

CANADIAN COLLEGE OF
HEALTH LEADERS



COLLÈGE CANADIEN DES
LEADERS EN SANTÉ



2019 National Awards Program *Celebrating Leading Practices and Recognizing Success*

*Featuring the 2019 award recipients, all nominated programs
and shortlisted individuals*

Thank you to our National Award Program sponsors:



Introducing the 2019 National Awards Program Recipients – Congratulations to Our Difference *Makers!*

The Canadian College of Health Leaders, alongside our award sponsors, is delighted to recognize the individuals, teams and organizations that make a difference. The College's National Awards Program recognizes the importance of leadership, commitment, and performance. We are proud to showcase these Difference Makers, not just for winning their respective awards, but for making a difference to their communities, organizations and, most importantly, patients and their families.

The College is a community. We have designed the enclosed leading practice guide to allow everyone in our community to share in the knowledge and lessons learned from our Award Winners. Enclosed you will find examples of leading practices that can be replicated in your organization or community.

Do you know of any outstanding accomplishments in your organizations? There is no better time than the present to consider individuals, teams and programs worthy of recognition in the 2020 National Awards Program. For nomination information please visit the awards section of our web site: www.cchl-ccls.ca.

Sincerely,

Alain Doucet, MBA
President and Chief Executive Officer
Canadian College of Health Leaders

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The College would like to thank the members of the National Awards Advisory Committee for their guidance and support.

Karen Mumford, CHE (Chair)

Past Senior Director QEII Redevelopment
Nova Scotia Health Authority

Reece Bearnes, CHE

Clinical Director, Medicine, Ambulatory
Care, Endoscopy & Respiratory Therapy
The Ottawa Hospital

Jeff Carter, CHE

Corporate Directors, Operations & Support
Services
Horizon Health Network

Christian Coulombe (Ex-officio)

Director, Marketing and Communications
Canadian College of Health Leaders

Dudley Cosford

Project Director, Transition Office
Toronto Central LHIN

Jaime M. Cleroux (Ex-officio)

Vice President, Corporate Partnership
Excellence and Corporate Secretary
Canadian College of Health Leaders

Netha Dyck, CHE

Dean, College of Nursing
University of Manitoba

Alain Doucet, MBA (Ex-officio)

President and CEO
Canadian College of Health Leaders

Mark Heller

Director Business Development - Healthcare
Aramark Healthcare

Suann Laurent

Chief Operating Officer
Saskatchewan Health Authority

Britta Lesaux

Executive Director
Health Care Business Group
3M Canada

Judy O'Keefe, CHE

Regional Director, Long Term Care Program
Eastern Health

Mark Pugh, FCCHL

Manager, Shuswap Lake General Hospital
Interior Health Authority

Francine St-Martin (Ex-officio)

Director, Conferences and Events
Canadian College of Health Leaders

John Paul S. Young, CHE

Administrator, Community Hospital West
Prince
Health PEI

3M Health Care Quality Team Awards

This award recognizes four important elements: innovation; quality; patient/family engagement; and teamwork, and provides Canadian health leaders with an excellent opportunity to recognize team members who have applied the quality process to create measurable benefits in their network of services and programs.

Full descriptions of all award nominees can be found in the 3M Health Care Quality Team Awards Executive Summaries booklet, available at: www.cchl-ccls.ca.



3M Health Care Quality Team Awards - Selection Committees

Quality Improvement Initiative(s) Across a Health System

Maura Davies, FCCHL (Chair)

President
Maura Davies Healthcare Consulting Inc.

John Andruschak, CHE

Principal
Andruschak Consulting

Sandra Blevins, CHE

Dean, School of Nursing and Health Sciences
Saskatchewan Polytechnic

Wendy Hansson, CHE

Vice President & Chief Transformation Officer
Providence Health Care

Drew McCallum (Ex-officio)

Business Manager, Medical Markets Centre
3M Canada

Kelli A. O'Brien

Vice President, Long Term Care and Rural Health
Western Regional Health Authority

Chris Power, CHE

Chief Executive Officer
Canadian Patient Safety Institute

Jeanie Joaquin, CHE (Chair)

Chief Executive Officer
Scarborough Centre for Healthy Communities

Quality Improvement Initiative(s) Within an Organization

Dalyce Cruikshank, CHE

Jamie MacDonald, MBA, CHE
Chief Administrative Officer
Health PEI

Drew McCallum (Ex-officio)

Business Manager, Medical Markets Centre
3M Canada

Scott McIntaggart, CHE

Senior Vice President
University Health Network

Patricia O'Connor, FCCHL

Consultant

Rebecca Repa

Vice President, Integrated Clinical Support Services & Community Surgery
Hamilton Health Sciences

Brenda Weir, CHE

VP Medicine/Critical Care, Mental Health, Regional Programs
Peterborough Regional Health Centre

AWARD RECIPIENT: QUALITY IMPROVEMENT INITIATIVE(S) ACROSS A HEALTH SYSTEM

Breast Cancer Integrated Care Collaborative **North York General Hospital**

The traditional breast cancer journey is commonly fragmented, with poor collaboration between caregivers that result in delays in treatment and an uncoordinated, inefficient experience for the patient. In addition, breast cancer treatment is focused on the individual expertise of each specialist in isolation without collaborative cross-discipline input. Access to resources such as peer support and education is provided on an ad hoc basis.

North York General Hospital (NYGH) recognized that the complexity of breast cancer treatment necessitates a more collaborative and integrated approach to care and treatment. As a result, a passionate team of inter-professional providers and a patient advisor came together, and through extensive consultation co-designed the NYGH Breast Cancer Integrated Care Collaborative (ICC). Using an innovative approach to co-designing services together with, evidenced based practice as a lever for change, the ICC was developed to provide a seamless, integrated patient- and family-centred care approach from diagnosis to survivorship. Since inception, NYGH has achieved the following success in these key indicators:

- 100% of patients receive a multi-disciplinary case conference during diagnosis;
- Surgical wait times for breast cancer average 30.4 days for the 90th percentile, consistently below the Central LHIN target of 38 days; and
- An increase from 51% to 81% of wait times within target from referral to consult for systemic treatment.

The ICC has transformed healthcare across the system and provides high quality outcomes and an exceptional experience for our patients, families and caregivers.

Contact: Anna Tupis
Program Director, Cancer Care and Ambulatory Care
North York General Hospital
4001 Leslie St.
North York, ON M2K 1E1
416-756-6465
Anna.tupis@nygh.on.ca

AWARD RECIPIENT: QUALITY IMPROVEMENT INITIATIVE(S) WITHIN AN ORGANIZATION

Megamorphosis

Providence Health Care

Megamorphosis is Providence Health Care's residential care's (RC) movement to transform from an institutional to a social model of care. PHC has provided compassionate RC for decades; however aging infrastructure and homes evolved from a medical system has led to a focus on efficiency, rather than emotional connections and quality-of-life for residents. The need for efficiency in both care as well as contracted services results in resident days being directed by what makes sense for the organization and staff rather than what the resident wants. Not willing to wait for a new building, the leaders of PHC RC embarked on a journey to improve the lives of residents, staff and families.

The novel methodology of human-centred design was used to understand the experience of those who live, work and visit our homes. Following months of insight gathering, ideation and testing, it became clear that something creative was needed to shake loose the institutional routines developed over time that were acting as barriers to transformative change. Megamorphosis focusses on increasing the engagement of each resident through the following principles: emotional connections matter most, residents direct each moment, and home is a feeling. With 6-8 weeks of pre-work activities in preparation for change and 2 weeks of rapid-cycle testing of ideas during which staff, residents and families co-create and test changes together, we have seen sustained increases in positive and social emotional connections between staff and residents, increased personalization of resident spaces, and increased resident engagement in everyday activities.

Contact: Jo-Ann Tait

Corporate Director, Seniors Care and Palliative Services
Providence Health Care
4950 Heather St., Vancouver, V5Z 3L9
604-806-9539
jtait@providencehealth.bc.ca

Award of Excellence in Mental Health and Quality Improvement

This award honours a hospital, health authority, community based mental health and addictions program/service, or a leader in the field that demonstrates evidence-informed and sustained quality improvements (QI) in the area of mental health and addictions.

Sponsored by:



Selection Committee

Louise Bradley, CHE (Chair)

President and Chief Executive Officer
Mental Health Commission of Canada

Dr. Pierre Beauséjour

Full Professor
University of Sherbrooke

Jean Daigle

Vice President, Community
Horizon Health Network

Barbara C. Hall, CHE

Chief Executive Officer
Maxxcare Solutions

Yasmin Jetha

Regional Director, End of Life Care &
Director Home Health and Community Care
Vancouver Coastal Health Authority

Erik Savoie (Ex-officio)

National Medical Education Manager, CNS
Janssen Inc.

Mark Snaterse

Executive Director, Addiction and Mental
Health, Edmonton Zone
Alberta Health Services

Darryl Yates, CHE

Director – Coach
Studer Group Canada

AWARD RECIPIENT

Ontario Shores Centre for Mental Health Sciences

Implementation of Recovery-Oriented Practice

Traditionally, mental health care has taken on a clinical emphasis, whereby remission of symptoms, functional impairments and deficits are the focus. However, for many with severe mental illness, full remission may be difficult to achieve and at present, there is no “cure” for mental illness. The “personal recovery” movement emerged from the deinstitutionalization of mental health services and its essence is that individuals with severe mental illness want and need more than the possibility of symptom relief. If implemented properly, recovery-oriented practice yields a radical transformation of mental health services.

An interprofessional team within the hospital was assembled to engage patients and their families to help realize the strategic goals of the “Recovery Action Plan.” This action plan framework was used to achieve three broad objectives designed to enhance recovery-oriented practice and ultimately recovery-oriented outcomes: 1) increase patient and staff safety by reducing the use of restraint and seclusion (R/S); 2) improve customized care and recovery-oriented outcomes by implementing a valid and reliable measurement tool for recovery; 3) develop a staff and patient co-designed program of education, to support patient experience, engagement, empowerment and self managed health care.

Contact: Mark Rice

Senior Administrative Director and Recovery Lead
Ontario Shores Centre for Mental Health Sciences
700 Gordon Street, Whitby, ON L1N 5S9
905-430-4055 ext. 6648
ricem@ontarioshores.ca

OTHER NOMINEES

Taking Charge Program **Humber River Hospital**

Delays in providing appropriate and timely access to adults who experience disabling symptoms of anxiety and depression can seriously affect several important domains of their life thus placing them at risk for lifelong disability. Lack of appropriate care in a timely manner can lead to increased risk of suicidal behavior, job loss, loss of family and substance use disorders. To increase access and decrease wait times, we expanded our once per week outpatient group to an intensive day treatment program called the Taking Charge Program (TCP). The title of the program was chosen with patient feedback to intentionally demonstrate our ultimate goal for patients which is to leave the program with the ability to 'take charge' of their life.

Dr. Kinneret Fleiman has led our team in continuous quality improvement initiatives. The largest QI initiative was a substantial change to our program curriculum. Incorporating principles of group therapy and adult learning, the new curriculum is less didactic, more goal directed, practical, and actively engages the patients with the content by utilizing written, visual and audio learning tools. Patients are empowered to be active participants in all program changes. Patient experience data and focus group sessions were utilized to make all program improvements. The expansion of the program resulted in a five-fold increase in the number of patients served from 15 to 80 per year thus increasing access and decreasing our wait time for service.

Contact: Dr. Kinneret Fleiman

Psychiatrist

Mental Health and Addictions Program, Humber River Hospital

1235 Wilson Ave., Toronto ON

416-242-1000 ext. 43088

kfleiman@hrh.ca

Resident Assessment Instrument Project Implementation

Centre intégré universitaire de santé et de services sociaux de l'Ouest de l'Île-de-Montréal

In February 2013, the steering committee of the Douglas Mental Health University Institute — now a constituent of CIUSSS de l'Ouest-de-l'Île de Montréal (CIUSSS ODIM) — implemented a work group with the mandate of assessing the clinical usefulness of the standardized collection of clinical data through the Resident Assessment Instrument for Mental Health (RAI-MH). At the initiative of Lynn McVey, then President-CEO of the Douglas Institute and now President-CEO of CIUSSS ODIM, the institution's goal in carrying out the pilot project was and remains to implement specific actions designed to introduce a standardized assessment procedure for all users and a system for comparing the performance of the Douglas CIUSSS ODIM to that of other mental health facilities in Quebec and Canada, with respect to clinical results and quality of services.

The RAI is a health information system that enables standardized clinical assessment and planning of care for users, as well as compilation of a database for calculating quality and performance indicators for a given service, program or facility, when this same instrument is used to assess the mental and physical health status of all users. In addition to standardized individual assessment both in the hospital and community setting in adolescent and adult psychiatry as well as gerontology and geriatric psychiatry, the range of interRAI tools for overall assessment combines to form an integrated health information system.

The Resident Assessment Instrument for Mental Health (RAI-MH) was introduced in April 2014. The Resident Assessment Instrument Emergency Screener for Psychiatry (RAI-ESP) was introduced in November 2017. The Resident Assessment Instrument for Community Mental Health (RAI-CMH) was introduced in September 2018.

Contact:

Centre Intégré universitaire de santé et de services sociaux de l'Ouest de l'Île-de-Montréal
6875 boul. Lasalle, Verdun, Québec, H4H 1R3
514-761-6131 ext. 2593
amine.saadi.comtl@sss.gouv.qc.ca

Enhancing Evidence-Based Policy and Practice in Mental Health and Substance Use – The Island Health Scholar in Residence (SIR) Program
Vancouver Island Health Authority

Island Health is one of five regional health authorities in British Columbia, providing health care services to nearly 800,000 people living on and around Vancouver Island. In 2015, Island Health's Scholar in Residence (SIR) program was launched as part of the health authority's research capacity building initiative. This unique and innovative knowledge translation and exchange strategy has generated and enhanced the uptake of evidence into policy and practice in mental health and substance use policies, programs, and services through a public health approach. Under the sponsorship of executive leaders in Mental Health and Substance Use (MHSU), and funded by Island Health's Research Department, Dr. Bernie Pauly was appointed SIR in 2016. Dr. Pauly is a Professor in the School of Nursing at the University of Victoria (UVic), a UVic Community-Engaged Scholar and Scientist at the Canadian Institute for Substance Use Research, and an international leader in the field of mental health and substance use.

The SIR program seeks to bridge the know-do gap in the co-creation and uptake of evidence in order to improve health systems outcomes. To do so, the SIR works closely with MHSU staff and people with lived experience to conduct numerous interrelated research and knowledge translation projects. Ongoing engagement with executive leadership has aligned the work to address key priority areas, including culturally safe care, developing frameworks to support and monitor Island Health's opioid response, reducing substance use harms, mentoring care teams, and extensive knowledge dissemination to enhance evidence-based practice.

