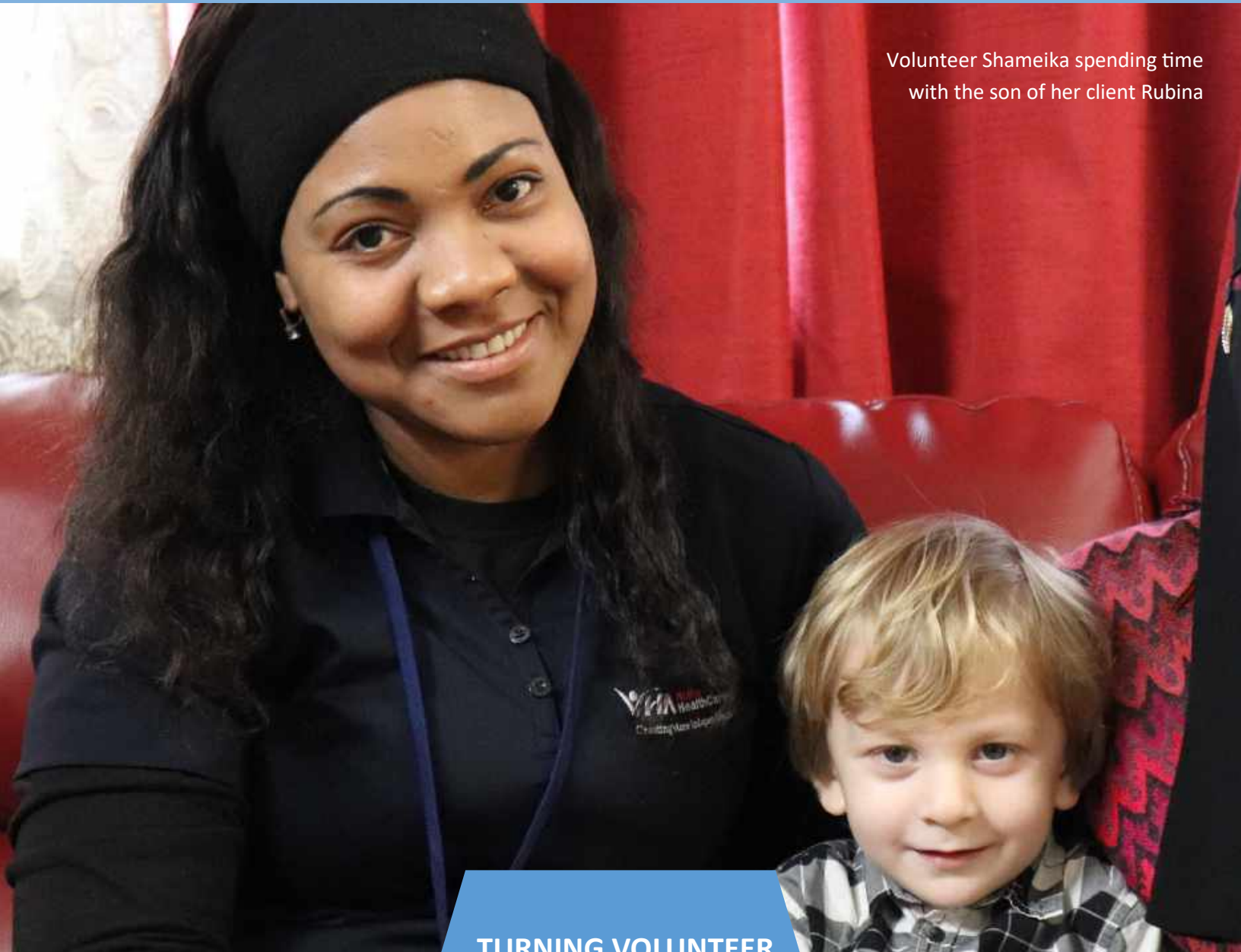


EXCELERATOR

The latest developments within our walls and across the communities we serve



Volunteer Shameika spending time with the son of her client Rubina

DEDICATION, SWEAT & FLEXIBILITY

How three VHA Steering Committees have worked together to improve services for clients and families in priority populations

TURNING VOLUNTEER EXPERIENCE INTO CAREER SUCCESS

The story of a VHA volunteer who transitioned into a full-time role as a Child and Family Support Worker

THE WAITING PAIN

VHA's Junior Researcher Development Award Winner explores how waiting for health care services affects children and families

CREATING THE SENIOR FRIENDLY SEVEN

SF7

As our population ages, a “senior friendly” movement has emerged in health care that recognizes the special health circumstances of a growing number of frail seniors. Senior-friendly care facilities were the first to emerge, but since many seniors live and receive their care in the home, providing a coordinated and consistent care response across the health spectrum means extending senior-friendly principles into home care.

In 2016, the Regional Geriatric Program of Toronto (RGP) launched an initiative to equip home health care providers with the skills to recognize and respond appropriately to senior frailty. With a grant from the Retired Teachers of Ontario Foundation, RGP partnered with VHA Home HealthCare and multiple community partners to develop the **Senior Friendly Care Framework**—a blueprint of guiding principles and defining statements for what senior-friendly care should look like across our health care system in order to achieve the best possible health outcomes for older adults.

