized I could not survive without the committed support of the other physicians. That's when I realized that my survival depended on my commitment to them," said Routledge. "This is a truly significant reward from a very large number of incredible people who have too much to do, but did this. The choice of me is amazing, the acknowledgement at the presentation was a powerful endorsement of that choice." Δ

Shared with permission of the <u>Cowichan</u> <u>Valley Citizen</u>.



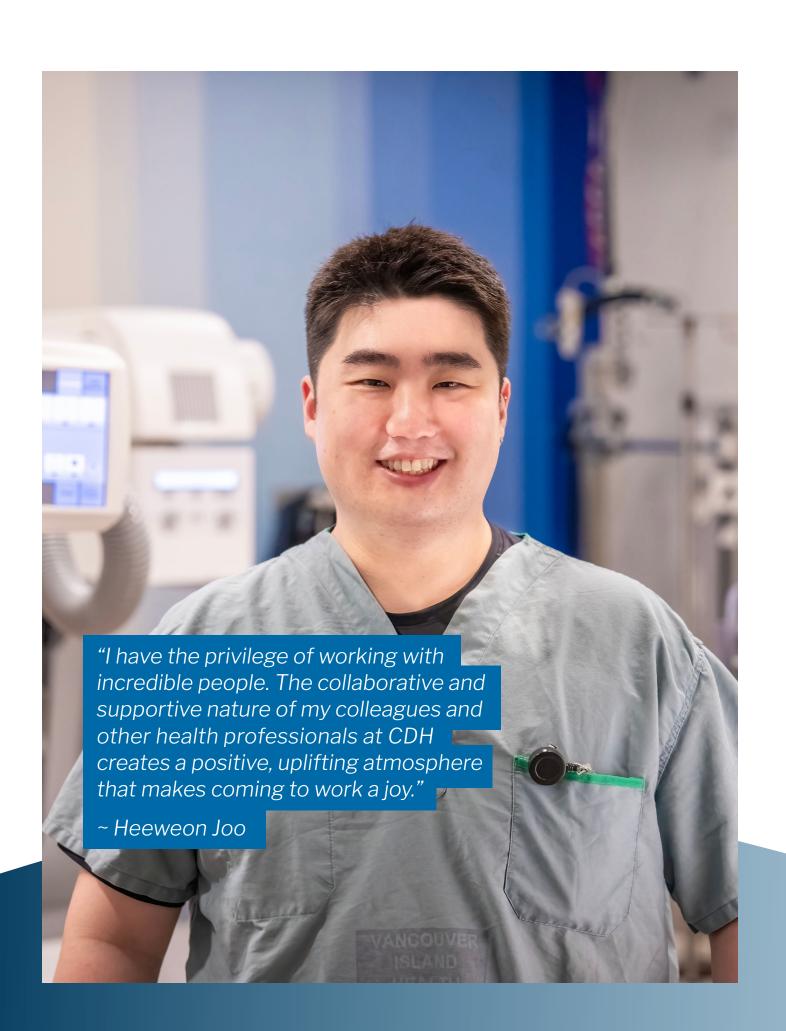




Island Health provides health and care services on the traditional territories of the Coast Salish, Nuu-chah-nulth, and Kwakawaka'wakw cultural families. The Cowichan District Hospital is located on the occupied territories of Cowichan Tribes. We acknowledge all Cowichan Valley Indigenous communities: Cowichan Tribes, Malahat, Ts'uubaa-asatx, Ditidaht, Lyackson, Penelukut / Stzuminus, Halalt, and the Métis community, whom we have the honour of serving and working in partnership with.



Cover: CDH Restorative Health Services . These pages: CDH Facilities, Maintenance & Operations Team.



Heeweon & Ida

MEDICAL IMAGING

Radiological technologist Heeweon Joo is originally from South Korea and moved to Canada where he initially worked as a teacher. "I always wanted to work in healthcare, and applied to become a medical radiation technologist (MRT) as soon as I received permanent resident status," he said.

Since joining the CDH team in 2022, Heeweon has gained valuable experience in conducting diagnostic imaging procedures. He is also trained in computed tomography and has served as a clinical instructor, sharing his knowledge and skills with aspiring technologists.

"I immigrated to Canada from Belfast when I was 18," said registration clerk Ida Llewellen. "Once I saw the mountains, I knew this was to be my home,"

Ida began her career in medical imaging at CDH in 2009 and feels blessed to work with great people, many of whom will be friends forever, long after retirement.

"Healthcare can be a complicated career and requires commitment on many levels, but the rewards are endless," Ida adds. "I am constantly impressed at the efforts staff make to accommodate urgent appointments for many of our patients, while they navigate their own personal lives. We are so fortunate to have this team of truly committed staff."