Contact: Dr. Richard Crow

Executive Medical Director, Population and Community Health
Island Health (Vancouver Island Health Authority)
1952 Bay Street, Victoria, BC
250-370-8131
richard.crow@viha.ca

Building Team Capacity to Reduce Restrictive Practices
Nova Scotia Health Authority, Dual Diagnosis Program- Emerald Hall

Our quality improvement submission reflects the excellence of our hospital-based inpatient psychiatric stabilization unit, Emerald Hall, and Community Outreach Assessment Support and Treatment (COAST) team. Our service provides treatment for adults who are experiencing mental health crises and challenges associated with complex behaviour and intellectual disability.

Individuals with intellectual disability have a higher likelihood of engaging in challenging behaviour due to adaptive skill deficits (e.g. communicative, social, emotional, functional, etc.) (Sturmey, 2015). Challenging behaviour such as intense self-injury and aggression is often managed by the use of restraint and restrictive practices which presents inherent risks of harm both physically and psychologically. Restrictive practices include living in a hospital setting (e.g. limited community participation, reduced personal choice and control, assigned staff support ratios, etc.) and restraint methods such as chemical (PRN medication), mechanical (Emergency Restraint Chair, PINEL), environmental (locked door, seclusion), and physical (Non-Violent Crisis Intervention).

The aim for our quality initiative is to promote positive, proactive responses as an alternative to restraint. Our new standards of care and approaches to service delivery have contributed to the significant reduction of restrictive practices. Our staff team has the training to decrease likelihood of challenging behaviour and our patients continue to develop skills to replace challenging behaviour. Patients are supported in experiencing a quality of life that is as least restrictive as possible. Our strong leadership team will continue to prioritize this important goal of restraint and restrictive practice reduction.

Contact: Oluseye Akinkunmi

Health Services Manager

Nova Scotia Health Authority, Dual Diagnosis Program- Emerald Hall

300 Pleasant Street, Dartmouth, NS B2Y 3Z9

902-464-6508

Oluseye.akinkunmi@nshealth.ca

Nova Scotia Take Home Naloxone Program
Nova Scotia Health Authority

Misuse of opioids is a health and safety concern in Nova Scotia. Naloxone is an opioid antagonist medication, which reverses the effects of an opioid overdose, allowing the individual to regain consciousness, and respiration. Naloxone is a very effective and safe medication which does not have significant known side effects.

In April 2017, the Department of Health and Wellness (DHW) announced funding to establish the Nova Scotia Take Home Naloxone (NS THN) Program, with Nova Scotia Health Authority (NSHA) as the lead organization. The provincial program provides opioid overdose prevention and naloxone administration training, with the aim of preventing opioid overdoses and related death.

The NS THN Program provides take home naloxone kits free of charge, confidentially, and with no prescription required, to anyone at risk of opioid overdose, those likely to witness/ respond to an opioid overdose, (i.e. family and friends), and those working with people at risk of overdose. The NS THN program consists of three key access areas; 1) Over 280 community pharmacy sites (made possible by partnership with the Pharmacy Association of Nova Scotia (PANS), 2) Community organizations, such as Harm Reduction agencies 3) Key NSHA program areas.

Since the program launch in September 2017, over 5000 kits have been distributed across NS, and over 55 opioid overdose reversals have been voluntarily reported to the program. This does not include the reported reversals by medical first responders such as paramedics, fire departments and police forces.

Contact: Amanda Hudson

Take Home Naloxone Program Coordinator
Nova Scotia Health Authority
302 Peasant St. E.C. Purdy Building, Nova Scotia Hospital, Office B17
902-237-9039
Amanda.hudson@nshealth.ca

Celebrating the Human Spirit Award

This award recognizes and honours the meaningful contributions of individuals and teams for acts of caring and compassion that go above and beyond the call of duty, inspire others and have a profound and lasting impact.

Sponsored by:



Selection Committee

Kenneth W. Baird, CHE (Chair)

Vice President, Clinical Support
Eastern Health

Don Ford, CHE

Past Chief Executive Officer
Central East Community Care Access Centre

Cheryl L. Harrison, CHE

Vice President of Regional Programs
Orillia Soldier's Memorial Hospital

Dr. Barbara Mildon, CHE

Chief Executive Officer
Community Care City of Kawartha Lakes

Kelli A. O'Brien (Excused)

Vice President, Long Term Care and Rural
Health
Western Regional Health Authority

Justin Simard (Ex-officio)

Director, Regional Sales
Stericycle Healthcare Companies Solutions

Janice M. Skot, CHE

President and CEO
Royal Victoria Regional Health Centre

Moyra Vande Vooren, CHE

AWARD RECIPIENT

Elder Little Brown Bear (Ernest W. Matton)

Ernest W. Matton, (Athehsa Niohkwa:rita:a) (Elder Little Brown Bear), goes above and beyond in his tireless pursuit of helping others achieve mental, physical, spiritual and emotional well-being.

He is a respected Métis Elder and spiritual ambassador who blends Traditional teachings with mainstream information to provide holistic healing approaches for Indigenous and non-Indigenous community members and professional disciplines. Over the past eight years, he has evolved an addictions treatment program to a holistic healing program that includes smudging, healing circles, seasonal feasts and teachings on recognizing trauma, anger and relationships. He is motivated by not letting any community member 'fall through the cracks'. Elder Little Brown Bear does not believe in wait lists and will meet anyone willing to take the first step on their healing journey.

Ernest also promotes the spirit of reconciliation where he has helped the hospital leadership team, staff and physicians of the Toronto East Health Network better connect with our Indigenous community members and his spirit of gratitude is contagious with everyone he encounters.

He is a sought after speaker and advisor who has been recognized with one of the CAMH (Centre for Addictions and Mental Health) Canada's 150 Difference Maker Awards, Sovereign's Medal for Volunteers from the Governor General of Canada and the Order of Ontario.

Contact: Elder Little Brown Bear (Ernest W. Matton)

Manager of Aboriginal Culture and The Aboriginal Healing Program
Toronto East Health Network
2 College Street Room 116, Toronto ON M5G 1K3
416-923-0800
Elder.littlebrownbear@tehn.ca

OTHER NOMINEES

Chee Mamuk, “new work” from community to provincial impact PHSA, BC Centre for Disease Control

Chee Mamuk means “new work”. This 29 year old innovative indigenous health program, with a Human Rights exemption that allows them to only hire Indigenous people, is exemplary in shifting the paradigm of the health system. This team has developed and nurtured nationally recognized programs such as, “Around the Kitchen Table” women’s training (Accreditation Canada, Leading Practice) and “Encouraging Strong Paths” men’s training. These programs focus to create a life characterized by healthy sexuality and free of STIs, Hepatitis, and HIV/AIDS for indigenous people.

Their approach in this work is:

- Process rather than outcomes driven: Chee Mamuk travels on a learning and growing journey while continuing to be in relation with communities permanently
- De-colonizing and Anti-Stigma: Chee Mamuk and the participants start from an Indigenous knowing, share stories and create knowledge together that connects community with health, prevention and healing

For their latest initiative, “Nation to Nation”, involving a gathering of 11 communities, their social media analytics go off the charts, with each nation speaking about who will be the next to have the honour of hosting the program.

A true paradigm shift often means working in the face of prejudice, injustice and inequity on a daily basis, and shifting power away from the “experts” to the people. This team of human spirits do so with grace, wisdom, and courage. To work with them is to be humbled by their work ethic, informed by their teachings, and impassioned by their energy.

Contact: Jessica Chenery

Chee Mamuk Team Lead
655 W 12th Ave, Vancouver, BC
604-707-5605
Jessica.chenery@bccdc.ca

Maryann Murray and Sandi Kossey

Maryann and Sandi have gone above and beyond to champion and improve medication safety in Canada and globally. Because they worked together their impact on patients, providers, leaders and communities is profound and lasting.

Maryann, as a volunteer member of Patients for Patient Safety Canada, has generously dedicated thousands of hours to improving medication safety after the death of her daughter Martha in 2002. In the last several years, Maryann has played a key role in shaping the World Health Organization's Medication Without Harm global challenge and implementing the campaign in Canada. Recently, Maryann collected evidence from the public and contributed the findings of unsafe medication use to Health Canada's Plain Language Labelling Committee. She also helped create a national petition in support of plain-language labelling regulations. Her relentless focus on clear communication and patient engagement is having an impact.

Sandi, as Senior Director with the Canadian Patient Safety Institute and Director of the WHO Collaborating Centre on Patient Safety and Patient Engagement, is the most determined promoter of patient engagement in healthcare improvement, facilitated the inclusion of patient partners in many decision-making forums in Canada and globally. While there is general agreement to engage patients, often the know-how and buy-in is not fully present. In a compassionate and respectful way Sandi both coached and led by example to create environments where patients, providers and leaders are able to meaningfully partner to improve medication safety. Her personal leadership and influence on patient engagement in healthcare transformation is making a difference.

Contact:

Maryann Murray

Member
Patients for Patient Safety Canada
10025 102 Avenue Northwest #1400,
Edmonton, AB T5J 2Z2
780-721-2114
maryannmurray@gmail.com

Sandi Kossey

Senior Director
Canadian Patient Safety Institute
10025 102 Avenue Northwest #1400,
Edmonton, AB T5J 2Z2
780-394-8220
SKossey@cpsi-icsp.ca

Nancy Guebert

Over 38 years, Nancy has made significant contributions to healthcare in Saskatchewan and Alberta. In February 2019, Nancy will retire and will be dearly missed. Nancy is a bright light in Cancer Control Alberta (CCA). A leader, who brings her soul to work and shares her positive disposition with everyone. Always finding time to greet everybody no matter what event.

Nancy is driven by a commitment to quality and safety, in patient care. Her personal passion for quality care comes through in her vision and leadership. As such she has played a pivotal role in CCA redesigning current practices, challenging us all to realize the goal of true patient centred care.

Professionally she has had quite the career, holding many senior leadership roles. However, it is her dedication to her profession and acts of caring that bring forth this nomination. One example, as a palliative care nurse she responded to a page from a young nurse encountering her first passing. It was very late, and while Nancy noted that it might be too late for palliative care. She headed into the hospital to assist the nurse. This was over 20 years ago and her compassion is still evident today though she plays a very different role.

Nancy cares as much today as she did 38 years ago. She is a role model and mentor who inspires others to succeed. A wonderful professional who should be recognized for going beyond the call of duty and inspiring others.

Contact: Nancy Guebert

Chief Program Officer

Cancer Control Alberta

Tom Baker Cancer Centre, 1331 29th Street NW Calgary, Alberta T2N 4N2

403-389-1565

Nancy.Guebert@albertahealthservices.ca

Humber River Hospital Child Life Services Team
Humber River Hospital

Humber River Hospital's (HRH) Child Life Team goes above and beyond to deliver professional, respectful and compassionate health care to paediatric patients, parents and families. Their lasting impact is evident through feedback and letters of gratitude.

This caring dynamic team embraced Pepper, a 4.5-foot humanoid robot to advance and enhance therapeutic, developmental, educational and psychosocial interventions to paediatric patients and families. The results are decreased fears, anxieties, increased comfort, coping, and making their hospital experience even more positive and fun!

Apart from Pepper's usual robotic activities of playing games, dancing, taking selfies and telling stories, the team utilizes Pepper to prepare and teach children for surgery. Remarkably, the team engages Pepper to travel to the Operating Room with children and their parents for therapeutic intervention and support during inductions. This further decreases fears and improves the patients and families' health care experiences.

The Child Life Team have many accomplishments to be proud of, including:

- Sharing their expertise on TVO Kids;
- Developing a Pilot Study that was accepted as a poster presentation at the Institute for Healthcare Improvement;
- Presenting at the Graduate Health Sciences - McMaster University;
- Collaborating with Children's Hospitals in Italy, New York City and California; and
- Facilitating visits from the Ministry of Economic Development of Growth, Ministry of Health and Long-term Care, Ministry of Research Innovation and Science and Associate Professor, Canada Research Chair in Robotics for Society, University of Toronto.

The Child Life Team's achievements have left an outstanding impact on patients, their family and the community.

Contact: Alexandra Christofides, Vanessa Pastoric, and Wafa Qazi

Certified Child Life Specialists

Humber River Hospital

1235 Wilson Avenue, Toronto, Ontario, M3M 0B2

416-242-1000 ext. 45012

achristofides@hrh.ca, vpastoric@hrh.ca, wqazi@hrh.ca

Indwell Team

Indwell

Many health care organizations talk about the importance of the social determinants of health, few build their practice on it. Indwell is a supported housing organization that is transforming lives and re-defining community mental health. Indwell integrates housing design, development, project management, clinical and instrumental support services in a unique blend that creates unparalleled opportunities for individuals emerging from homelessness and institutionalization. Beyond just “stabilization,” people who live at Indwell flourish; finding community, work, opportunity for education and an affirmation of their humanity. To see an image of people, who were homeless but now with Indwell, happily preparing food for a neighbouring school’s food and nutrition program, you know that you are looking at something very different.

When you meet anyone at Indwell, staff, volunteers or tenants, Indwell’s values of affirming dignity, love and hope are evident. The primacy of the relationship with tenant’s and the focus on maximizing opportunities for community belonging are everywhere to see. Indwell’s leadership is inspirational; few organizations demonstrate capacity to name and maintain organizational culture as its essence. Even fewer organizations achieve cultural consistency with the growth and scale of Indwell. Evident in the design of facilities and in the actions of staff is the belief that housing with support creates the space for people to unlock their potential. To see individuals move from a place of extreme vulnerability to a place of stability, agency and competence is evidence of Indwell’s firm belief in the resiliency of the human spirit.

Contact: Steven Rolfe

Director, Mental Health Services

Indwell

1430 Main St. E., Hamilton

905-529-0454

steven@indwell.ca

Making Memories Team
Western Health

In 2015/16 Resident experience surveys identified the need to enhance availability and types of activities and to alleviate worry, boredom and loneliness. An interdisciplinary team of staff & volunteers was established to review these results and engage with residents, families and other stakeholders to review innovations in other homes and to develop an improvement plan. The result of the collaboration was magical resulting in the Making Memories initiative!

The focus of Making Memories is to provide all residents (n= 434) with an opportunity to experience a special wish. The vision is to enhance each resident's lives one wish at a time. The initiative is integrated across 7 homes in 6 communities. A regional team (which includes a family advisor) reviews and mobilizes resources to enable wishes. Up to November 30, 2018 a total of 49 special wishes have been realized. These special wishes have included pampering at a local spa, meeting celebrities (i.e. Don Cherry) and numerous celebrations at home or in the community such as family weddings, music concerts, and graduations. All of these wishes have been enabled at no cost to the resident, family or organization due to the generosity of staff, community businesses and partners.

The power of this initiative has also been experienced by everyone. The sense of engagement, empowerment and pride are evident from all stakeholders. The profound, lasting impact as described by one family: "the smile on my mom's face. It was one of the last I saw (resident later deteriorated).