Empowering Home Care Workers

To put the framework into action in the home, the RGP engaged personal support workers and their coordinators to co-develop a senior-friendly toolkit for home care workers to use. “The goal was to understand the realities of home care and provide personal support workers with tips, strategies and materials that reflect those realities,” says Dr. Kathryn Nichol, Vice President Quality, Best Practice, Research and Education & Chief Nursing Executive at VHA.

The toolkit, dubbed the “Senior Friendly Seven” or SF7, provides practical guidance around seven key areas health care workers should consider when supporting frail seniors: (1) delirium, (2) mobility, (3) social engagement, (4) continence, (5) pain, (6) nutrition and (7) polypharmacy.

“PSWs work with seniors every day and they play an important role in keeping them safe. Each toolkit alerts PSWs to key things they should be aware of and thinking about during their care—in a format that is genuinely helpful to the PSW because PSWs had a hand in creating it.”

Stacie-Ann London, a PSW Care Team Supervisor at VHA, participates in a discussion about the Senior Friendly Seven toolkit.





Jane Ogo Makwe, a VHA Personal Support Worker, with her client.

A Tool for Every Situation

Stacie-Ann London, a PSW Care Team Supervisor at VHA, has been using the toolkit with her team. “As team leader, my main focus is staff engagement because [my team members] work autonomously,” she says. “I have started using information from the toolkit in my weekly message to them, so on a regular basis they get information about delirium or mobility or pain. I also have a monthly meeting with my team and have started to incorporate the ‘SF7’ at those as well.”

The toolkit has been well received by front-line care providers also. “A lot of times you can miss the little things,” says Nancy, a PSW. “The toolkit talks about things like facial cues, for example, so even though

“... Having the opportunity to co-create evidence informed, practical tools with our partners has a trickle-down effect. It empowers our staff to be part of Ontario’s health system transformation, enhances the care they provide and leads to better outcomes for our clients.”

clients may hide some of problems, you know to be looking out for things and can find the underlying reasons and discuss it.”

Kathryn notes that pursuing innovative partnerships like this, which support VHA’s care providers to deliver spectacular care and support client independence, is a hallmark of VHA’s service approach. “VHA has always sought improved ways to support the needs of our clients and their families, and we often look to the wisdom of our teams for ideas. Having the opportunity to co-create evidence-informed, practical tools with our partners has a trickle-down effect. It empowers our staff to be part of Ontario’s health system transformation, enhances the care they provide and leads to better outcomes for our clients.”

To learn more about the Senior Friendly Seven toolkit, please watch the video at:

<https://youtu.be/jKNuPzHAEg>

VHA partners with CANES to open a new Integrated Care Clinic in Mississauga



Members of the Malton Integrated Care Clinic.

VHA regularly works with partner organizations to improve the delivery of health care to our clients.

A recent example of the power of partnerships is our collaboration with CANES Community Care to open an integrated care clinic in the Central West LHIN. The Malton Integrated Care Clinic opened on December 18 and represents VHA's first nursing presence in the area of any magnitude.

CANES Community Care is a non-profit organization that does a lot of personal support work in the Etobicoke area and other communities within the Central West LHIN.

In its announcement of the new clinic, the Central West LHIN said it will operate according to the LHIN's "clinic first" approach to nursing services. Specifically, every patient is assumed to be a clinic patient, and will attend an Integrated Care Clinic to receive their nursing services. The clinic will serve mostly acute care patients, as well as those who require wound care and IV support.

"When CANES offered the building, the equipment and transportation for clients who need it, we saw a wonderful opportunity to provide the nursing and rehab services," said Vicki MacCallum, VHA's Interim Regional Manager for Central West and Mississauga Halton. Vicki is coordinating VHA's involvement in the clinic with the help of Nursing Supervisor Richard Rementilla. "This is a natural fit since CANES' values are so aligned with our own."

Several new staff have been hired for the clinic, which is open 7 days a week, 8 am – 8 pm.

"VHA provides a limited amount of child and family nursing services in the area, but this is the first adult nursing support VHA will be providing in Central West," said Vicki. "The goal of this clinic is to better support people in the community and we're very excited to be part of it."



Turning Volunteer Experience

INTO CAREER SUCCESS

Shameika Rose started as a volunteer at VHA in 2018. This led to a full-time position with VHA as a Child and Family Support Worker.

Volunteering provides great opportunities to gain skills, expand one's network and have a positive impact on the community. And in the case of Shameika Rose, it was also the gateway to employment at VHA. Shameika started volunteering with VHA's Child and Family Support program in 2018 after learning about it at a college fair. "I wanted to give my time and see if I could help someone," she says. "I was an early childhood teacher so I love children. When I read up on VHA, I said, 'Ooh this is nice: child and family support. Let me go and try to give my time to a mother and child who need it.'"