Ida Llewellen

Becky

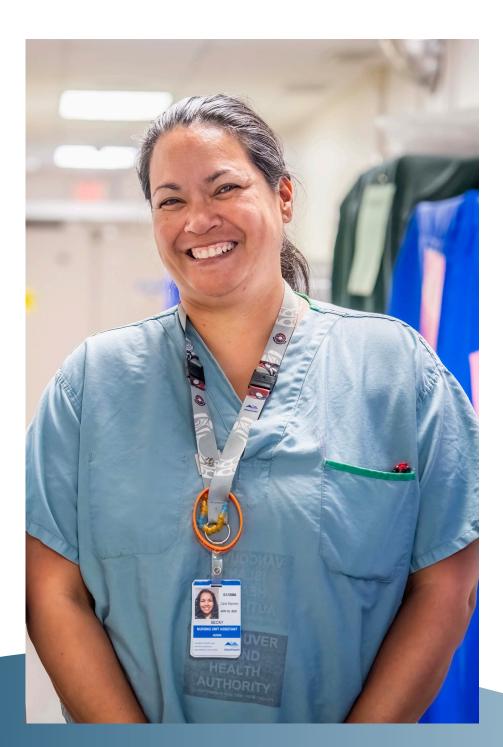
AMBULATORY CARE UNIT

Unit clerk Becky Teasdale was born in Fort St. James, but has lived in the Cowichan Valley since she was a baby.

For the past 15 years she has worked as a nursing unit assistant and unit clerk at CDH. Currently, she's working in the ambulatory care unit, a very busy and active area.

"My favourite part of working at CDH is my co-workers," she said. "They are very welcoming and helpful."

Outside of work, Becky is very busy with her kids' sports and enjoying nature. "I love to see [my kids] play sports they enjoy. I also enjoy hiking with friends on the many wonderful trails around the Cowichan Valley."





Jas

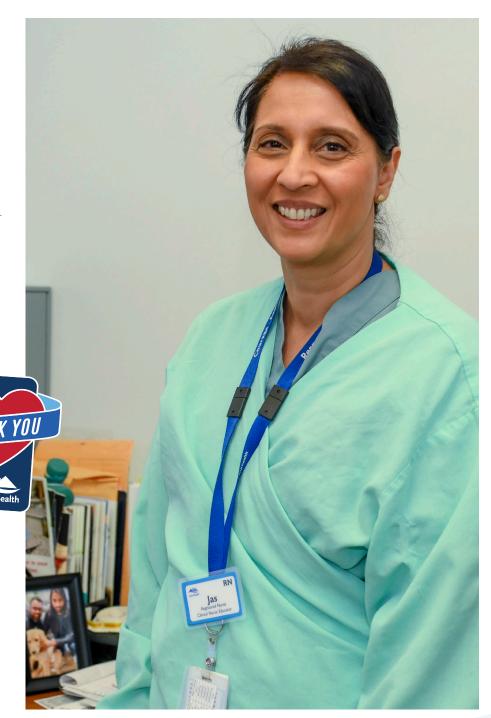
OPERATING ROOM & ENDOSCOPY

Clinical nurse educator (CNE) Jas Birk moved to the Cowichan Valley from Vancouver in 1989, when her husband was transferred here for work.

She has been a registered nurse at CDH for 28 years – 20 of those as an OR nurse and the last five as a CNE in the operating room.

"I work at CDH because the people are very friendly and wonderful to work with, and it is a small site where everyone knows one another," she said. "We all pull together and work as a team."

Outside of work you will find Jas in the garden, walking her dog on local trails and staying fit at boot camp classes.



Stuart & James

FACILITIES, MAINTENANCE & OPERATIONS

Power engineer Stuart Proctor has lived in the Cowichan Valley since 1967. A longtime, dedicated employee, he started working at CDH in 1985 and joined the Facilities, Maintenance & Operations (FMO) team in 1989.

When he's not at the hospital, Stuart enjoys spending time outdoors and on the water with family. He also spends time repairing things around his house. "That's just kind of who I am," he said.

Electrician James Bridden lives in Nanaimo but works in Duncan. Eight years ago he decided to become an electrician, and in 2020 he was picked up by the CDH FMO team.