Contact: Patricia Barrett
Recreation Specialist, Co-Lead Making Memories
Western Health
P.O. Box 2005, Corner Brook, NL, A2H 6J7
709-637-3999
patriciabarrett@westernhealth.nl.ca

Kelly Reid

Kelly Reid has spent his career developing and implementing innovative services for Victoria's most vulnerable: those living with mental health and substance use (MHSU) challenges, many of whom are homeless. Kelly inspires his coworkers to put clients first and focus on a client-centred system of services - of crucial importance for those with substance use challenges during the opioid crisis.

Kelly's leadership and the respect he garners from co-workers, physicians and community not-for-profit service partners have improved MHSU services in Island Health. Examples include:

- Facilitating implementation of cross-sectoral initiatives across Vancouver Island in response to the overdose crisis:
 - Outpatient Rapid Access and Addiction Clinic (Victoria)
 - Supervised Consumption Service site (Victoria)
 - Access to Opioid Agonist Therapy
 - Increased involvement of People with Lived Experience/Peers
- Housing advocacy to deliver effective services for those with MHSU
- Participating in Greater Victoria Coalition to End Homelessness since its inception (2008) which has fundamentally reshaped focus of this issue on southern Vancouver Island.
- Promoting direct involvement of clients and families in quality improvement initiatives, including in client-informed recovery programs.

Kelly's work is so significant he was recognized with a Victoria Leadership Award in 2015.

Kelly demonstrates kindness and compassion with patients, staff and the community. He always has time for one more client, problem or question. Not for profit partners are crucial to effective MHSU service. Partners describe Kelly as a collaborative listener, seeking ideas and opinions of others and focused on building bridges between health services and the not-for-profit-sector.

Contact: Kelly Reid

Director, Mental Health and Substance Use (South Island)

Island Health

c/o Royal Jubilee Hospital, 1952 Bay Street, Victoria BC V8R 1J8

1-250-519-5300 ext. 13180

kelly.reid@viha.ca

Chapter Award for Distinguished Service

This award provides an opportunity for chapters to recognize locally and nationally the individuals who have made a significant contribution to their chapter.

CANADIAN COLLEGE OF
HEALTH LEADERS



COLLÈGE CANADIEN DES
LEADERS EN SANTÉ

AWARD RECIPIENTS

BC Interior

Ms. Colleen McEachern, CHE

Director, Capital Planning and Clinical Design
Interior Health Authority

BC Lower Mainland

Ms. Kris Gustavson

Corporate Director, Accreditation & Patient Experience, Safety & Outcome Improvement
PHSA

Bluenose

Mr. Brent Van Buskirk, CHE

Director of Health System Strategies & Government Affairs, Atlantic
Medtronic

Eastern Ontario

Ms. Jennifer Proulx, CHE

Director, Integrated Care Delivery Systems
Children's Hospital of Eastern Ontario

GTA

Ms. Sonia Jacobs

Vice President, Quality & Client Engagement
Bellwoods Centres for Community Living

Hamilton and Area

Ms. Sarrah Lal

Senior Manager, MGD Initiative for Innovation in Healthcare; Assistant Professor, Division of Education & Innovation
Department of Medicine, MGD School of Medicine; McMaster University

Manitoba

Ms. Marilyn Robinson, CHE

NEON Lights

Ms. Andrea Reibmayr, CHE

Coach
ARC Executive Coaching

Québec

M. Daniel Ayotte, CHE

Lieutenant-Colonel, Chef d'État-Major, 4e Groupe des Services de Santé
Forces armées canadiennes, Base militaire Longue-Pointe

South Alberta

Ms. Nancy Hughes

Vice-President & Chief Operating Officer
Bethany Care Society

Southwestern Ontario

Mrs. Julie Campbell

MAiD Navigator
South West LHIN

Vancouver Island

Mr. Bart Johnson, CHE

Manager, Patient Safety Systems and Processes
Vancouver Island Health Authority

CCHL Distinguished Leadership Award

The CCHL Distinguished Leadership Award honours a Champion of Performance Improvement. Winners of this Award will be passionate and visionary leaders who have led transformative change, demonstrated exemplary engagement and collaboration and a dedication to building leadership capacity.

CANADIAN COLLEGE OF
HEALTH LEADERS



COLLÈGE CANADIEN DES
LEADERS EN SANTÉ

AWARD RECIPIENT

John King, CHE

John King spent his 40+ year career in senior leadership positions in Saskatchewan, Alberta and Ontario, serving in Executive Leadership roles as well as Assistant Deputy Minister of Health. A long-time member of the College, John served on the CCHL Board of Directors as a representative of Alberta and of Ontario, reaching the penultimate position of Board Chair in 2010.

John has a Master of Health Administration (MHA) from the University of Ottawa and a B.A. (Economics/Math) from the University of Western Ontario.

John has long been an advocate of personal development and has shaped the direction of not only individuals, but of organizations and systems through his efforts. He has received numerous awards including the Trudeau Medal from the University of Ottawa, and the Mentorship and Honorary Life member awards from CCHL.

In June 2014 John was awarded The Order of the Polar Star on behalf of the King of Sweden. This order is given to foreign leaders for the promotion of Swedish interests abroad and in recognition of his 25 years of exchange programs for health executives between Sweden and Canada.

John retired in November 2012 and is currently involved in consulting activities in the healthcare industry.

Contact: John King, CHE

Strategic Advisor

Sodexo Canada, Stryker Canada, Studer Group Canada, Odgers Berndtson Canada, SteriPro and GS1
416-709-7249

john.king2@sympatico.ca

Energy and Environmental Stewardship Award

This award recognizes a progressive healthcare organization that has implemented programs that demonstrate environmental responsibility through the reduction of energy usage, the preservation of natural resources and effective waste diversion solutions.

Sponsored by:

Honeywell

Selection Committee

Tony Dagnone, FCCHL, FACHE (Chair)

Past President and CEO
London Health Sciences Centre

James Hanson

Vice President, Operations and Support Services
Island Health

Mike Hickey

MF Hickey Consulting

Andrew Neuner, CHE

CEO
Health Quality Council of Alberta

Ron Noble, FCCHL, FACHE

President and CEO
Noble Consulting Inc.

Luis Rodrigues (Ex-officio)

Vice President, Energy Services Group
Honeywell

AWARD RECIPIENT

Nova Scotia Health Authority

NSHA is mindful of the importance of developing a social, environmental, health and financial balanced approach to sustainability and economic imperatives and recognizes the link between a healthy environment and a healthy population. As such, NSHA recognizes a duty to minimize its environmental impact.

The NSHA energy and environmental plan feeds the organizational strategic directions by contributing to the goals and values that will drive those directions. Included are the areas of performance, data and evaluation, innovation and behaviour change. One specific priority selected to reflect this is a continued focus on energy-environmental projects that provide for cost effective solutions as well as reducing greenhouse gases and improving the organization's carbon footprint. It is through the successful completion of these projects that NSHA is able to show its commitment to facilitate changes in the organization's operations to enhance sustainability.

This strategy has demonstrated huge reductions in the NSHA carbon footprint through implementation of energy projects and environmental initiatives. The benefits to patients, staff and the general public through improved comfort, enhanced lighting and the positive effects on operations in equipment renewal and effective use of utilities further illustrate the importance of this program.

Contact: Robert Barss CET, CCHFM, CHFM
Manager Environmental Stewardship
Nova Scotia Health Authority
90 Glen Allan Drive, Bridgewater, NS B4V 3S6
902-543-4604 ext. 2470
Robert.Barss@nshealth.ca

OTHER NOMINEE

The Perley and Rideau Veterans' Health Centre

The \$6.6 million investment in retrofits made in 2011 continues to help finance innovations and improvements in care at The Perley and Rideau Veterans' Health Centre. Ontario's third-largest long-term care (LTC) home, Perley Rideau features five interconnected buildings on a 25-acre campus. It is home to 250 Veterans and 200 other seniors in LTC, and more than 150 in independent apartments.

To complement the 2011 construction of two energy-efficient apartment buildings, Perley Rideau installed 1,200 photovoltaic panels with a total generating capacity of 250kW, and completed more than 100 energy-efficiency and water-conservation retrofits. The project involved everything from upgrades to lighting and HVAC systems, to the installation of a new central heating and cooling plant, and the replacement of more than 550 toilets with high-efficiency models.

Electricity from the solar panels flows into the provincial grid, yielding more than \$200,000 annually through Ontario's Feed-In Tariff Program. The other measures reduce energy and water consumption, along with waste-disposal fees, lowering annual operating costs by more than \$360,000. The positive impact on the bottom line helps Perley Rideau to improve quality of care and to innovate. Students enrolled in Algonquin College's Personal Support Worker program now study in an on-site classroom, for instance. And in 2019, Perley Rideau will establish Canada's only Centre of Excellence in Frailty-Informed Care. The Centre will conduct research, develop best practices in care and transfer the knowledge needed to address the emerging crisis in frailty care. At Perley Rideau, environmental stewardship and leadership in care go hand-in-hand.

Contact: Akos Hoffer

Chief Executive Officer

The Perley and Rideau Veterans' Health Centre

1750 Russell Road, Ottawa, ON, K1G 5Z6

613-526-7171 ext. 2207

info@prvhc.com

Excellence in Diversity & Inclusion Award

This award honours a forward-thinking healthcare organization that has demonstrated leadership in creating and promoting diversity and inclusion to improve the environment for its employees, and to better service their customers/patients, and the community.

Sponsored by:



Selection Committee

Dwight Nelson, CHE (Chair)

President and COO
Carewest

Dr. Brendan Carr, CHE

President & CEO
William Osler Health System

Brenda Flaherty (Excused)

Executive Vice President & Chief Operating
Officer
Hamilton Health Sciences

Jim Hornell

CEO
e-Health Saskatchewan

Scott Jarrett

Executive Vice President and Chief of
Clinical Programs
Humber River Hospital

Norm Peters

Executive Director, Surgery, Ambulatory
and Cancer Control
Island Health

Normand St-Gelais (Ex-officio)

Director of Corporate Responsibility
Sodexo Canada

AWARD RECIPIENT

Alberta Health Services

As Canada's largest health care provider, Alberta Health Services (AHS) recognizes a commitment to diversity and inclusion (D&I) is essential to improving the experience for its workforce and the diverse population of Albertans who depend on them for high quality, patient centred care and services. AHS has implemented a number of initiatives and activities to support D&I such as:

- Embedding D&I in Our People Strategy (*OPS*) and all of AHS' four foundational strategies.
- Created a D&I Council to prioritize and guide D&I activities.
- Developed a framework and governance structure to guide D&I activities.
- Launched a new initiative called Change the Conversation (CTC). CTC provides employees with tools to address disrespectful behaviours.
- Implemented initiatives to:
 - Create awareness of different cultural celebrations;
 - Create inclusive environments for its workforce; and
 - Reduce barriers for marginalized populations to access care and services.
- Dedicated resources and education for staff, volunteers and care providers to provide culturally sensitive care and service. Resources are focused on:
 - Talent acquisition activities on underrepresented communities aimed at increasing diversity of its workforce; and
 - Activities to support, develop and grow the Indigenous workforce and ensure appropriate and innovative health service delivery for Indigenous peoples.
- In collaboration with the Canadian Centre for Diversity and Inclusion, AHS deployed a diversity census and inclusion survey of its workforce in the spring 2018. The findings are being used by AHS D&I Council to identify and prioritize future initiatives aimed at creating safer and more inclusive workplaces.

Contact: Marni Panas

Program Manager, Diversity and Inclusion
Alberta Health Services
900, 9925 – 109 Street, Edmonton, AB, T5K2J8
587-786-6373
marni.panas@ahs.ca

OTHER NOMINEES

Centre intégré universitaire de santé et de services sociaux de la Mauricie- et-du-Centre-du-Québec (CIUSSS MCQ)

During the storm, believing in job inclusion for people with an intellectual disability or autism spectrum disorder, for the benefit of the whole community!

After 20 years' involvement at one company, March 2018 marked the end of the work journeys of 19 individuals with an intellectual disability (ID) or autism spectrum disorder (ASD). The announcement from the giant corporation Walmart that it was ending its involvement with the volunteer employees caused them to lose their social networks and work identities.

Managers and researchers from our ID-ASD University Institute were proactive province-wide to raise public awareness and re-confirm concepts of clinical intervention such as self-determination and the use of every individual's potential. Over a lifetime, everybody is at risk of losing their job. Managers and their teams made sure that each person was considered individually, with new horizons for achieving their life plan.

In 5 weeks, the individuals and their families remained active, got involved in community actions and gained experience in order to join a new workplace which matched their profile. For the community, collective awareness of individuals' differences and potential brought a wave of empathy and support across the region. Facilitators saw that they needed to take action at every stage of this inclusive trajectory and felt highly appreciated. Strong leadership ensured that the discourse was transparent and respectful.

Contact: Jacinthe Clouthier

Directrice adjointe des services spécifiques et spécialisés clientèle adulte DI-TSA
Centre intégré universitaire de santé et de services sociaux de la Mauricie- et-du-Centre-du-Québec (CIUSSS MCQ)
3255, rue Foucher, Trois-Rivières
819-379-7732 ext. 12235
jacinthe_cloutier@ssss.gouv.qc.ca

Grand River Community Health Centre-Brantford Ontario

The Grand River Community Health Centre (Brantford, Ontario) embraces diversity and the advancement of inclusiveness. The Centre believes in health equity and well being for all citizens. A wide range of initiatives are pursued in support of: Seniors, Indigenous Persons, the LGBTQ2S+ community, immigrants and migrant farm workers, those facing poverty and homelessness, and persons with mental health and addictions challenges. The Centre partners with numerous other agencies, many of which come together in a forum known as the Grand River Healthy Communities collaborative (co chaired by the Centre and Public Health), which advances understanding of social determinants of health and facilitates tangible action to address identified needs.

Through the agency's base budget commitment and through grants, several initiatives have been launched that facilitate ally-ship with, and cultural awareness of diverse populations, such as indigenous persons and the LGBTQ2S+ community. The Centre embraces community development principles which often call for initiatives to be passed on to others whose energies ensure sustainability. Work environments are enriched at the Centre and at other partnering agencies where GRCHC facilitates training. Innovation and "busting barriers" to access, are often key success factors, such as Friday evening clinics for migrant workers, in grocery stores, aided by translators and Spanish speaking staff. The Centre embraces the health and wellbeing model championed by Ontario Community Health Centres which targets marginalized populations and health equity, values diversity and cultural safety, and advances inclusiveness.

Contact: Janet Noble

Director of Primary Care and Community Health
Grand River Community Health Centre-Brantford Ontario
363 Colborne Street, Brantford, Ontario, N3S 3N2
519-754-0777 ext. 255
inoble@grhc.ca

Hamilton Health Sciences

Hamilton Health Sciences (HHS) is a leading healthcare organization in Southern Ontario. It is the largest employer in Hamilton with over 15,000 staff, physicians, researchers and volunteers who serve the health needs of approximately 2.3 million residents of Hamilton and West Niagara. The principles of diversity and inclusion are fundamentally at the core of how HHS ensures its employees and patients have a positive experience at each touchpoint within the organization.