The Child and Family Support volunteer program places volunteers with families in need of respite from child care. Families who qualify for this program are below a particular income level and have other challenges such as recent surgeries or other medical issues and limited

local support systems. "We want to provide an environment where volunteers are engaged, challenged and rewarded," says Dawn Ashford, VHA's Volunteer Coordinator. "The opportunities are hands-on and our volunteers are usually able to see their impact immediately, which is really what drives more engagement. They want to make a positive difference in people's lives and we help to facilitate that."

Child and Family Support volunteers spend three hours with their client once a week for 12 weeks. Volunteers must pass an interview and screening process before being placed with a family and assignments are based on the family's proximity to the volunteer, making it easier for volunteers to get to the client's home each week.

[Continued on page 5...]

“When she arrives, he knows this is his time to play and sit down with her,” says Rubina. “He’s not attached to me. I can do my work and do something for myself... and have peace of mind there’s someone there that my son likes and he’s comfortable. It was a wonderful experience.”



[...continued from page 4]

Once Shameika was accepted to the program, “My role as a volunteer was to come into the home, and try to give support,” she explains. The role demands flexibility and emotional intelligence. “If the mother is not well, I can attend to the child so the mother can rest, and play with and feed the child. I also provide moral support to the mother. If she’s depressed, I will try to find ways to help her, and even pass on the info to my supervisor at VHA so they can look into other resources to take care of her.”

With her prior childcare experience and her dedication to the role, Shameika was a natural—and her exceptional skill didn’t go unnoticed by her clients. “She was amazing to be honest,” says Rubina, one of the parents Shameika supported. A mother of four young children, one of whom has complex medical needs, Rubina was referred to VHA by her social worker at Holland Bloorview Kids Rehabilitation Hospital.

“I was told ‘we have a volunteer available for you’ and I was really not sure what a volunteer could do for me. When someone isn’t paid, they’re not always dedicated to their work. [But] Shameika did a great job. The way she spent time with my child and supported me and my older daughter was amazing, to be honest.”

While Shameika played with Rubina’s two-year-old son, it gave Rubina the freedom to do other things. “When Shameika arrived, my son knew this was his time to play and sit down with her,” says Rubina. “I could do my work and do something for myself... and have peace of mind there’s someone there that my son likes and he’s comfortable with. It was a wonderful experience.”

The consistently positive feedback about her performance made its way to Shameika’s supervisor, prompting a call. “[She] asked me if I would like to work for VHA. I was surprised. I said, ‘They have jobs?!’ and



Shameika plays with Rubina's two-year-old son (top left). Shameika, her client Rubina and Rubina's son (top and bottom right).



she said, 'Yes! You're so great and wonderful, I would like you to be part of VHA.' I was excited and said, 'I am ready!'

Shameika made the transition from volunteer to full-time Child and Family Support Worker in the summer of 2019. She is still surprised at the speed with which she shifted to a paid role, but she loves the work. As a volunteer, she was able to care for children ages 0-4, support the mother as a listener and help her find resources in the community to support herself and the family. "As an employee I can do a lot more. I give the mom support; I bathe, feed, and play with the child; and depending on the physicalness of the mother, I can help around the home where possible."

Shameika is grateful to VHA for recognizing her skills.

"Sometimes it's not only about knowledge, it's about experience," she says. "I recommend to others that are interested...to volunteer at VHA. And if they are looking to work in that field, a job at VHA may also be possible if they are willing to continue on that path."

For Rubina, who was once skeptical about volunteers, her VHA experience has changed her mind. "I feel that VHA is doing an amazing job with the volunteer work. They have great workers. I was really feeling low when Shameika joined us, and she really was an angel to me at that time. I feel like whenever I get a chance, when my kids grow up, I would definitely become a volunteer myself because I know the impact it has on the family."

To learn more about Shameika's story, please watch her video: <https://bit.ly/38CSWB7>.



Meet one of VHA's Wonderful Personal Support Workers: Van Bation

Van is celebrating his 5 year anniversary with VHA Home HealthCare this month. He is a Personal Support Worker (PSW) in Toronto and is known for being very compassionate and caring with his clients. His clients say that he always does his job with his heart and makes them feel safe and cared for, like a friend. Van won VHA's Client Choice Award in 2016 thanks to his great work ethic and caring demeanor. We wanted to reach out and ask him a few questions three years later.

Can you tell us a little bit about your background?

I came to Canada as an immigrant from the Philippines on June 12, 2013. That day is very important to me. It is not only the day I immigrated to Canada, but it is also the day that the Philippines commemorate their independence from the American regime over a century ago.

I decided to move to Canada because I believed that it would afford me many opportunities. Immigrating to a different country is never easy and the period of adjustment was definitely difficult, but I believe that going through that and establishing my life in Canada has been a success. Success starts with a dream and a vision. My dream was to have a successful life in Canada, doing something that I love. It is not easy, but

we make do and endure the challenges along the way and I am happy here.

What inspired you to become a PSW?

I wanted to make difference in others' lives. To help people is a highly rewarding experience. It's a great feeling when I am able to turn what could have been a really difficult day into a great one for my clients. My time with them is often full of laughter and fun.