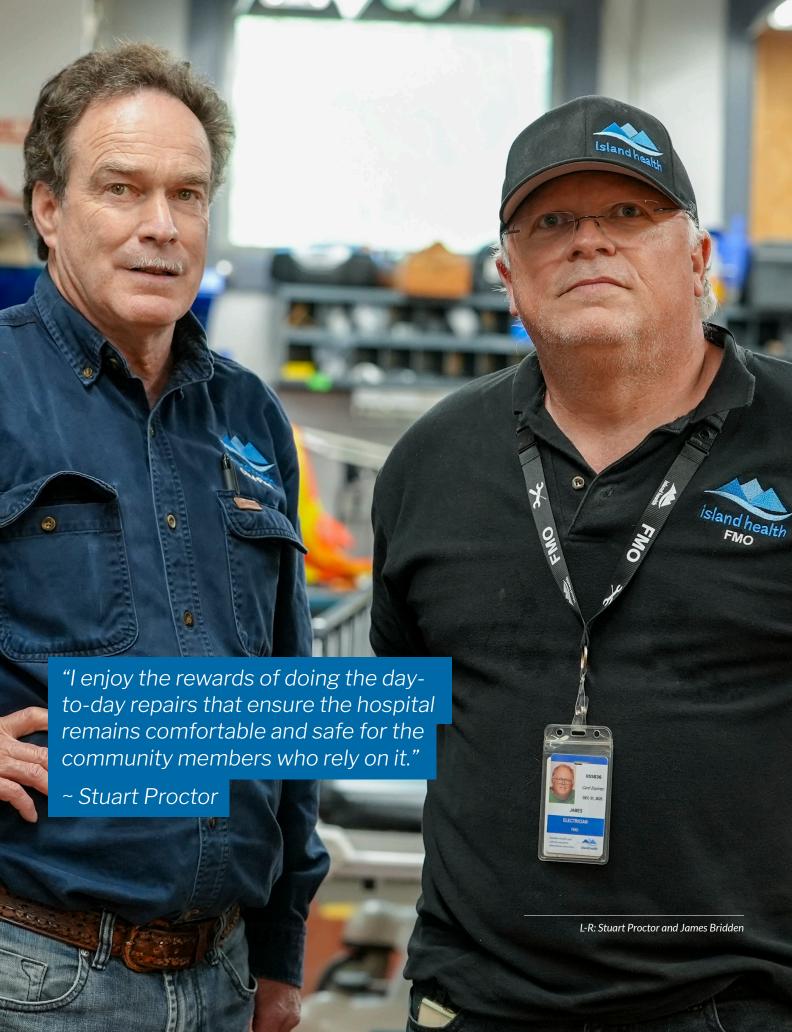
"We have such a solid team of fantastic people. I've learned so much from my co-workers, which has been paramount in my career,"

James said. "I also love fixing things and being part of a team of people with different backgrounds and skill sets to keep CDH running."

James and his wife Wanda, a nurse at NRGH, are nearing their retirement age. With this in his sights, he is now looking forward to being on the water, restoring old cars and exploring this beautiful island.









Cynthia

ADMINISTRATION

There's always one person who everyone turns to at each site – the person you know can get things done well, and with a smile. At CDH, that person is Cynthia Turgeon.

Originally an Ontarian, Cynthia followed her parents out to the Cowichan Valley in 2014. She worked in administration for several years and has recently taken on a new role of Cowichan business support associate. These days, her focus is the onboarding of new staff, the retention of current staff and supporting recruitment.

"I focus my energy on 'you' – the employee," she said about her role. "I want to do whatever it takes to help new colleagues feel welcomed and supported in their role when joining the Cowichan team – and to ensure current staff know how much they matter and are valued."

Cynthia also leads emergency disaster management planning at CDH, leads their 'building culture and wellness' initiatives, and plans all site events.

When she's not at work you will find her with family, on the water or just relaxing outside.

Jennifer Jones, Indigenous Health Manager for Central Island, and Cynthia at CDH's 2023 National Indigenous Peoples Day event

"Cowichan is known for its people and I find CDH/Cowichan staff to be super friendly, engaged and personable. I love my work and meeting new people."