Diversity and inclusion have recently been identified as a key enabler in HHS' People Plan. The People Plan seeks to align HHS' people-focused initiatives with its operational goals. The importance of diversity and inclusion was highlighted as a key priority in the first year of the People Plan, which was endorsed by HHS' Board of Directors and the Executive Leadership Team further emphasizing the commitment that HHS has to diversity and inclusion.

HHS actively strives to create an environment where people's diverse perspectives are valued and inclusion is cultivated allowing them to feel dignified, engaged, enabled, and empowered to deliver on HHS' mission of Best Care for All. HHS recognizes its people are best positioned to do this by increasing the skills, confidence, and capabilities of its people through key projects, such as a demographic survey, focus on disability employment, and a trans inclusive service and care program; training and education, such as The Working Mind, Ally Training, and LGBTQ+ Positive Space Training; and events, such as Black History Month celebrations and an annual LGBTQ+ pride event.

Contact: Jane Hastie

Human Rights and Inclusion Specialist
Hamilton Health Services
100 King St. West., Suite 2100, Hamilton, ON L8P1A2
905-521-2100 ext. 73475
hastie@hhsc.ca

Excellence in Patient Experience Award

This award is focused on honouring organizations and individuals who have set in place innovations that improve the human experience in healthcare. The Excellence in Patient Experience Award will highlight and recognize innovations that have made a change to how patients and their families experience healthcare services.

Sponsored by:



Selection Committee

Victoria Kaminski (Chair)

Healthcare Consultant

Bonnie Cochrane, CHE (Ex-officio)

Managing Director, Huron
General Manager, Studer Group Canada

Marnie Escaf, CHE

Senior Vice President UHN, Executive Lead PMH
University Health Network

Eric Hanna, CHE

President and CEO
Arnprior Regional Health

Janet Knox, CHE

President & CEO
Nova Scotia Health Authority

Arden Krystal, CHE

President & CEO
Southlake Regional Health Care

Marc LeBoutillier, CHE

Chief Executive Officer
Hawkesbury General Hospital

AWARD RECIPIENT

Humber River Hospital

Improving the quality of care for patients and supporting their families is a continuous journey at Humber River Hospital (HRH). Instilled directly in our mission—working together to deliver innovation and compassionate healthcare in our community—the concept of collaborative work to improve is the driving force behind our staff, physicians, and volunteers.

HRH has set in place innovations that improve the human experience in healthcare. Over the past two years we have:

- Rated first within Central Local Health Integration Network (LHIN) peer hospitals for overall hospital experience.
- Over 40 academic activities accepted, which were co-designed improvements with our Corporate Patient and Family Advisory Committee, Specialized Patient and Family Committees (e.g. Bariatrics, Oncology, Nephrology) and our Reinventing Patient Care Councils (unit level quality improvement committees).
- Operationalized the post-discharge call centre.
- Leveraged innovative information, communication, and automated technologies to improve the patient experience:
 - Humanoid robot
 - Command Centre
 - Tesla toy car
- Impactful collaborations with peers to improve patient experience such as with:
 - York University - mental health wellness
 - Studer Group - part of our FY1819 Quality Improvement Plan we conducted patient rounding pilot to improve real-time care experience

Overall, the implemented patient experience and engagement approach is nudging the presence of safety by embedding human factors into hospital operations and creating investment for patients and families. Over the past two years, systemic safety indicators have shown a sustained decrease in critical incidents, medication errors and infection rates.

Contact: Trevor Hall

Director of Quality and Patient Safety
Humber River Hospital
1235 Wilson Avenue, M3M 0B3, Toronto
416-242-1000 Ext. 82120
thall@hrh.ca

OTHER NOMINEES

Bethany Care Society

Bethany Care Society's executive team created Vision 2020 in 2015, an organization-wide call to action for cultural change. Everyone from board members to frontline staff and partners like Aramark engaged in transformative change, responding to resident and family expectations. The changing economy altered funding models and current staff satisfaction contributed as a catalyst for Bethany Care Society to drive new behaviours across the organization through team engagement.

The priority of Vision 2020 was to embed Service Excellence throughout the organization, bringing everyday excellence into daily practices and routines. WAVE was created as an expression of the fundamental idea that ***We Action our Values Everyday*** and supports the premise that exemplary service is central to Bethany's position as an industry leading care provider. WAVE has four key pillars: Leadership Development, Performance Management, Recognition and Service Excellence Standards. All of these things working together to help to ensure that Bethany Care Society creates positive and meaningful experiences for residents, families, tenants, staff and volunteers. WAVE is about striving for excellence, every day and in everything—from the care provided, to day-to-day interactions with residents, tenants, staff and volunteers, how people greet each other, how they support each other and how exceptional people providing exceptional care are recognized. This intention behind everything Bethany does is to improve the life of residents.

Bethany Riverview is the culmination of decades of transformative organizational work. The facility reflects this learning in the design details, in the work routines, the culture of how people interact and the method of how service is delivered. Bethany Care Society believes they have something special and so do the residents and families.

Contact: Nancy Hughes

Vice President & Chief Executive Officer
Bethany Care Society
2915 26th Ave SE, Calgary AB
403-210-4603
Nancy.Hughes@Bethanyseniors.com

**South East Local Health Community Health Centres (CHC)
(Gateway CHC, Country Roads CHC, Kingston Rideau CHC, Rideau Community Health Service,
and Belleville and Quinte West CHC)**

Oral health is a fundamental part of overall health and quality of life, however, there are many barriers preventing access to this care for patients including income, unemployment, no insurance coverage and sometimes the lack of awareness for the importance of oral health. Across Ontario in 2015, nearly 61,000 visits to hospital Emergency Rooms were for oral health problems - 3,779 visits were in the south east. The individuals and families disadvantaged by these barriers and affected by chronic oral care issues, often represent the top 10% of the population inappropriately utilizing acute health care services for management of dental pain.

The South East Local Health Integration Network introduced the Oral Health Program in 2013, to provide oral health promotion and treatment services through south east Community Health Centres, representing a unique approach to improving health outcomes and the well-being of the population. Included with this approach is assistance in navigating a range of supports and programming, including attachment to primary care resources when required. This program is geared towards meeting the needs of those facing financial barriers and who are at risk of severe oral health issues. This includes low income seniors, families and individuals without dental insurance, and those who have an adjusted family net income of \$35,000 or less per year.

The feedback from families and clients who have benefitted from the program provide uplifting stories which reinforces the importance of the program and this work, which has been life changing for so many.

Contact: Marty Crapper

Improving access to better Oral Health

South East Local Health Community Health Centres (CHC)

Country Roads Community Health Centre 4319 Cove Road, Box 58 Portland, ON K0G 1V0

613-272-3443 ext. 242

mcrapper@CRCHC.ON.CA

Island Health Forensic Nurse Examiner Program
Island Health (Vancouver Island Health Authority)

Island Health's Forensic Nursing Program sees patients of all ages and genders post sexual assault and domestic violence. Many times survivors of these violent crimes do not seek medical care or report the incident to anyone. Several factors impede patients from seeking care, including barriers to accessing care, social stigmatization, lack of knowledge that the service exists, what a forensic nurse can do, and where to find one.

The Forensic Nursing Program aims to reduce these barriers to accessing care by bringing the mobile service to the patient — having one localized team that responds to other rural communities, other emergency departments, and urgent care facilities. A key objective of the program is getting out into the community to educate the public about forensic nursing and what our patients' options are for their care. To accomplish this objective Island Health launched the #TrustYourself social media campaign which aims to educate the public about forensic nursing, reduce the barriers of stigmatization surround sexual assault and domestic violence and uses empowering language rather than shaming language. The campaign has begun breaking down the barriers to accessing medical forensic care for survivors of sexual assault and domestic violence. It has sparked a public conversation looking at how social stigmatization can impact survivors and uses survivors' words to empower others to access care and encourage others to get care. The program has allowed for cross-functional collaboration with students (end users), program area, clinical providers, communications, and partners at colleges and universities.

Contact: Dr. Elin Bjarnason

Vice President, Clinical Service Delivery
Island Health
1952 Bay Street Victoria, British Columbia V8R 1J8
250-370-8602
Elin.Bjarnason@viha.ca

Hôpital Montfort

We know very well that people who come to the emergency department do not want to be there. This is why the Montfort Hospital emergency team in Ottawa has worked so hard over the past year to improve the patient experience. To that end, the team focused heavily not only on the best practices, but also on patient-partners' suggestions and comments received during rounds of patients, and from staff and physicians.

By adjusting schedules to better deal with peak hours, extending attendance of a nurse practitioner in the green zone until midnight to take care of patients with less urgent needs, installing of a new CT scanner in the emergency facilities through the support of the Montfort Hospital Foundation, and refining all steps of the process, the emergency department was able to reduce the wait time before initial assessment by a physician or a nurse practitioner by an average of two hours in the past 18 months, and the time spent in the department by our patients has decreased by 30 minutes.

"This means 30 minutes less to pay for parking, 30 minutes less to pay a babysitter, and especially 30 minutes less spent wondering what's wrong" says Sophie Parisien, Emergency Director.

From January through December 2017, more than 56,000 patients who presented to Montfort emergency department have all benefited from these improvements.

All improvements made at Montfort Hospital emergency department are patient-centred and are carried out "WITH YOU, FOR YOU". They are in accordance with the mission, the vision and the values of Montfort, the Francophone University Hospital of Ontario.

Contact: Sophie Parisien

Directrice Clinique
Hôpital Montfort
713 chemin Montréal, Ottawa, ON, K1K 0T2
613-746-4621 ext. 3118
sophieparisien@montfort.on.ca

Excellence in Patient Safety Award

This award recognizes individuals and/or teams that are committed to improving patient safety within the healthcare environment, through leadership, culture, best practices, innovation, and change management expertise.

Sponsored by:



Selection Committee

Arden Krystal, CHE (Chair)

President & CEO
Southlake Regional Health Care

Caroline E. Barbir, CHE

President and CEO
Laval Health & Social Services Centre

Barbara C. Hall, CHE

President and CEO
Maxxcare Solutions

Janice Kaffer, CHE

President & CEO
Hotel Dieu Grace Healthcare

Sheri Whitlock (Ex-officio)

Director, Global Marketing
BD Canada

Goldie Luong

Special Projects Director – Acute Care
Vancouver Coastal Health Authority

Derek McNally (Excused)

Executive Vice President Clinical Services &
Chief Nursing Executive
Niagara Health System

Wendy L. Nicklin, CHE, FACHE

President (Board Chair)
International Society for Quality in Health
Care

AWARD RECIPIENT

University Health Network

Caring Safely Transformation Team

In 2016, University Health Network (UHN) launched Caring Safely, an ambitious initiative to reduce preventable harm, in collaboration with the Hospital for Sick Children. Caring Safely represents UHN's commitment to reduce preventable harm to zero for patients, caregivers, and staff through an organization-wide transformation to become a High Reliability Organization and Learning Health Organization.

In addition to engaging staff, physicians, learners, patients, caregivers, and volunteers in fostering a positive safety culture at UHN and establishing a standardized framework for categorizing and analyzing harm, UHN has focused on reducing six hospital acquired conditions (HACs) that have been found to cause disproportionate amounts of preventable harm to patients: Adverse Drug Events, C. difficile Infection, Central Line Infection, Falls, Pressure Injury, and Surgical Site Infection.

UHN established an organization-wide quality improvement program to reduce the six HACs by implementing evidence-based prevention bundles across all inpatient, critical care, and perioperative units over three years. To ensure sufficient time for embedding the prevention practices, a staggered implementation approach was used to target the areas where the greatest harm was occurring for each HAC. After the first full year of broad implementation, during which each unit implemented at least one HAC prevention bundle, UHN has prevented 239 cases of hospital acquired conditions, which is equivalent to avoided costs of \$2.6 million and 1,250 avoided additional bed days. By preventing these 239 cases, UHN was able to treat 195 additional patients.

Contact: Emily Musing

Vice President Quality and Safety & Chief Patient Safety Officer
University Health Network
Toronto General Hospital
R. Fraser Elliott Building, 2nd Floor, Room 420,
200 Elizabeth Street, Toronto, ON M5G 2C4
416-340-3621
emily.musing@uhn.ca

OTHER NOMINEES

Le partenariat de la gestion quotidienne de la qualité des soins et des services **Centre intégré de santé et de services sociaux Montérégie-Est (CISSSME)**

Since 2011, falls have been one of the most frequent causes of undesirable events, rising slightly each year (MSSS:2011-2016). Analysis reveals that the corrective measures implemented have little impact on this number. The vision of the problem remains incomplete and there is a lack of participation by patients/next of kin and the interdisciplinary team in the analysis process.

Starting from this problem, this improvement project thus strived for participation by patients/next of kin and the interdisciplinary team in analysing an undesirable event. The goal was “a 15-percent reduction in the rate of falls and resulting injuries in the Du Palais unit of Hôtel-Dieu CHSLD for the 2017-2018 fiscal year.” The target was met and exceeded, with a 27-percent decline in the fall rate, because we identified ideas for changes, in particular:

- Including resource patients on committees;
- Involving patients/next of kin in the fall analysis process;
- Incorporating the interdisciplinary team into the analysis process by establishing the quality/safety caucus, safety cross and intentional rounding.

In practical terms, the project team implemented a new incident/accident analysis process, now seen as clinical rather than administrative, which values the role and involvement of client care attendants. As a complement, patients and next of kin collaborate to identify personalized improvement actions designed to avoid a recurrence of falls, and this has produced tangible outcomes. The pilot project will be rolled out to all living units in the 16 CHSLDs of Montérégie-Est CISSS.

Contact: Michèle Ouellet

Chef à la gestion intégrée de la qualité
Centre intégré de santé et de services sociaux Montérégie-Est
1019, rue Gauthier, bureau 315, Saint-Hyacinthe (Québec) J2S 8T2
450 778-5959 ext. 13988
michele.ouellet.cisssme16@ssss.gouv.qc.ca

The Mantra of Standardized Best Practices: Catheter-Associated Urinary Tract Infection (CAUTI)

Hamilton Health Sciences – Juravinski Site

Urinary tract infection (UTI) is the most common healthcare-associated infection. Catheter-associated urinary tract infections (CAUTI) account for up to 80% of these (Parker, et al, 2017). The Juravinski Hospital (JH) is a large academic tertiary care facility and Regional Cancer Centre in Ontario, Canada. The JH participates in the National Surgical Quality Improvement Program (NSQIP); baseline data indicated higher than expected UTI rates among Gynecology Oncology patients at the Juravinski Hospital (10th decile).

Multiple concurrent PDSA cycles were implemented to collect data and drive quality improvement initiatives. An environmental scan of current state, pre and post education practice audits conducted in OR and on surgical units and a NSQIP custom field developed to track the number of urinary catheters indwelling days were created. Basic Strategies to Prevent CAUTIs took a collaborative approach involving an interprofessional team including clinical managers, physicians, nurses, and portering services. CAUTI rates and post op catheter removal dates were tracked by NSQIP data collection. Raw NSQIP data was reviewed monthly and risk-adjusted data reviewed once available.