What do you love most about your role as a PSW?

I love to contribute to the quality of life for my clients and their families. I love helping to promote their independence, emotional and physical well-being, mobility, comfort and safety.

Can you tell us how working with your clients makes you feel?

Sometimes when you work with people for a while, they really allow you to get close. I think that shows they trust you, and I like that aspect. And, when you help somebody and you see them recover and get a smile on his or her face, it's so rewarding. Even when you support someone who is dying—maybe just giving them as much comfort as you can. It may not be the best moment, but you feel better that you did all you could have. I have been taking care of one client for almost four years now and he has dementia and some days he becomes delirious which is very challenging. The family tries to give him the best comfort they can. He has come to trust me and seems to see me more like a family member. Now we sometimes just laugh like friends or family members.

Can you share a heartwarming story about one of your clients?

I had another client with dementia, who also had a macular degeneration and was blind. One day, his 80 year old wife said to him: 'Honey, I'm your wife!!!' and my client suddenly opened his eyes and smiled 'Oh! How come you got your hair done?'. Somehow, he saw and remembered that his wife of 68 years regularly went to the hair dresser. It was a happy moment for them and I felt lucky to be part of it.

What qualities do you think are most important for PSWs to do their best work?

I believe that PSWs should have empathy and compassion towards their clients in order to meet their needs. You need to be real and you need to be yourself. You are trained for the professional aspect of the care, but giving yourself to somebody comes from the heart. The best PSWs are those who are called to do it, and go above and beyond.



Van helping a client with his walker.

Can you tell us about something that has happened to you in your work with VHA that has made you feel really good?

Once, I overheard friends of my clients' family talking. They were saying 'they are very satisfied with the PSW from VHA.' It makes me feel so good to think about that and know that I am making such a difference for my clients. It makes the job worth doing, even if sometimes I'm really tired at the end of the day.

Are there any comments you would like to make about VHA and your role here?

All I can say about being a PSW at VHA, I am so proud to be part of this prestigious company. It is very rewarding, especially if you receive a lot of compliments from your clients... it means that they are very satisfied with the service you rendered to them.

To learn more about Van and his role as a PSW, you can view his Client Choice Award video:

<https://youtu.be/0Ay9027yhOs>.

DEDICATION, SWEAT & FLEXIBILITY

**Three Steering
Committees
collaborate with client
partners to deliver a
roadmap for change**



VHA's Palliative Steering Committee meets in 2017.

Through changing portfolios, staff changes and shifting priorities, VHA stayed dedicated to the work of the three Steering committees focused on improving services for key client populations.

It was a tall order from the beginning – do the research, identify the priorities, and then collaborate with stakeholders to create a roadmap for the future for VHA's delivery of services to three significant client population areas. Oh, and do it all in five years.

This is what three steering committees were asked to do when they were initially formed in 2015.

The committees were a natural outgrowth of the 2015-2019 VHA Strategic Plan, which called for dedicated action around three population areas: Palliative Care, Children with Complex Medical Needs (CCMN), and Cognitive Impairment. For each of the committees, this was an exciting opportunity to tackle the gaps in key service areas and deliver concrete change.

The close of 2019 signaled the end of that strategic plan and along with it, the wrap-up of these committees.

In their own way, each of the committees evolved to meet the challenges before them. “We realized we had to be flexible,” says Matt Wong, CCMN Committee Co-Chair and a Professional Practice Specialist. Changing portfolios, staff changes, and shifting priorities contributed to the pressure but didn't distract the teams from putting their heads down and getting the work done.

While the committees might have felt a huge responsibility to improve the delivery of care – and that was definitely a big part of it – according to Catherine Chater, Chair of the Cognitive Impairment Committee and a Professional Practice Specialist in Rehab, there were really two key stakeholders: “The intent to provide excellence in care cuts across two angles,” she said. “One being the direct care that we provide as an organization, making sure that's aligned to best practices. And then, because the caregiver has such a profound role, particularly for dementia and the community, being able to support the caregiver and what they're doing was a core component of the work.”

Learning and growing was two-way

The composition of the committees was designed to be interdisciplinary. “The idea of having a diversity of ideas and experience in the room was very beneficial, and that included having client partners as integral contributors,” says Matt. “The learning and growing was really two-way throughout the process.”

Client partners were embedded with each committee, and the clients’ lived experience with palliative care, children with complex medical needs, and cognitive impairment gave committee members crucial lessons in what was needed in the field and the client partners were also dedicated to developing practical solutions.

“One of our client partners really advocated for the PSWs,” said Professional Practice Specialist (Nursing & PSW) and Palliative Steering Committee Co-Chair Janet Chan. “She identified some gaps in preparing the PSWs for MAiD (Medical Assistance in Dying) and with her feedback, we were able to create a video for the PSWs on what to expect with MAiD.” Another client partner proved to be a key resource in creating the VHA Palliative Care website.