~ Cynthia Turgeon

Amber

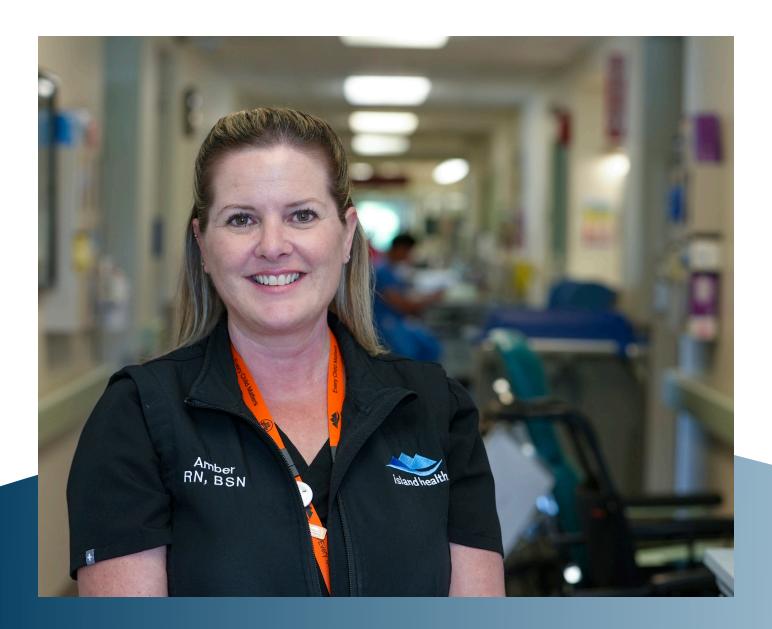
2 SOUTH

Clinical nurse leader (CNL) Amber Paddle was born and raised in the Cowichan Valley and has worked at CDH for 17 years.

During the first five years of her health-care career, Amber was a licensed practical nurse (LPN), before returning to school and graduating as a registered nurse in 2008.

"The people at CDH are like my second family. The friendships and relationships I have formed over the years are so strong and close-knit," she said. "I also love that work is only two minutes from my house and when I walk into this building, people I don't know will say hello and wave at me in the hallway. It happens everywhere, all of the time."

When not at work, you'll find Amber at concerts, hanging out at the lake and enjoying local wineries with family and friends.



Karen

2 SOUTH

Health-care assistant Karen Christie has worked in healthcare for 21 years, the last five of those at CDH.

A resident of Victoria, Karen travels the Malahat to work because she enjoys working in a smaller community and her CDH colleagues feel like, "an extended family."

"The favorite part of my job is connecting with our patients and making them smile or laugh when they feel down or unwell," she said.

Karen fills her cup by staying active – walking, exercising and gardening – and enjoys spending her off-hours with family and her boyfriend.





Andrea & Janice

PSYCHIATRY

Activity aide Andrea Zeeuw moved to the Cowichan Valley from Yellowknife in 2012.

"I have always had a passion for helping people and feel like I can connect with the patients on our unit," Andrea said. "The rewarding feeling of connecting and helping someone brings tears to my eyes."

Heralding from the Northwest Territories, the outdoors and nature are in her DNA. She loves camping, travelling and visiting exotic places in her free time.

CNL Janice Wipplinger moved up island to the Cowichan Valley from Victoria. Now in her 26th year with Island Health, she started her health-care career first as a care aide and then an LPN, before graduating in 2009 as a registered psychiatric nurse.

Being familiar with south island traffic, Janice said, "I really enjoy not hitting one single traffic light on my way to work – and the free parking is another bonus!"

Outside of work you'll find Janice exploring Cowichan on her new e-bike, hanging with friends and family at the lake and wintering in the Caribbean.





Camillia

3 NORTH

CNE Camillia Brinkman grew up in the Kootenays and lived and worked in various locations on Vancouver Island for a few years before moving to the Cowichan Valley in 2021.

She graduated as a registered nurse in 2014 and has worked at CDH for the past two years.

"I've worked in many places and this hospital has the warmest, friendliest, most incredible group of people to work with," she said. "I have such a dynamic, creative and challenging job, but the team I work with makes everything less challenging."

Camillia and her husband are often with their two dogs at the beach or out enjoying nature. A creative person, she also enjoys gardening, fibre art, painting and drawing to recharge her batteries outside of work.



Janel & Shayal

3 NORTH

RN Janel Yap was a practicing nurse in the Philippines before moving to Canada 10 years ago. She began her Canadian nursing career as an LPN in a long-term care home in Duncan before taking the steps to become registered as an RN in 2022.

She finds her co-workers very supportive and the patients diverse and interesting at CDH. "I enjoy encountering people from all different walks of life and helping them while they are here. It's very fulfilling," she said.

Janel's partner lives in Seattle, so there's plenty of travel across the border. When it's his turn to come to the island, they enjoy exploring different communities and hope to get to Tofino one day soon.

LPN Shayal Singh moved to the island from Vancouver in 2016. She started her career as a health-care assistant, before becoming an LPN in 2021.

When she's not at work on 3 North, Shayal enjoys being outdoors, hiking, gardening and hot yoga. She also strongly recommends a visit to the Farmer's Market in downtown Duncan on Saturdays!





~ Shayal Singh



Exceptional Care... Exceptional People Cowichan District Hospital



Thanks to the CDH team for allowing us to come in and learn a little bit more about who they are and what they do.

There are more great photos to see at Island Health's Flickr site: www.flickr.com/photos/islandhealth/albums





PHOTOGRAPHED IN JUNE 2023