The result was that NSQIP data Gynecology Oncology surgical patient CAUTI rates dropped from the 10th to 6th decile in the first year of the project. NSQIP data also revealed an escalating rate of early catheter removal rate in the first year of the project with a significant spike in uptake of strategies post education. Supplies and equipment were upgraded to meet best practice needs.

Contact: Dr. Clare Reade

Gynecology Oncologist
Hamilton Health Sciences – Juravinski Site
711 Concession St, Hamilton ON, L8V 1C3
905-387-9495 ext. 64801
creade@hhsc.ca

Humber River Hospital

Humber River Hospital (HRH) serves a dynamic community in Northwest Toronto, housing the busiest emergency department in Ontario with an average of 390 visits per day. Recognized as North America's first digital hospital it is also prestigiously LEED Gold certified. HRH has established a collaborative and interprofessional team approach, which includes the engagement of senior management, frontline clinicians and, patients and families and leverages information, communication, and automated technologies to deliver highly reliable and quality care.

HRH's approach to safety behaviours for error prevention is directly related to understanding how human factors can be embedded into hospital operations both from a provider and patient/family perspective. Over the past two years, applied and sustained improvements have resulted in improvements in patient safety. This is evidenced by a decrease in critical incidents (FY1617 n =7; FY1718 n=4; FYTD1819 n=0).

Numerous initiatives were undertaken to enhance patient experience, safety and quality care, notably leveraging humanoid robots to support coping, cooperation, and resilience of paediatric patients in the operating room and introducing the Quality Command Centre to enhancing real-time measuring and monitoring of safety through embedding situational awareness. These projects support the notion of working together to achieve excellence in patient care and continuing the journey of being a high reliable hospital. HRH's goal is to co-create "human-based" safety systems together, to drive experience and empower the true end-users of healthcare: patients and families.

Contact: Trevor Hall

Director, Quality & Patient Safety
Humber River Hospital
1235 Wilson Avenue, Toronto. M3M 0B2
416-242-1000 ext. 82120
Thall@hrh.ca

Antimicrobial Stewardship Innovative Practice Model
Mackenzie Health

Mackenzie Health launched a multi-year, multi-phase Antimicrobial Stewardship Program implementation over a five-year period to support improved and enhanced patient safety across the hospital. The Accreditation Canada-praised, hospital-wide initiative used structured project management methodology and introduced an innovative, collaborative practice model co-developed by the ASP team and Pharmacy.

Initial phases of implementation yielded a 17 % reduction in inpatient antimicrobial usage and 52% reduction in hospital-acquired Clostridium difficile infection (HACDI) rates. With the goal of sustaining these successes across the organization, the team implemented wide-spread adoption through a unit pharmacist-led ASP model, that required significant education and change management. Within one year of full implementation, hospital-wide, the innovative model demonstrated its ability to sustain the significant antimicrobial reductions and improve patient safety, by further decreasing antimicrobial usage by 10% and HACDI by 19 % (total reduction 27% and 71% respectively). The new ASP model was also able to maintain the improvements in pseudomonas antibiotic resistance achieved by the ASP team.

Integral to the ASP's expansion success was a multidisciplinary approach and ongoing mentorship provided by the ASP team to nurture clinical excellence, empower clinical pharmacists and provide quality assurance. To our knowledge, this sustainable model is unique and can greatly improve patient safety by influencing safer, evidence-based antimicrobial prescribing practices.

Contact: Susan Simao

Pharmacy Manager

Mackenzie Health

10 Trench Street, Richmond Hill, ON L4C 4Z3

905-883-1212 ext. 7155

susan.simao@mackenziehealth.ca

Patient Identification Project: We Check ID. Every Patient. Two Times. Every Time.
Niagara Health

The use of two client identifiers before providing any service or procedure in the care environment is a Required Organization Practice (ROP) identified by Accreditation Canada and a best practice identified by the Canadian Patient Safety Institute (CPSI). Patient identification errors can create a significant patient safety risk resulting in preventable harm: medications and/or treatments may be provided to the incorrect patient in the event that the confirmation of two patient identifiers is not completed.

A review of our baseline data in 2015 illustrated that a standardized evidence informed approach to patient identification was required to enhance practice at Niagara Health. Executive Leadership endorsed an interprofessional team approach that included participation from clinical leaders, patient facing frontline clinicians, physicians, quality specialists, educators and patients/families. The Project Team created a campaign to engage all providers, patients and families to improve safe practice and achieve Niagara Health's purpose of delivering Extraordinary Caring. In fall of 2015, Niagara Health launched the comprehensive patient safety initiative branded as "We Check ID-Every Patient. Two Times, Every Time". The campaign included organization wide awareness of checking patient identification as a best practice, project branding, development of a corporate policy and procedure, creation of a sustainability plan that included ongoing education, auditing, compliance monitoring and reporting. The initiative has raised organizational awareness and demonstrated progressive reductions in errors or near-misses reported through the hospital incident management system over the two-year period since its introduction.

Contact: Zeau Ismail

Director of Interprofessional Practice
Niagara Health
1200 Fourth Avenue, St. Catharines, ON, L2S 0A9
905-378-4647
zeau.ismail@niagarahealth.on.ca

Patients for Patient Safety Canada
Canadian Patient Safety Institute

Patients for Patient Safety Canada (PFPS) is the patient-led program of the Canadian Patient Safety Institute (CPSI). We are patients and family members who experienced preventable harm in our healthcare system and are committed to partnering with organizations at all system levels so everyone experiences safe care.

Since 2006, we have established not only a sustainable community of patient partners but, through successful engagement in patient safety improvements from the front line, to managers, leaders and even the public and governments, we have also nurtured the growth of patient engagement in Canada. Our primary focus is safe care: we actively contribute to the development of leading patient safety and patient engagement practices as well as help identify and spread the leading practices of other organizations.

Through our relationship with CPSI, the issues and goals that matter to patients are integrated into strategic and operational plans. PFPS has continuously improved our performance using internal indicators and independent evaluators. Since PFPS is the Canadian arm of the World Health Organization Patients for Patient Safety Program, we can also benchmark our progress against other “sister” programs around the world. We measure our impact on patient safety through the success of our partners and their strategies, policies and programs.

Contact:

Canadian Patient Safety Institute
#1400, 10025-102A Avenue, Edmonton, AB T5J 2Z2
780-721-2114
patients@cpsi-icsp.ca

Mentorship Award

This award is presented to a leader in the healthcare system who demonstrates exemplary, sustained commitment to mentoring, and inspiring healthcare leadership.

Sponsored by:



Selection Committee

Harry G. Parslow, CHE (Chair)

Managing Partner
The Caldwell Partners International

Katherine Chubbs, CHE

Chief Zone Officer
Alberta Health Services

Dianne Doyle, FCCHL

Past President and CEO
Providence Health Care

François Drolet (Ex-Officio)

Director, Public Affairs
Roche Canada

Wolf Klassen, CHE

Vice President, Program Support
Toronto East Health Network

Nancy M. Lefebvre, FCCHL

Chief Clinical Executive and Senior Vice-
President, Knowledge & Practice
Saint Elizabeth Health Care

AWARD RECIPIENT

David Thompson, CHE

David Thompson, CHE, Vice President, Community Hospitals & Programs at Fraser Health Authority, has over 20 years of experience in various leadership roles in the B.C. health system.

He has held many leadership roles both with Fraser Health and Providence Health Care including Residential Care, Health Information Systems and Quality Improvement. He is passionate about developing others through mentorship, and continually goes above and beyond the responsibilities of his position in order to do so. David is leaving a true legacy with the countless young talent he has mentored.

David's mentorship philosophy is to help individuals realize their innate potential no matter at what stage they are. He is a mentor that is gifted with the ability to see the strengths and potential of their mentees, and to develop that within them.

David is actively involved with the College. He recently held the position of British Columbia Director on the College Board from 2012 to 2018 and has participated in various other committees.

Contact: David Thompson, CHE

Vice President, Community Hospitals & Programs
Fraser Health Authority
Surrey Central Fraser Health Offices, Surrey BC
604-587-4667
david.thompson@fraserhealth.ca

OTHER NOMINEES

Todd Stepanuik

Todd Stepanuik believes that leadership is the art of influence – that the role of good leaders is to influence others in such a way that they feel promoted, encouraged and appreciated. This way, he believes, they can duplicate and replicate these actions – thereby creating synergy within groups, teams and organizations.

Good mentoring, Todd believes, is in exposing others to leading practices and strong role models. Because mentoring is a 2-way street, he feels, that the relationship between the mentor and mentee can be used as a forum for the safe expression of ideas and feedback. In his own organizations, Todd has created ‘stretch’ roles for individuals and personally supervised them through the stretch.

In addition to this, Todd’s efforts at mentoring include, but are not limited to:

- Making commitments with his mentees with regular, frequent and high quality meetings
- Advocating for personal and professional life balance
- Giving back to his community through work on various committees and Boards of Directors
- Commitment to life-long learning

Todd believes that his actions encourage employees and physicians to support and practice new types of behaviours. In fact, Todd sees himself as the chief role model for the organization. His innate ability to establish open, trust based relationships with staff, physicians and staff makes him an accessible resource – and this in turn contributes to creating ‘safe’ mentoring environments.

Contact: Todd Stepanuik

President & CEO

Middlesex Hospital Alliance

395 Carrie Street, Strathroy, Ontario

519-245-5295 ext. 5592

Todd.Stepanuik@mha.tvh.ca

David Kay

I am writing a quick brief to introduce David Kaye as an exemplary candidate for the CCHL Mentorship award. I am the current Director of our emerging health leaders Mentorship program and have had the opportunity to both be a mentee of David as well as to engage him as a mentor for other mentee's. His tireless effort to share his experience and to support emerging health leaders is second to none. He has worked within his own portfolios with new executives and new senior managers to foster a workplace culture that provides the College of Physician's and Surgeons with an atmosphere of professional growth for its executive team second.

Within my own professional journey I have learned much about change management, leadership values and how to thrive through various HR situations. David has freely shared his network contacts when I have needed to further pursue leads on my own professional journey.

A follower of both transformative leader principles and authentic leadership, David Kay exudes a compassionate guidance that is counterbalanced with a desire for excellence within himself, his executive team and the healthcare profession in general.

It is with ease that I recommend David for this award as he has transformed his own organizational culture through developing mentorship program as well as through his own commitment to mentorship. He has also contributed outside of his direct organization to the rest of healthcare through continued support of the mentorship of emerging health leaders.

Contact: David Kay

COO

College of Physicians and Surgeons Alberta

2700 – 10020 100 Street NW, Edmonton Alberta

780-423-4764

David.Kay@cpsa.ab.ca

Andra Duff-Woskosky

Andra is currently the Director of the Geriatric Psychiatry Program at Ontario Shores Centre for Mental Health Sciences. Andra has had 10 years of clinical manager experience as well as 2 years of administrative director experience. I have been nursing for 16 years including 2 years as a novice clinical manager. I have worked with many leaders and mentors (formal and informal) throughout my career and I could not think of anyone more suitable for this award than Andra. Andra has regularly guided me on the development of my personal workplan to improve on my leadership skills based on a recent 360 feedback survey that I chose to have completed. She continues to meet with me on a one-to-one basis to offer constructive feedback and alleviate barriers that I face in the clinical manager role. Andra has initiated formal partnership meetings with other leaders in acute care and long-term care which has allowed me to build relationships with such key stakeholders to improve patient care. Andra has also built partnerships with external key stakeholders to develop a 59 day length of stay agreement. This agreement allows for our patients to be repatriated back to the referring partnering organization in order for us to serve more of our partners' patients.

Andra creates positive and trusting relationships amongst our program and I aspire to be the authentic leader, role model and resilient director Andra is today.

Contact: Andra Duff-Woskosky

Administrative Director, Geriatric Psychiatry Program
Ontario Shores Centre for Mental Health Sciences
700 Gordon Street, Whitby ON L1N 5S9
905-430-4055 ext. 6348
duffwoskoskya@ontarioshores.ca

Arlene Gallant-Bernard

Arlene certainly meets and exceeds the criteria of someone who demonstrates exemplary, sustained commitment to mentoring, and inspiring healthcare leadership. Arlene has been my direct supervisor for the last 5 years and she is a key leader and mentor in helping develop myself as an emerging leader through sharing her wisdom, insight and skills, and as well as taking witness to her role in creating valuable and multifaceted access to organizational dynamics and processes for myself.

Arlene is an experienced healthcare professional having held several senior leadership roles through-out her career. Arlene is a professional coach to staff and physician here on PEI, as well as across Canada. Arlene is also very involved with the CCHL where she does LEADS coaching and she has done a number of mentorships with surveyors on behalf of Accreditation Canada.

Arlene's belief is to support quality healthcare delivery through the empowerment of staff ensuring they have the skills and supports they need to be successful. Arlene is a very strong believer in effective two-way, timely communication and accessibility. Arlene would pride herself in focusing on always being available and engaged to strengthen a culture of transparency and support.

Arlene has a "walk the talk" approach in that she regularly listens and talks to staff, physicians, volunteers, patients and their families, and uses their feedback to improve healthcare delivery and services. Arlene is also very committed to take every opportunity to present to community groups about her work in healthcare and how rewarding, yet challenging it can be, as way to raises awareness.

I consider myself very fortunate to have had the opportunity to be mentored by someone of Arlene's caliber. I would strongly encourage her consideration for this award recognition.

Contact: Arlene Gallant-Bernard

Chief Administrative Officer for Family and Community Medicine, Provincial Renal Program, and Hospital Services West

Health PEI

65 Roy Boates Ave, Summerside, PE C1N 2A9

902-438-4514

algallant-bernard@gov.pe.ca

Kathryn Hayward-Murray

Kathryn is a values-based leader who works tirelessly with her peers both on the frontline and at the executive level to shape high quality care and exceptional experiences for patients at Trillium Health Partners (THP).

Kathryn's commitment to the advancement of nursing at all levels is evidenced by her accessibility to the entire nursing team at THP. Known as a mentor that staff feel confident approaching in all situations, Kathryn makes it a priority to include the voices of those on the frontline. In everything that she does, the people come first.

Kathryn has a reputation for rolling up her sleeves to chip in wherever necessary. Her impassioned leadership has enabled the organization to achieve and retain status as a Best Practice Spotlight Organization (BPSO), as selected by the Registered Nurses Association of Ontario (RNAO). As lead of professional practice for nursing and allied health professionals, Kathryn played a pivotal role in THP's achievement of Exemplary Standing for 2017-2021, as issued by Accreditation Canada. This is the highest possible score, exceeding the requirements of the Qmentum Accreditation Program.

Kathryn demonstrates outstanding leadership at THP and makes significant contributions externally, particularly through her leadership as a Children's Healthcare Canada Board Member. In this capacity, Kathryn has driven excellence and innovation in health systems that care for children and youth at the local, provincial and national level.