Catherine emphasized how client partners were key drivers of the work. One client partner on the committee had been a caregiver for two people with dementia and figured out a useful way to engage with PSWs. “She set up a communication log with the PSWs who were coming into her home, and that log is now part of the formal VHA activation toolkit,” said Catherine. Another is a nurse by training who also cared for someone with dementia. She looked for new approaches and discovered a program that is already changing dementia care in Canada: the Butterfly Model of Care. “With Physiotherapist Brandi D’Souza’s help, we were able to secure a \$35,000 grant from the Spark Initiative (<https://www.cabhi.com/the-spark-program>) and that was the seed funding needed to build the Emotion-Focus Activation Program, which is our version of the Butterfly Model,” says Catherine.

VHA’s Palliative Committee.



Palliative Steering Committee’s Key Strategic Outcomes

- Several MAiD projects: “MAiD in Their Eyes” video; MAiD page on VHA’s intranet; MAiD education sessions for nurses and PSWs; MAiD rehab sessions; and a MAiD brochure
- Created a bereavement toolkit and continuing education for palliative staff
- Developed a palliative orientation pathway after surveying palliative nurses on education needs
- Palliative Interdisciplinary Educational Symposium event launching in 2020
- Palliative PSWs are supported in attending palliative conferences
- Rolled out a new Palliative phone number, dedicated exclusively to palliative patients; call agents are being trained to hasten nurse-client connection
- Palliative care website launched and is being regularly updated
- Implemented pilot survey of 30 clients and areas of concern were addressed – calls will be ongoing and recommendations considered for action
- Developed Palliative Care brochure
- Client, family and staff palliative stories featured in Palliative Newsletter

“Activation is already a core part of what the PSWs are doing, but the inclusion of this model has really moved our thinking in a different direction,” she adds.

The collaborative spirit of the committees and their inclusion of client partners delivered more than new treatment approaches – Janet says they had a positive emotional impact as well. “For our client partners who

had just lost family members, they said joining the committee gave them a new family and they found purpose again,” said Janet. “One was proud that she could show her daughter that life goes on and you can still contribute.”

The Connected Care Circle grows

As they considered new ideas and solutions, the committees were grappling with how to roll them out with minimal resources. “There are so many great initiatives out there, but figuring out how to deliver education and new programs without big budgets was definitely a challenge,” said Catherine. The challenge

VHA’s Cognitive Impairment Committee.



Cognitive Impairment Committee’s Key Strategic Outcomes

Use the power of music to help people with dementia: distribution of free MP3s with personalized music

Multi-tiered training for PSWs, OTs, rehab specialists and supervisors to support clients with dementia and manage responsive behaviours

Built the Emotion Focus Activation Program, and with a Spark grant, expanded into an e-module for caregivers in the community

With a client partner, developed a communication log that is now part of the VHA activation toolkit

Development of a website for caregivers of people with dementia

Implementation of training programs for care team supervisors when they come on board and You First external training for direct personnel like PSWs

was quickly overcome with some creative thinking and forging stronger relationships with research partners. Catherine cites the Spark Grant as one creative solution. Another came through the development of an education and support program for community and home care nurses called Connected Care.

“We talked to Sick Kids Hospital because they are usually the first touch point for parents with children with complex medical needs,” says Matt. Sick Kids was happy to share their processes and took it one step further with the development of Connected Care, a larger partnership of close to 18 organizations (among them: Holland Bloorview, Emily’s House and VHA) who together have created a forum for discussion about emerging needs and educational workshops for community and home care nurses.

“This is an important example of how we worked within our mandate to strengthen organizational and research partnerships,” says Matt.

With dementia patients, words fail, but research has shown that music provides a way for them to connect with past memories and emotions. A connection was made with The Alzheimer Society, which was looking for a way to expand its Music Project. “We partnered with them and they provided no cost MP3 players loaded with personalized music for our clients,” said Catherine. “Our best documented feedback came from the Music Care program, which contributed to reduced responsive behaviors, emotional regulation, and general feelings of well-being for both caregivers and clients.”

Breaking down siloes was never a deliberate goal of the committees, but according to committee leads, they now consider it one of the most powerful side effects.

PIES delivers the perfect learning experience

Nothing says inter-professional collaboration better than the creatively-titled education forum developed for staff by the CCMN steering committee – PIES or the Paediatric Interdisciplinary Educational Symposium. “In home care it’s very easy to become siloed,” said Matt,

“and so we thought, why not bring all the nursing providers working with children with complex needs together in a safe space and share our challenges, strategies and successes?”

PIES included keynotes and presentations as well as hands-on opportunities to work together. This year medical directors from Sick Kids and Emily's House were invited to speak as well as client partners. The Palliative Care Steering Committee was watching from the sidelines and was soon lobbying for its own version of a PIES day. “We saw the benefits of an education session focused on bereavement and caregiver support and are now working on taking the structure and format and adapting it to our own adult palliative population,” said Janet.

Even though the committees have ‘sundowned’, the VHA Best Practice Research and Education Department under the direction of Kathryn Nichol, who is also the senior sponsor of the CCMN committee, is picking up the ball and has committed to continue PIES. “We’re really glad the value of this kind of hands-on learning and interaction is recognized and will continue,” said Matt.