Contact: Kathryn Hayward-Murray

Senior Vice President, Patient Care Services & Chief Nursing Executive
Trillium Health Partners
100 Queensway W, Mississauga ON, L5B 1B8
905-813-1100 ext. 6437
Kathryn.Hayward-Murray@thp.ca

Jeff Hohenkerk

Jeff Hohenkerk demonstrates exemplary, sustained commitment to mentoring, and inspiring healthcare leadership. Not only is Jeff committed to mentoring others, he takes it one step further to ensure mentorship is alive and well at all levels of the organization – building a culture of continuous knowledge transfer.

Recently, Jeff initiated Quinte Health Care’s participation in a community co-op program for youth with disabilities, starting with the Food Services team. During an interview he was asked about why he initiated the program given how busy things are in the hospital system. He responded, “It’s about seeing the ability in all people. Our teams get the opportunity to be mentors and share their skills and experience, and the participants inspire us with their enthusiasm and new ideas.” Jeff recognizes that no matter how busy things get, it’s essential to invest time and energy into our people and the communities we serve.

Mentorship has been a lifelong passion for Jeff. He has mentored countless colleagues, friends and fellow leaders over the years. Currently, he mentors a medical student as a career advisor, previous colleagues and formal and informal leaders. In his role on the Senior Leadership Team he mentors his peers as well as his boss, CEO Mary Clare Egberts. “Jeff has a way of engaging others that is both fearless and compassionate,” Ms. Egberts explained. “He doesn’t shy away from challenging behaviours in a manner that is clearly about learning and reflection, and celebrates the good in others. He exemplifies effective mentorship.”

Contact: Jeff Hohenkerk

Vice President & Chief Transformation Officer
Quinte Health Care
265 Dundas Street East, Belleville, ON K8N 5A9
613-969-7400, ext. 2338
jhohenkerk@qhc.on.ca

Scott Jarrett

Holding the position of Executive Vice President & Chief of Clinical Programs, Scott's devotion to meaningful mentorship strives from personal experience when beginning his journey as a student mentee. Over the past 12 years, Scott has played a key role in not only enhancing patient experience at Humber River Hospital (HRH), but is instrumental in shaping and inspiring healthcare leaders throughout and beyond the organization.

Hosting Administrative Residents from McMaster and the University of Toronto, Scott avidly mentors the new generation of leaders by sharing wisdom and advice while providing supportive coaching throughout their journey at HRH. His genuine desire to mentor is exemplified through his 'open door policy' where trust and mutual respect are the foundation of his approach. Scott offers mentees unique access to organizational members and projects providing an unprecedented experience for his students.

Scott naturally engages colleagues, continuously promoting and providing opportunities to team members that allow them to work towards personal and professional growth. Spearheading the LHIN-wide Reactivation Care Centre, Scott displayed his mentoring and leadership skills on an external platform leading the successful collaboration of a multi-hospital initiative.

His continued devotion to providing fair and equitable guidance amid his demanding career is a testament of his resilience, character and devotion to supporting leaders in healthcare. Scott's collaborative approach defines his leadership style encompassing trust, transparency and continuous support throughout the organization.

Through his commitment to mentoring, Scott has distinctively become, and will continue to be a leader and role model at Humber River Hospital.

Contact: Scott Jarrett

Executive Vice President & Chief of Clinical Programs
Humber River Hospital
1235 Wilson Avenue, Toronto, Ontario, M3M 0B2
416-242-1000 ext. 82119
sjarrett@hrh.ca

Dr. R. Lynn Stevenson

Throughout her career, Dr. Lynn Stevenson has been driven by passion for health system improvement, while fostering the development of future leaders.

She has dedicated her career to leading operations, improving quality and practice, and pursuing research in Canadian healthcare. Within these settings, she has demonstrated a highly dedicated ongoing commitment to supporting growth and development of health leaders.

Lynn has formally and informally mentored innumerable health leaders throughout her career; as former Associate Deputy Minister in the BC Ministry of Health, as a senior executive with BC Health Authorities and as Adjunct Professor in the schools of nursing at the universities of British Columbia and Victoria. She views mentoring as a reciprocal relationship and a critical investment in ongoing learning. Through this lens, she builds mentorship capabilities in those she works with, ensuring development of leaders who see mentorship as a fundamental leadership competency.

Lynn demonstrates a steadfast commitment to ongoing learning and professional development, and motivates those she mentors to pursue stretch and growth opportunities. She is a Fellow of the CCHL, a CFHI EXTRA Fellow, and Certified corporate director, and intentionally invests in those she mentors to define and work toward their own professional development goals.

Lynn's influence on health leaders across the province is immeasurable. She has made a significant, sustained investment in others throughout her career, inspiring those she works with to pursue their passions and new challenges. This award is a wonderful opportunity to recognize her impact on current and future health systems leaders.

Contact: Dr. R. Lynn Stevenson

Consultant
7009 Island View Place
250-507-6090
lynstev15@gmail.com

Nursing Leadership Award

The Nursing Leadership Award builds on the themes of patient-centered care and nursing leadership, and honours those who demonstrate an ongoing commitment to excellence in these areas.

Sponsored by:

The logo for Baxter, featuring the word "Baxter" in a bold, italicized, blue sans-serif font.

Selection Committee

Alice Kennedy, FCCHL (Chair)

CEO and Registrar
Newfoundland and Labrador Council for
Health Professionals

Alex Adani (Ex-officio)

Vice President, Health Systems
Baxter Corporation

Dr. Rhonda Crocker Ellacott

Chief Executive Officer
North West Local Health Integration
Network

Dr. Doris Grinspun

Chief Executive Officer
Registered Nurses Association of Ontario

Leslie Motz, CHE

Vice President, and Chief Nursing Executive
Lakeridge Health Oshawa

Barbara Steed, CHE

Executive Vice President Patient Services
and Chief Practice Officer
Markham Stouffville Hospital

Lucie Tremblay, CHE

Directrice des Soins infirmiers
CIUSSS Ouest de l'Île de Montréal

AWARD RECIPIENT

Dr. Vanessa Burkoski

Dr. Vanessa Burkoski is the Chief Nursing Executive and Chief, People Strategy at Humber River Hospital (HRH). Vanessa provides executive nursing leadership that fosters system-wide interprofessional collaboration with a focus on safety, quality and patient and family-centered care as evidenced by:

- Developing and implementing HRH's Quality and Safety Framework and integrated Patient Safety Plan which has set HRH on its journey to become a High Reliability Hospital;
- Engaging all nurses to participate in continuous quality improvement initiatives through Reinventing Patient Care Councils, and the implementation of RNAO Best Practice Guidelines as a pre-designated Best Practice Spotlight Organization;
- Implementing a predictive workforce planning methodology to inform the development of actionable health human resources plans, and a strategic staffing solution that has met 94% of the organization's staffing needs; and
- Implementing deep dive into safety issues, such as the significant reduction of falls causing harm at HRH, significant reduction in hospital-acquired pressure injuries, as well as supporting HRH's achievement of highest patient experience scores in Ontario's Central Local Health Integration Network (LHIN).

Vanessa has made remarkable impacts outside the organization with her expertise on a range of nursing and health care issues. For example, she:

- Has served as the Ontario Provincial Chief Nursing Officer to the Minister of Health and Long-Term Care; and
- Is an Associate Professor at the University of Windsor and Queen's University, and holds an academic appointment at the Lawrence S. Bloomberg Faculty of Nursing, University of Toronto.

Vanessa's outstanding achievements exemplifies a commitment and excellence in nursing, leadership and patient-centred care.

Contact: Dr. Vanessa Burkoski

Chief Nursing Executive and Chief, People Strategy
Humber River Hospital
1235 Wilson Avenue, M3M 0B2, Toronto, Ontario
416-242-1000 ext. 82156
VBurkoski@hrh.ca

OTHER NOMINEES

Rosanne Beuthin

Dr. Rosanne Beuthin exemplifies excellence in nursing leadership, practice and championing patient-centred care.

As Clinical Nurse Specialist, End of Life Care, she has led the development and implementation of the Medical Assistance in Dying (MAiD) program for Island Health. In the first 24 months of service, the rate of MAiD on Vancouver Island was approximately five times that of the rest of Canada. She has worked tirelessly to ensure that MAiD has become a part of the spectrum of options within End of Life Care for residents of Vancouver Island.

Driven by a passion for quality care, she has ensured the development of a patient-centred program that is accessible to the population across urban, rural and remote areas. As a nurse leader, she develops processes, policies and practice supports to ensure nurses and the interprofessional team have the tools required to ensure provision of high quality End of Life Care. She has been involved in advocacy, teaching and policy development both regionally and provincially, influencing practice and service delivery for British Columbians.

Her intense passion for research and clinical ethics is evident in her ongoing work to evaluate and share program results through publications and teaching. She works directly with colleagues and students to foster research opportunities directly related to practice.

Rosanne is a consummate nursing leader and is driven by a passion for high quality care. Her impact on practice and access to care is evident across Island Health and she is well deserving of recognition through this award.

Contact: Rosanne Beuthin

Clinical Nurse Specialist, End of Life Care
Island Health

Rm 3247 Gorge Road Hospital, 63 Gorge Road East, Victoria BC V9A 1L2
250-519-3500 ext. 32624

Rosanne.beuthin@viha.ca

Dr. David William Byres

As British Columbia's Associate Deputy Minister of Clinical Leadership and Chief Nurse Executive, Dr. Byres is responsible for primary care, population and public health, hospitals, specialized services, indigenous health and nursing policy. In 2017, Dr. Byres released the nursing policy secretariat recommendations, which directed changes to support an optimal role for nursing in BC including policy support for a recent increase of 200 NP's in primary care and a team based approach to care delivery.

As Providence's Vice President and Chief of Professional Practice and Nursing, David was instrumental in leading a successful Supreme Court injunction aimed at ensuring access to diacetylmorphine for those most severely addicted to heroin.

Dr. Byres holds a Doctor of Nursing Practice from American Sentinel University, as well as Master's and Bachelor's degrees from the University of British Columbia. David is a Certified Healthcare Executive with the Canadian College of Health Leaders and holds adjunct faculty appointments with the University of British Columbia and the University of Victoria.

David is a previous recipient of the College of Registered Nurses' of British Columbia's Excellence in Nursing Leadership award and a recipient of the Dean's Medal of Distinction from the University of British Columbia's Faculty of Applied Science. The Canadian Nursing Association recognized him as one of the country's most influential nursing leaders. He is currently co-chair of the federal / territorial Principal Nurses Advisory Task Force and a co-principal investigator of a CIHR funded study examining equity for indigenous people in emergency departments in British Columbia.

Contact: Dr. David William Byres

Associate Deputy Minister of Clinical Leadership and Chief Nurse Executive
British Columbia Ministry of Health
PO Box 9639 STN Prov Government, Victoria BC, V8W 9P1
778-678-7264
David.Byres@gov.bc.ca

Julie Caffin

Julie Caffin's 22 years in healthcare have been truly inspirational. Her strong leadership skills coupled with experience and drive for quality improvement and patient and family centeredness speak to her dedication to healthcare. Julie holds a Bachelor of Nursing (York University), a Master of Health Policy, Management and Evaluation (U of T), and is an adjunct lecturer at Queens University - School of Nursing. She has held a number of leadership positions within the domains of research, education, clinical practice and management including Program Operational Director of Cardiac, Critical Care and Emergency Program at Kingston General Hospital (KGH), Professional Practice Consultant at KGH and Critical Care Coaching Team with the Ministry of Health and Long-Term Care. Julie has influenced the development of nursing leadership, implemented staffing model changes in support of high performance of staff, improved patient safety through transfer of accountability processes and with the implementation of a rapid response team.

As Vice President and Chief Nursing Executive at Brockville General Hospital (BGH), Julie has successfully built community partnerships, developed strong leaders with a focus on patient outcomes. She has facilitated significant improvements on resuscitation response, improvements on Emergency wait times and promoting the introduction of telemetry in the medical/surgical units at BGH. She has introduced additional leadership roles with the implementation of Nurse Practitioners and Administrative Coordinators. Julie chairs the Patient & Family Advisory Council, partnering with the patients and families in leading healthcare at BGH. Julie is a motivated, dedicated and transformational leader in our healthcare system.

Contact: Julie Caffin

Vice President and Chief Nursing Executive
Brockville General Hospital
75 Charles Street
613-345-5649 ext. 1199
JCaffin@brockvillegeneralhospital.ca

Kelly Parker

Kelly joined the Edmonton Oliver Primary Care Network (EOPCN) as a Registered Nurse specialized in Geriatrics. Kelly's passion is working with seniors. She joined our team to help deliver a new program, developed by Dr Sheny Khera and Dr Marjan Abassi, called the Seniors Community Hub (SCH). This program, with the resources of the EOPCN, supports and enhances seniors' health and wellness and delivers integrated primary health care that is centered on the goals and priorities of seniors. The SCH has most recently has been **awarded the top innovation for frail elderly in Canada by the Canadian Frailty Network**. We are in no doubt that Kelly's input has contributed to the success and recognition of the program.

Kelly's honesty and integrity are an inspiration to our organization and to the patients we serve. Her commitment and ability to work collaboratively with the lead physicians, staff, and patients has helped the program become regarded as an innovative model. Kelly is currently the only nurse employed with the program and works closely with the patient, their family, their caregiver, physician, EOPCN services, specialists, and social and community support to provide holistic care to the patients.

Kelly has been a leader in building the Seniors Hub resources and tools to support the program. Kelly sees the patients, performs a full assessment on them with multiple tools, provides home visits and assists the patient, their family and caregiver to the resources/supports needed to live a healthy life. This leadership in program development is inspirational.

Contact: Kelly Parker

Clinical Manager

Edmonton Oliver Primary Care Network

130, 11910 111th Ave., Edmonton, AB, T5G 0E5

780-453-3757

kparker@eopcn.ca

Dr. Marcy Saxe-Braithwaite

Marcy impresses others with her commitment and dedication to safe and quality patient/family centered care. Marcy is an innovative, authentic and courageous leader who has demonstrated her ability to transform the way healthcare has been delivered. In her current role as the Senior Director of Perioperative/Surgical Services at the Nova Scotia Health Authority Marcy has been instrumental in designing and implementing a business case to decrease the surgical wait times for hip/knee arthroplasty for Nova Scotians. This entailed the implementation of a “wellness model” with the focus on patients being up and about, dressed in their street clothes and going home within one to two days. Patient outcomes are improving and wait times are decreasing. The model has been recognized by colleagues across the Country. Marcy has also implemented the National Surgical Quality Improvement Program (NSQIP) to enhance the quality of care and patient outcomes. Marcy has also implemented a Quality Council that she co-chairs with two community citizens (patients) to role model the value of patient input into decision making within the Surgical Program of Care. Marcy is a nursing role model and mentor for the nursing profession.

Marcy is a certified leadership coach, trained in LEADS, active with the Canadian College of Health Leaders, the past Board Chair of the American College of Health Executives (ACHE), and President for the Academy of Canadian Nurse Executives (ACEN).