Janet added, “These projects demonstrate the importance of the team dynamic and including all disciplines in palliative care, as well as the perspective of the caregiver. Getting these things done is really something to be proud of.”

For any one of the leads of the committees, their greatest satisfaction is the knowledge that the work is going to persist. “What we’ve created as committees, together with our organizational and client partners, is now embedded within the organization and is certainly going to continue,” says Matt. “That is what makes us proud.”

None of it was easy, which made the high level of engagement from those who participated in the Steering Committees and spin-off sub-committees all the more impressive to the committee chairs. “We were able to tap into the specific knowledge of individuals



Children with Complex Medical Needs Committee's Key Strategic Outcomes

Expanded services to focus population after consultation with client partners-creation of a summer program provided at no charge for children with complex medical needs

Expanded research partnerships with Holland Bloorview (HB) and Sick Kids-creating touchpoints with nurses at HB and managing transitions; partnering with Sick Kids to tweak our policies to reflect continuity across the different health care organizations

Partnered with several organizations in the creation of the Connected Care support programs for home care nurses and piloting the education modules

Enhanced inter-professional collaboration and education through development of the PIES (Paediatric Interdisciplinary Educational Symposium) – has now run for 3 consecutive years

Two-day extended paediatric education component developed and added to CFN Nurses' Orientation

Developed an individualized numeric pain scale for paediatric non-verbal pain management

and then keep it part of an overall bigger container,” said Catherine. “The best part was being a witness to this remarkable group of people who have different areas of expertise.”

“Throughout the process, we embraced different voices and different points of view,” adds Matt. “It was a very open, sharing atmosphere, which is consistent with the VHA culture. I’m so proud that everyone was really dedicated to doing this work.”

OPERATION POLLINATION:

Engaging Employees to Drive Innovation at VHA

How might we develop a model of organizational innovation that is meaningful, accessible and impactful?

That's the question VHA asked in 2017 when it began framing a new model for innovation. They began with Design Thinking (DT), a user-experience centred approach championed by California-based company IDEO, and Google's Design Sprint—which takes DT and concentrates the steps of UNDERSTAND-DIVERGE-CONVERGE-BUILD-TEST into an intense four or five day endeavor.

In the not-for-profit world though, carving out a week for already time-strapped teams can be challenging. “Probably the biggest obstacle I faced in running a Design Sprint at VHA was finding four days where the core team were all available,” notes VHA's Head Solutions Strategist, Pam Stoikopoulos, “so I sought out something even more concentrated.”

She first began looking at how other organizations were applying an innovative approach to problem-solving as part of her Master of Management, Innovation and Entrepreneurship (MMIE) program at the Smith School of Business and discovered some common themes. “I interviewed innovation consultants from The Moment, J5 and Performance Coaching, and organizations who are considered thought leaders including Klick Health and York Region. Despite their differences they all emphasized the need to make innovation part of day-to-day activities and to provide people at every corner of the organization with the tools to do just that,” she says.

Pam's attendance at a York Region Innovation Community of Practice session opened her eyes to creating a core team of innovation evangelists. “The session focused on giving people practical strategies to solve problems in a way that was energizing. It was exciting to watch,” she adds. Inspired by York Region's iLabs, a 90-minute to two-hour problem-solving session any trained facilitator could lead and any business unit could capitalize on, Pam got to work on developing a similar “innovation pollination” program for VHA. “What's so refreshing about the innovation space is that it's completely open. No one is hoarding their great idea or process but are happy to share and have them adopted by others,” she says.

Pam discovered the Lightning Decision Jam (bit.ly/SmartJam) created by German firm AJ & Smart, an accelerated process for defining problems and developing solutions which is deeply rooted in the Design Sprint process and can be done in one to two

VHA staff participate in a Fast Lab session





hours. Together, with Toronto innovation consultants at Adaptive X, who also led the first two sessions, elements were tweaked and refined and the VHA Fast Labs were born.

In 2019, approximately 30 facilitators from all departments of VHA graduated from the Fast Lab program and are part of VHA's

ever-growing Innovation Community of Practice.

A number of Fast Labs have run with the Human Resources, Communications and Innovation, Quality, Best Practice, Research and Education (iQBPRE) departments. Participants of the sessions have been very enthusiastic: "It's really such an accessible format," notes Research Manager and facilitation session participant, Dr. Emily King.

"This is the beginning of an exciting new chapter of innovation at VHA," says Vice President of iQBPRE and Chief Nursing Executive, Dr. Kathryn Nichol. "Uncovering creative and better ways of doing things is really everyone's job here. Fast Labs empower people with a new approach and practical, invaluable tools to achieve this so that we're not just talking about it, but engaging people in a way that is powerful and empowering."

ONE OF VHA'S LEADERS TRANSITIONS INTO IMPORTANT NEW ROLE

VHA is committed to playing a key role to champion the needs of our clients and families, the wisdom of our teams and the value of home and community care in the transformation of the Ontario health care system that is underway. To help ensure we are effective champions and partners, we are dedicating additional resources to help us actively participate and lead in the formation of Ontario Health Teams (OHTs) and other integrated care delivery systems (ICDSs).

Courtney Bean, who has played a key role at VHA for over 10 years, most recently in the role of Director, Client Services, and as a member of our Senior Management Group, will be leading these efforts in the newly created role of Vice President of Integrated Care & Partnerships.

Courtney is already actively involved in many of the OHTs and other ICDSs VHA is participating in, and is also well connected to many in the sector through his positions with the Ontario Physiotherapy Association and the Alliance of Professional Association of Community Therapy Services, so he is very well positioned to jump into this role.

Courtney was trained as a physiotherapist at the University of Toronto where he is now an Adjunct Lecturer. He completed an orthopaedic residency in California through the Ola Grimsby Institute while working at Kaiser Permanente in Occupational Medicine and is currently completing his doctorate with the Institute. Courtney is also currently completing an executive health care innovation fellowship (EXTRA) with the Canadian Foundation of Health care Innovation.

Noted VHA's CEO Carol Annett, "Courtney's extensive experience in collaborative initiatives with partners will position us well for the future, and his dedication to client-and-family-centred care will help ensure that VHA's commitment to our clients and families remains at the forefront amidst all of this change."

Courtney is a great dad of twin teenagers and an avid powerbuilder and at 5 am most mornings you will find him at the gym lifting far more weight than he should. This developed power serves him well in the heavy lifting required in his role at VHA!





THE WAITING PAIN...

How does waiting for a transplant or to see if a transplant worked affect a child and their family? What does it do to relationships? What conversations does it spark? Can it provide healing or is it only destructive? These are some of the questions Kristina Smith, one of VHA's Junior Researcher Development Award recipients, is exploring in her PhD research into waiting as a form of suffering and how we can alleviate it for families.

Now in her fourth year of doctoral studies in Kinesiology and Physical Education, and is completing a collaborative degree with the Joint Centre for Bioethics at the University of Toronto, Kristina decided on this area of focus after taking a pain course in the nursing department and learning more about pain from the health perspective. "I started to see the lack of resources – especially with kids," she says. "We don't understand how children experience pain and the different ways they might be suffering. And there hasn't been a whole lot of study on the relational aspects of suffering, especially in health care, looking at the web of people involved, what happens to those relationships

and how can we heal from this process after."

VHA's Junior Researcher Development Award offers mentorship and funding opportunities for young researchers who have an interest in studying and advancing evidence in home care. "The people I've been working with at VHA have been so foundational and essential to my work. I needed access to children and their families and health care providers, and VHA connected me with different families who have had or are waiting for a transplant," explains Kristina.

Together with her supervisor, Kristina developed a narrative ethnography framework for this research, looking into cultural and social activities and customs—a novel approach that "hasn't been well used yet, but it's an excellent method to understand a process and how that unfolds," she explains. Using this framework, she visits the families primarily in their homes, but sometimes at hospital or joins them for appointments to see how they organize their life around waiting and to understand what they are living with.

Kristina conducts approximately six interviews with each family as well as three interviews with health care providers who have experiences observing waiting families. Kristina has also asked the parents and health care providers to do two journal entries a week for a month. “With these eight entries, I can get at the aspects that I’m not seeing: what is important to them, what does mundane, everyday life look like when you’re waiting? We focus a lot on the exceptional aspects of suffering and not enough attention is given to what everyday life looks like.”

One of the emerging themes over the past year of research has been the families’ sense of having to forge their own path. “One of the biggest things parents are telling me is ‘There is no roadmap.’ The families don’t know what to expect and there’s no one to prepare them for what they are going through,” Kristina explains. And while the children are well taken care of, the families feel less tended to. “All of the families have been so willing to talk to me, they to want to talk about this with someone—it’s been overwhelming. They’re saying, ‘Not enough people are talking to us or asking how we’re feeling.’ They are going through these processes with so many different people but not enough people are asking them these simple questions.”

Kristina is hoping her research can help change that. “I’m hoping to develop a theory of relational suffering and how we can understand waiting differently and explore that more in the academic and health care worlds.” She also sees the work informing policy and process changes within VHA and other organizations around how they communicate with these families, provide support and resources, and how organizations support their health care providers, who carry a large emotional burden.

“How can we improve this process of waiting? What different resources do we need? How can we talk to people differently? Knowing what happens to people



Kristina Smith is one of VHA’s 2019 Junior Researcher Development Award Winners.

and how their relationships are affected, how can we improve this process for all involved?” are some of the questions Kristina hopes to answer.

“I’m amazed by how strong these families and all the health care workers working with them are. The families have gone through so much trauma and they are still smiling every day and finding the joy in life. It’s definitely taught me to not sweat the small stuff and to look at the bigger picture.”

To learn more about VHA’s Junior Researcher Development Award program, contact Emily King, Manager of Research Operations, at emily.king@vha.ca.



Do you know an extraordinary unpaid caregiver?