Contact: Dr. Marcy Saxe-Braithwaite

Senior Director, Perioperative/Surgical Services

Nova Scotia Health Authority

1276 South Park St. Room 4A-4052, Centennial Building, Halifax, Nova Scotia

902-456-8053

marcy.saxe-braithwaite@nshealth.ca

Dr. Karima Velji

Karima is the Vice President of Clinical Services at Ontario Shores Centre for Mental Health Sciences. Through her commitment and leadership, our organization has been able to maintain an average seclusion duration of less than 13.0 hours (year-to-date). Karima is closely partnering with clinical managers to remove barriers to improve patient care including formally allowing protected time for managers to be on the units to support staff and patients.

Since her leadership, Ontario Shores has been awarded the Certification Employer Recognition Award through the Canadian Nurses Association (CNA). This award honours employers who have demonstrated exemplary support for the certification process in nursing specialties. Karima's leadership has also significantly improved our plan of care completion rates to ensure plans of care are updated by the interprofessional teams to support patient recovery.

Outside of the organization, Karima was the president of the CNA in 2014 to 2016 and is currently the Vice Chair of the Board of Directors of Accreditation Canada. At the system/global level, Dr. Velji is a consultant to global sites, including East Africa, the Middle East and Asia, for development of quality of care and academic plans. Karima's leadership continues to positively impact quality in nursing and patient care as well as patient recovery. I cannot think of anyone more deserving for this prestigious award other than Karima and I aspire to be the leader she is today.

Contact: Dr. Karima Velji

Vice President of Clinical Services
Ontario Shores Centre for Mental Health Sciences
700 Gordon Street, Whitby, ON L1N 5S9
905-430-4055
veljik@ontarioshores.ca

President's Award for Outstanding Corporate Membership in the College

This award recognizes a corporate member who has consistently, over a period of several years, helped the College achieve its mission, vision and strategic directions.



AWARD RECIPIENT

Huron Studer Group Canada

Huron Studer Group Canada, a company that helps organizations move with urgency to achieve results, positively impacting quality, safety and financial performance, has been a corporate member of the College since 2013. Their primary representative, Bonnie Cochrane, CHE, is a member of the Corporate Advisory Council and a previous member of the NHLC Planning Committee.

Huron Studer Group Canada has participated in HPRS™, in Forum Publications and has sponsored NHLC. They have recently supported the College in the creation of the new Excellence in Patient Experience Award, which is focused on honouring organizations and individuals who have set in place innovations that improve the human experience in healthcare.

Contact: Bonnie Cochrane, CHE

Managing Director, Huron

General Manager, Studer Group Canada

Mount Pearl, NL

709-351-1427

bonnie.cochrane@studergroup.com



Recognition in Delivering Value-based Healthcare

This recognition aims to increase the profile and understanding of value-based healthcare by honouring an organization, or team, that is deliberate in changing the way that care is delivered, resulting in improved patient outcomes. This means that patients are being optimally cared for at the right time, in the right setting, and at the right cost.

Recognition made possible by a grant from:



Selection Committee

Shirlee M. Sharkey, CHE (Chair)

President and CEO
Saint Elizabeth Health Care

Daniel Fontaine

Chief Executive Officer
BC Care Providers Association

Dr. Robert Halpenny

Consultant

Elma Heidemann, FCCHL

Founding Co-chair, Canadian Health
Leadership Network (CHLNet)

Brock Hovey, CHE

VP, Corporate Services, Accountability and
Quality
Central West LHIN

Jo-Anne Palkovits, CHE

President and CEO
St. Joseph's Health Centre (Sudbury)

Howard Waldner, CHE

Dean of the School of Health and Public
Safety
Southern Alberta Institute of Technology

Pamela Winsor, CHE (Ex-officio)

Sr. Director, Value-based Healthcare and
CMO
Medtronic Canada

AWARD RECIPIENT

Western Regional Health Authority, Long Term Care Program and Central Regional Health Authority, Long Term Care Program

Releasing Time to Care: A journey towards optimizing care of frail elderly LTC residents with diabetes.

Beginning in 2014, Western Health and Central Health, two RHAs in Newfoundland and Labrador (NL) in collaboration with the Canadian Agency for Drugs and Technologies in Health (CADTH) began a journey to optimize the care of frail elderly Long-Term Care (LTC) Residents with non-insulin dependent diabetes (NIDO). Data, best practice evidence and key knowledge brokers were used to mobilize health authority stakeholders to introduce changes in practice.

A review of clinical practices compared to best practice indicated variation throughout both regions. Recognizing an opportunity cost with continuing with current practices; local and interregional working groups began an improvement journey with the support of CAOTH. The opportunity to redirect resources and time to improve quality of care by discontinuing ineffective practices drove change. Other enablers included leadership, policy changes, provider and family/resident engagement, provider education and awareness, decision support tools, clinical champions and monitoring and evaluation. An evaluation framework was developed across the 2 RHAS. Better value, better health and better care was achieved.

This transformational change has influenced provincial policy. In 2016, Newfoundland and Labrador Provincial Drug Program introduced a new policy that specifies the number of test strips funded per year (without special authorization) for individuals with NIDO. This policy is focused on "testing for a reason." In 2018, Health Standards Organization (HSO) recognized this initiative as a Leading Practice - "a practice carried out by a health and/or social service organization that has demonstrated a positive change, is people centred, safe and efficient."

Contact: Kelli O'Brien

Vice-President of Long-Term Care, Rural Health and Quality
Western Health
Western Health, P.O. Box 2005, Corner Brook, NL A2H 6J7
709-784-5629
kelliobrien@westernhealth.nl.ca

OTHER NOMINEES

CIUSSS du Centre-Sud de l'Île-de-Montréal

Appointed assistant director general when the institution was established in 2015, one of Pierre-Paul Milette's greatest organizational mandates was the development of the project management model for Hôpital Notre-Dame and increased mobilization of all management teams in order to make this major project a success. Recipient of the CIUSSS du Centre-Sud-de-l'Île-de-Montréal (CCSMTL) Exceptional Manager award in 2018, Mr. Milette expertly guided the transformation of this institution, a first in Quebec. Determined to change the way care and services are provided, Mr. Milette is the architect of a significant paradigm shift within the organization to ensure that patients receive optimal care.

In just one year of existence, the new Hôpital Notre-Dame has quickly become part of a continuum of highly integrated care, thanks to the implementation of a multitude of care options and services offered directly within the community, thus boosting access, continuity and fluidity of care. Determined to change practices so that patients receive services that are in line with their real needs, in the right place and at the right cost, Mr. Milette has demonstrated, through this change of culture, exceptional leadership in rallying all partners. The CCSMTL and all the efforts to establish a value-based and transformative approach to Hôpital Notre-Dame throughout its organization is certainly a huge step in this direction. The excellence of care offered as a result of this innovative project could not have been achieved without Pierre-Paul Milette at the helm.

Contact: Dr. Elizabeth Lemay

Conseillère aux communications
CIUSSS du Centre-Sud de l'Île-de-Montréal
1560 rue Sherbrooke Est
514-882-5645
elizabeth.lemay.ccsmtl@ssss.gouv.qc.ca

William Osler Health System

The RELIEF (Remote self-reporting of symptoms by patients) application is a tool developed by William Osler Health System Palliative Care Medical Director, Dr. Martin Chasen, in collaboration with 'uCarenet'. The RELIEF application allows Palliative Care patients to self-report their symptoms daily, in their homes, using electronic standardized assessment tools. Their status is monitored in real time and thus allows for more timely and appropriate responses by the Osler Palliative Care team which may be a telephone assessment call with advice, an urgent home visit by community nursing or palliative care physician, an appointment at the next available clinic, or an OTN (Ontario telemedicine Network) PC-VC visit within 48 hours, or a direct admission to Acute Palliative Care Unit.

Treatment is initiated before symptoms escalate, thereby resulting in fewer ER visits. Patients are triaged and community nursing resources are prioritized appropriately for patients needing urgent physical and psychosocial symptomatic care in the home. Likewise, utilizing PC-VC the right patients receive timely and appropriate care by Palliative Physicians in the right place - their home, clinic, or admission directly to Acute Palliative Care Unit. There is clear benefit to the patient not having to come to hospital in those cases where the triage indicates it was not necessary. This initiative addresses system level measures including, the percentage of patients dying in hospital vs home, the percentage of patients receiving home care Visits in the final 90 days of life, and the percentage of patients having one or more ER visits,

Contact: Dr. Martin Chasen

Medical Director Supportive and Palliative Care
2100 Bovaird Drive East, Brampton Ontario, L6R 3J7
905-494-2120 ext. 57342
martin.chasen@williamoslerhs.ca

Trillium Health Partners

One out of two persons in Ontario will be diagnosed with cancer in their lifetime. Trillium Health Partners (THP) provides all radiation treatments for cancer patients residing in two of the fastest growing LHINs in the province of Ontario. Over the past 10 years, the center has seen a 93% increase in radiation treatments well above the overall provincial growth rate of 33%. However, the growth in infrastructure to meet this demand has not kept pace. Compared to other regional cancer programs, THP provides the greatest number of treatments per machine. With one Linear Accelerator (LINAC) being replaced and volumes increasing, the center needed to find a way to create capacity in order to continue to deliver high quality care close to home for patients and avoid creating a waitlist for lifesaving cancer treatments or transferring patients to cancer centers further away from home, creating a travel burden for the patient/family and fragmented care.

Through extensive engagement THP implemented a provincial first of operating seven days a week to optimize capital resource utilization creating capacity while continuing to deliver high quality care to patients close to home. As a result of this initiative, THP was able to maintain access, and improve patient satisfaction with existing resources. This initiative is serving as a prototype for Cancer Care Ontario and other provincial cancer agencies across Canada on delivering value-based healthcare by optimizing existing infrastructure/capital resources to deliver access, quality and improved patient experience in a fiscally responsible manner.

Contact: Sandy Garraway

Clinical Program Director, Oncology
Trillium Health Partners
2200 Eglinton Ave W, Mississauga, ON L5M 2N1
905-813-4207
sandy.garraway@thp.ca

Robert Wood Johnson Awards

Established in 1956, the Robert Wood Johnson Awards are presented to one student from six Canadian universities offering a Master's of Health Administration. Recipients are selected by their respective faculty for their individual achievements and promising contributions to health services management.



AWARD RECIPIENTS

Gaithre Kalainathan, Dalhousie University

Prior to obtaining her Master of Health Administration (MHA) from Dalhousie University, Gaithre Kalainathan completed her Bachelor of Medical Laboratory Science at the University of British Columbia. Her passion for health care leadership was affirmed when volunteering at Czorny Alzheimer Centre within the Fraser Health Authority, as well as managing recreational therapy programs for a charitable organization. Gaithre completed her MHA Residency placement as a member of the Strategy Deployment and Clinical Optimization team at Richmond Hospital within the Vancouver Coastal Health Authority. During her time in the MHA program, Gaithre was elected to be a First-Year Representative and later Vice President for Dalhousie's Association of Health Administration Students. Gaithre also coordinated patient flow at the Halifax Outreach Prevention Education Support (HOPES) Health Centre, an interdisciplinary student-led clinic. Having been exposed to several areas of health care throughout her undergraduate and master's degree, Gaithre strives to advance health care delivery by improving the accessibility and coordination of care. A huge advocate of interprofessional collaboration, Gaithre hopes to leverage the expertise of different health professions to create positive systematic change.

Sophie L'Espérance, Université de Montréal

Sophie has been practicing as a nurse clinician since 2016 following her graduation from Université de Montréal with a Bachelor of Science in Nursing. Ever since, she has been working at the Emergency department of the Centre intégré de santé et de services sociaux de Laval, where she puts to good use her interpersonal skills, leadership and professional rigour. Her desire to optimize and improve the quality of care encourages her to collaborate closely with various healthcare professionals and to ensure the patient is at the heart of all care and services provided. Furthermore, she is currently completing her Master of Health Administration from the École de santé publique de l'Université de Montréal. Her internship showed her a different perspective on strategical, tactical and operational levels of management, in addition to allowing her to better grasp the complexity of the healthcare institutions. Regardless of her young age, Sophie demonstrates her unwavering desire to get involved in the healthcare system by her notable contribution to the Nursing Youth Committee. She strongly believes that all up-and-comers in the health system must get involved and show initiative in order to reach new heights.

Meghan Perkins, University of Ottawa

A graduate of Public Health and Psychology at Queen's University, Meghan started her health care career working alongside the Chief of the Department of Obstetrics, Gynecology and Newborn Care, at The Ottawa Hospital as Department Coordinator. It was an experience that offered her a wide range of opportunity and sparked her interest to take her career to the next level. For that she would need a Masters of Health Administration. She enrolled at the Telfer School of Management at the University of Ottawa.

Meghan selected The Royal Ottawa Mental Health Centre to complete her MHA Residency Field Project. There she worked with the Champlain Pathways to Better Care group, a regional quality improvement team tasked with tackling system-level mental health and addictions (MH&A) projects. During her residency she developed and received funding for the first ever Champlain MH&A Health Human Resources (HHR) Strategy. The Strategy not only guides psychiatry recruitment and retention in the LHIN, but also looks at how the region can optimize current MH&A HHR to ensure appropriate and timely access to care.

Meghan joined Pathways in January 2019 as the first-ever Champlain MH&A Project Manager, Regional Recruitment to bring the strategy she developed to life. Her focus is the recruitment and retention of psychiatrists. She also leads investigations in to new models of care that aim to increase access to MH&A services while reducing burnout in Champlain's small but dedicated psychiatry workforce.

Staci Silverman, University of Alberta

Staci Silverman recently completed the Master of Public Health (MPH) in Health Policy and Management at the University of Alberta, School of Public Health. Prior to her MPH, Staci obtained a BA (Distinction) in Sociology and Psychology from the University of Alberta. She then worked at the Alberta Medical Association in the department of Health Economics. The loss of a family member to cancer after a long journey through the health care system inspired her interest in learning about patient engagement and navigation in safe and high-quality systems. Staci is the Chair of Push For Your Tush Edmonton, a fundraiser and advocacy event for Colorectal Cancer Canada. In 2018, she was the student representative on the Canadian College of Health Leaders Northern Alberta Chapter Board, and served as the Health Policy and Management Director at Large for the School of Public Health Students' Association. She completed her MPH practicum at the Canadian Patient Safety Institute, mainly supporting the Patients for Patient Safety Canada group on a Government Relations project. Staci is excited to combine her knowledge of health policy and management with her passion for patient engagement to positively impact the health care experiences of Canadians.