Nominate them at www.vha.ca/hohc

NOMINATIONS OPEN UNTIL FEBRUARY 14



Ideas, advice and energy come together at Clinical Lead Retreat

A one-day retreat designed for Clinical Leads put them in touch with each other and provided new tools and tips to help them lead for success.

Ask Clinical Lead (CL) Maya Majmudar what she loves doing, she'll say it's organizing, planning and looking after the details. Those skills are definitely an asset in her 40+ years as an Occupational Therapist and last 13 as a Clinical Lead. They also made her the perfect candidate to lead the planning for VHA's second Clinical Lead Retreat, held in November.

Although they are deeply embedded in every functional unit across VHA, the organization's 31 Clinical Leads tend to work in isolation. Each professional area, whether it's OT, Physio, Dietary, Nursing, Speech Therapy, Social Work or ADP, depends on the expertise and management skills of the Clinical Leads. They provide orientation and training of new hires and

support their teams through complex client conferences, clinical problem-solving and ongoing peer support. "Watching the new hires grow and develop confidence in their abilities is one of the most rewarding parts of our job," says Maya.

It doesn't stop there. Clinical Leads also maintain their own caseloads of clients and deliver hands-on care. With their fingers on the pulse of so many parts of the organization, it's no surprise that Maya calls the Clinical Leads "the bridge between management and the point of care team".

Cultivating the talent within our own walls

For inspiration in developing the retreat, the committee turned to a familiar place: their own staff. "We talked to staff and asked what they wanted to learn about," says Maya. "We knew this had to be a meaningful experience." Across the many voices of the Clinical Leads, there were some common themes – they wanted advice on time management; how to give helpful and effective feedback; and how to empower their people.

With that input, a roadmap was developed for what would be the unifying theme for the day – Leading for Success. Fortunately, they didn't have to look far for talented people to address those themes. "Within our own walls, we have incredible wisdom and expertise!" says Maya. Their first call was to Amit Ambegaonkar,



who works for VHA as a Physiotherapist and Clinical Lead, and is also a leadership coach, certified success trainer and sought-after professional speaker.

Messages of inspiration and practical advice

With his lived experience on the job, Amit used a combination of video, a special booklet of advice for Clinical Leads, and his own compelling personality to deliver a message that was both practical and inspirational, touching on problem-solving, teamwork and mindfulness. “He didn’t hold back on the importance of creating a strong connection with your team and building the confidence of your new recruits,” says Maya.

Amit’s impact wasn’t lost on supervisor and Professional Practice Specialist Catherine Chater, who observed, “His talk sparked a renewed inspiration for us all to lead from a place of excellence and admiration.”

As they juggle numerous responsibilities, finding enough time in the day is an ongoing challenge for Clinical Leads. Delegates were uplifted to learn from their

Amit with one of his clients.



Clinical Lead colleague Punita Laurier that they shouldn’t try to do it all. Punita’s advice was to make a list of the 10 things you want to do, narrow it down to 5 and then focus on your top 3. “Her main takeaway was, don’t set yourself up for failure by trying to do too much,” said Maya.

For managers and employees, performance reviews can be one of the toughest aspects of the job. The external speaker for the day, innovation and change management specialist Lee-Anne McAlear, told them to consider the whole person and make the circle of connections between their strengths and weaknesses. “Lee-Anne stressed the best way to make staff feel valued is to focus on strengths and let them know they’re being seen and understood.”

A chance to rekindle old friendships

Part of what makes VHA such a unique organization is the abundance of training opportunities. “Continuous learning is an integral part of the VHA culture. The Learning Calendar is always full and the training sessions are continuously being upgraded,” says Maya. This retreat was a great addition to that because of the opportunity to connect face-to-face and to network with each other. They held a dinner the night before and several ice-breakers during the event. “We rarely meet face-to-face so it was great to see the new Clinical Leads and talk to those who came in to Toronto from Ottawa and London,” said Maya.

In a note to the organizing committee, Catherine praised them for an event that “knocked it out of the park”. “Your CL work reverberates throughout this organization and has had such impact on the lives of clients, colleagues and the leadership of VHA.”

Hats off to the fabulous organizing committee who left no stone unturned in creating this impactful experience for the entire team: Maya Majmudar, Amanda Selk, Harpreet Buttar, Julie Jerred, Amit Ambegaonkar, Betty Yu, Punita Laurier!

COMING SOON: New Website Design



Aspiring Teacher Gains Experience



Research Project Aims to



Client Partner Zinta Erdmanis
Live Care Resources

We are launching a re-designed website in February. Please visit us online at www.vha.ca to see the changes and improvements we have made.

Excellerator is a VHA Home HealthCare newsletter sharing the latest developments from within our walls and across the communities we serve.

If you have comments about *Excellerator*, or would prefer to receive this news electronically, please contact our Senior Communications & PR Manager Tracey Turriff at tturriff@vha.ca or 416-280-8426.



Note: VHA Home HealthCare is not affiliated with or related to VHA Health & Home Support, also known as VHA Ottawa.