Marnie Howe, University of Toronto

Marnie Howe is currently a palliative medicine physician in Toronto and completing her MHS in Health Administration at the Institute of Health Policy, Management and Evaluation at the University of Toronto. She completed her Family Medicine residency and Palliative Medicine fellowship at the University of Toronto. She has been practicing at the Temmy Latner Centre for Palliative Care (TLCPC), Sinai Health System, since completing her training in 2011. Her main focus is delivering palliative care to patients at home. She was involved in the Integrated Palliative Care Team pilot project with the Toronto Central CCAC, which was awarded the Minister's Medal in 2014. The success and spread of this project and her passion for integrated

care for patients led Marnie to pursue a leadership role at TLCPC, as the home-care physician lead for Toronto Central. She works closely with the Toronto Central LHIN palliative care team, as well as service provider agencies in the community, with the goal of providing patients with the care that meets their needs at home.

Aside from her clinical work, Marnie is also the physician lead for special projects in the office of Medical Affairs at Sinai Health System. As part of her academic work, she is an Assistant Professor at the University of Toronto, Department of Family and Community Medicine. She has published papers on how to teach end-of-life care in the home, as well as integrating early palliative care within oncology care for advanced cancer patients. Marnie's professional work is balanced with a fulfilling life outside of medicine, as a partner and a mother to two young daughters.

Kyla Gunderson, University of British Columbia

Kyla is committed to improving the health of Canadians through effective, evidence-based and compassionate leadership. After earning a Bachelor of Commerce in Accounting and receiving her Chartered Accountant designation, Kyla entered the financial services sector with an international firm where she spent several years working with organizations in the health sector. Her passion for healthcare was sparked and Kyla turned her attention to a career in healthcare.

Kyla joined LifeLabs, Canada's largest diagnostic laboratory where she supported the deployment of LifeLabs' strategy, including leveraging the benefits of the company's rapid growth through accelerating value-creating activities enabling innovation and ensuring that the best quality care is achieved for the millions of Canadians LifeLabs serves every year.

While completing her Master of Health Administration at UBC, today Kyla leads the government contracts team at LifeLabs, strengthening relationships with the Government of British Columbia and creating new and innovative ways for organizations working across the private and public sectors to connect, communicate, and collaborate to maximize the quality of services provided to British Columbians.

Kyla is also an active member in the community, donating her time to the Salvation Army, a member of the CCHL Lower Mainland Chapter Executive Committee and a long-time avid soccer player.

The Robert Zed Young Health Leader Award

This award is presented to a young Canadian healthcare leader who has demonstrated leadership in improving the effectiveness and sustainability of Canada's health system.

Sponsored by:



Selection Committee

Tony Dagnone, FCCHL, FACHE (Chair)

Past President and CEO
London Health Sciences Centre

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CEO
e-Health Saskatchewan

Diane Browne, CHE (Ex-officio)

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Agnew Peckham & Associates

Andrew Williams, CHE

President and CEO
Huron Perth Healthcare Alliance

Dr. Ben Chan

Assistant Professor
University of Toronto

Barbara C. Hall

President and CEO
Maxxcare Solutions

AWARD RECIPIENT

Dr. Nicholas Mitchell

Since taking an academic role with the University of Alberta as an Assistant Professor in 2012, Dr. Nicholas Mitchell has demonstrated tremendous growth as a leader in healthcare and has had a remarkable impact on our health care system. Early on, in 2014, he took on his first senior leadership role, becoming the Senior Medical Director for the Addiction and Mental Health Strategic Clinical Network (AMH SCN) for the province of Alberta.

Key initiatives include:

- Introducing Repetitive Transcranial Magnetic Stimulation to Alberta as a new treatment for depression;
- Development and evaluation of Canada's Choosing Wisely recommendations for psychiatry; and
- Working with the Canadian Mental Health Association in the development of accredited MH peer support workers in Alberta.

More recently, in 2016, he has also taken on the role of Provincial Medical Director for the AMH Provincial Team for Alberta Health Services (AHS). Key initiatives include:

- Alberta's Valuing Mental Health Strategy;
- AHS' Enhancing Care in the Community Strategy;
- the Health Minister's Opioid Emergency Response Commission; and
- A provincial review of post-secondary mental health services.

Given his trajectory, he will not only continue to have a robust impact provincially, but also nationally and internationally on the field of mental health and addictions. Dr. Mitchell is well poised for senior healthcare leadership positions in the future. He has demonstrated outstanding vision and leadership through his current positions which have resulted in robust improvements within Alberta Health Services.

Contact: Dr. Nicholas Mitchell

Provincial Medical Director, Senior Medical Director

Alberta Health Services

1E6.13 Walter C Mackenzie Health Sciences Centre, Edmonton, AB, T6G 2B7

780-407-6564

ndm@ualberta.ca

OTHER NOMINEES

Dr. Roger Boyer II

Roger is a young, compassionate Anishinabek leader from the Mississauga First Nation in Northern Ontario and has already made a significant mark in the health care sector. In 2004, he started advocating for systemic change through his work with Alberta's Provincial Co-Management Suicide Reduction Committee.

Returning home in 2009, he served as an elected Councillor and Health and Social Services Director for his First Nation. He led the development of a comprehensive regional primary care service with Mamawesying North Shore Community Health Services and since 2009 served on the North Shore Health Network board of directors and was chair from 2015-18. He has been a member of the Ontario Hospital Association board since 2016.

In 2017, Roger founded Makwa Wise: an organic indigenous health care company. Makwa Wise prides itself in both the architecture and innovation of health system transformation at the four points of service delivery: patients, process, policy, and providers. Makwa Wise has committed to a philosophy of delivering wellness innovation solutions for everyday healthcare provides opportunities for transformation within primary, secondary, tertiary approaches to purpose, process and outcomes has allowed for us to walk beside our clients in a good way, *mino-biimaadziwin*.

At the time of writing, the company has been awarded seven contracts spanning from outsourcing healthcare management, locum healthcare human resource support, quality assurance/improvement through business-intelligence, research and innovation. Roger is a Certified Health Executive from the Canadian College of Health (NEON Lights Chapter member) with a PhD in Intercultural Studies.

Contact: Dr. Roger Boyer II

Chief Architect of Healthcare Transformation
Makwa Wise
969 Queen Street East, Sault Ste. Marie ON P6A 2C2
705-987-6071
roger.boyerii@gmail.com

Dr. Jennifer Burke

Dr. Jennifer Burke is an outstanding medical leader who has consistently been successful at increasingly responsible medical leadership roles. As an exemplary hospitalist physician at our hospital since 2008, she has participated in many quality projects and has been an active participant on quality committees. She has served in a significant leadership role representing General Practice within the Alberta Medical Association. In early 2018, Dr. Burke took on a new role as Department Head for Family Medicine at Chinook Regional Hospital. Within that role, she has collaboratively developed a strategy to build a stronger, more engaged department and to establish best practices for medical leadership. She has since committed to an additional role working as a physician leader in Patient Safety and Quality. Dr. Burke is considered a high priority for ongoing leadership development and further advancement of her role.

On top of these significant commitments, Dr. Burke has taken on an additional project with a focus on women in medicine. The Ethos Project is a movement towards a culture where female physicians flourish. Interested female physicians collaborate and brainstorm to identify practices/policies/projects which positively impact the working environment for female physicians and potentially will shift cultural norms. Examples of initiatives under way within the Ethos Project include: Maternity Leave Policy development; mentorship and coaching; visible female physician leadership; a breastfeeding room for female physicians; transparent leadership recruitment practices; and a network of support. The project was recently presented at a Senior Leadership Meeting where it received significant positive attention.

Contact: Dr. Jennifer Burke

Zone Clinical Department Head/Co-Lead Family Practice and Integrated Quality Management
Physician Lead
Alberta Health Services, South Zone
Medical Affairs, 960 19 Street South Lethbridge, Alberta T1J 1W5
403-388-6531
Jennifer.Burke2@albertahealthservices.ca

Melissa Chin

Emphatically, Melissa has demonstrated significant leadership growth and advancement in her health care career.

I have known Melissa since 2014, when she was working at UHN in Corporate Planning (with previous experience as a health care consultant with Deloitte). She reached out to me to become her mentor to assist her in progressing into a healthcare leadership role. Contacting me was certainly outside her comfort zone, a practice she has applied repeatedly and which is a requirement of all leaders who are likely to encounter unfamiliar situations.

In her corporate planning duties, Melissa worked closely with the senior team at UHN. Involvement with the leadership group at such a large organization provided her with valuable experience

Melissa embraces professional opportunities. She then took on an international assignment where she spent more than a year working for UHN in Qatar. Upon her return, she assumed a supervisory role at UHN.

With her increased experience and more global perspective, Melissa was recruited and became the Executive Director for the Multinational Association of Supportive Care in Cancer (MASCC) www.mascc.org. Melissa now leads this international multidisciplinary organization that is dedicated to research and education in all aspects of supportive care for people with cancer. Melissa leads a network that involves more than 70 countries. Her leadership accountabilities include the development of an annual symposium that attracts participants from all over the world, research, teaching, an international journal and toolkits to help clinicians.

Melissa has gone from a series of progressive positions in one of Canada's largest hospitals to becoming the Chief Executive of an international organization that supports the care and treatment of those with cancer. Melissa is making a substantial contribution to health care and most definitely demonstrates significant leadership growth and advancement in her health care career.

Contact: Melissa Chin

Executive Director

Multinational Association of Supportive Care in Cancer (MASCC)

215 Spadina Avenue, Suite 400, Toronto, Ontario, M5T 2C7

416-722-8950

mchin@mascc.org

Trevor Hall

Trevor Hall is Humber River Hospital's (HRH) Director of Quality and Patient Safety. Trevor has demonstrated leadership growth as a firefighter, registered nurse, and Director. Trevor holds a masters of science, degrees in business and nursing, and fellowships in Quality Improvement and Biosecurity.

Leading a highly reliable team, Trevor has achieved results for patients, families, and HRH, including:

- Enhancing patient experience by co-designing services and systems (HRH is #1 within the CLHIN for overall patient satisfaction);
- Supporting frontline ownership and creating investment by implementing unit-driven quality committees (Over 40 academic projects recognized);
- Embedding human factors into hospital operations (HRH has seen a decrease in critical incidents, medication errors, etc.); and
- Sharing and creating knowledge by publishing papers, posters, keynote speeches, etc.

Trevor is committed to improving the healthcare system as well:

- Championing human factors and behavioural insights as the Co-Chair of the Canadian Patient Safety Institute's Human Factors in Healthcare Network;
- Designing safety systems for countries such as the Government of Canada, the Hashemite Kingdom of Jordan; and intergovernmental organizations such as the Organisation for the Prohibition of Chemical Weapons;
- Managing complexity for the Government of Ontario by welcoming and providing primary care to our new Syrian-Canadian residents; trained Ontario's paramedic services and hospitals to manage a patient with Ebola; and provided crisis support to the Attawapiskat First Nation.

Trevor aims to build safety into healthcare systems and is a passionate safety advocate, which positions him as an influential leader of the future.

Contact: Trevor Hall

Director Quality and Patient Safety
Humber River Hospital
1235 Wilson Avenue, M3M 0B2, Toronto, Ontario
416-242-1000 ext. 82120
thall@hrh.ca

Jeff Kerk

Jeff is an enthusiastic, dynamic and collaborative administrative leader guiding patient care excellence by launching innovative service improvements across performance metrics. Jeff has had many accomplishments at OSMH over the past two years including:

- Pioneer of Diagnostic Imaging and Laboratory Quality Program and accreditation with the Institute for Quality Management in Healthcare.
- Launched a successful Interventional Radiology program to meet the needs of the local and regional program serviced by the hospital.
- Reduced MRI wait times from a provincial high to a provincial low within 5 months of starting at OSMH.
- Pioneered a third-party revenue generating program to see additional revenue in net profit for the hospital.
- Implemented a Diagnostic Service wide quality and maintenance program called MEND that streamlines front-line access to services, while improving quality and reducing costs.

His leadership ability has been identified as a leader who is on a clear path for becoming a senior executive. In this current year he has been appointed Interim Director of Human Resources and Nutrition and Food Services. In addition, has been given oversight of four corporate projects.

In early 2018 Jeff was nominated by the local Liberal rising association to be the candidate for the provincial election. Jeff ran as a candidate in Barrie-Springwater-Oro-Medonte and represented the party's interests in an honourable manner.

Contact: Jeff Kerk

Director of Diagnostic Services and Interim Director Human Resources and Nutrition and Food Services

Orillia Soldiers' Memorial Hospital

170 Colborne Street West, Orillia Ontario, L3V 2Z3

705-984-5375

JJKERK@OSMH.ON.CA

Jennifer Quaglietta

Jennifer Quaglietta has been a member of the College for many years. In the last 10 years, Jennifer has had a progressive career advancement given her combination of experience, professionalism, passion for healthcare transformation and ability to deliver outcomes and results for highly complex, sensitive initiatives. Jennifer has worked in health care consulting, the Ontario Public Service, agency and the acute care sector.

With the goal of creating greater system value, Jennifer has spent much of the past decade providing strategic advice and leading teams aimed at advancing the transformation of healthcare delivery at the system/provincial, regional and local level. She has delivered and implemented complex change across the sector including Integrated Cancer Screening program, Community Health Links and the Excellent Care for All Act, 2010. Furthermore, she has supported the development of policy to respond to the anticipated needs of Ontarians, provided forward thinking and used policy to form the basis of strategic direction and advice to the Ministers of Health and Long-Term Care.

In Jennifer's current role, she has enhanced the patient experience and transformed the manner in which performance measurement and improvement is communicated, delivered and sustained. She has led every aspect of quality and led the comprehensive engagement process to create a patient- and family-centred care strategy.

By creating a positive culture, Jennifer has demonstrated a values-based leadership style used to build and retain a high-performing team recognized for its expertise, dedication to excellence in service recovery, patient safety, innovation, patient relations and quality improvement.

Contact: Jennifer Quaglietta

Director, Patient Experience, Quality, Patient- and Family-Centred Care
North York General Hospital
4001 Leslie Street, North York, Ontario
647-400-9769
Jennifer.quaglietta@nygh.on.ca

Paul Young

Paul is a member of the Canadian College of Health Leaders and received his CHE in 2015.

I have known Paul for a number of years. First as manager of Diagnostic Imaging at Prince County Hospital and now as Administrator of Community Hospitals West. During this time, Paul has continued to pursue education and leadership development at the same time effectively supporting his staff with his positive attitude and moving his services forward. Paul has proven to be an innovative leader with the implementation of many initiatives including: an integrated Volunteer Program between Acute and Long Term Care Services; Designed and implemented a first in Canada Telerounding program for inpatient physician coverage; A Nurse Practitioner model for Long Term Care and Alternate Level of Care patients in acute care just to note a few.

I feel Paul would be a worthy candidate for this award given his achievements both with his leadership development, his enthusiasm/passion about improving the healthcare on Prince Edward Island and nationally. He is a visionary but the part about Paul that separates him from the rest, is his ability to have a vision, collaborate with key stakeholders in a system that has many challenges and see his vision to successful completion.

I am grateful to have Paul on my team and I truly believe he is most deserving of this award.

Contact: Paul Young

Administrator for Community Hospitals in West Prince

Health PEI

148 Poplar St, PO Box 10 Alberton, PE C0B 1B0

902-853-8663

psyong@gov.pe.ca