

## Appointments

### In-house Medical Expertise for Accreditation Canada

Accreditation Canada acquired in-house medical expertise with the appointments of Dr. Gerarda Cronin and Dr. Louise Clément. Drs. Cronin and Clément will provide input and advice about clinical components of the accreditation program and offer guidance as the physician and clinical surveyor teams expand. They will also liaise with medical associations and universities on research and curriculum issues related to accreditation.

Dr. Cronin is the director of quality and decision support for the Child Health Program at Winnipeg Regional Health Authority (WRHA). She chaired the WRHA Standards Committee from 2002 to 2007 and was the lead physician for the development of WRHA's award-winning Integrated Risk Management framework. She has been a surveyor with Accreditation Canada since 2002.

Dr. Clément is a medical adviser to the CHUM Centre-ville project, holding the positions of clinical adviser on technological transitions and physician involved in care for the elderly. She has 10 years' experience in emergency department medicine and taught at the faculty of medicine at the University of Montreal. Dr. Clément has been a surveyor with Accreditation Canada since 2003 and a member of both the Physician Advisory Committee and the Program Advisory Committee since 2006.

### Dr. Robyn Tamblyn Appointed Scientific Director of CIHR's Institute of Health Services and Policy Research



Dr. Robyn Tamblyn was recently appointed scientific director of CIHR's Institute of Health Services and Policy Research (CIHR-IHSPR). Dr. Tamblyn is a professor in the Department of Medicine and Department of Epidemiology and

Biostatistics in the faculty of medicine of McGill University. She is a James McGill Chair and also holds a position as medical scientist at the McGill University Health Centre Research Institute. Dr. Tamblyn completed her doctoral degree in epidemiology at McGill University.

Dr. Tamblyn directs a CIHR-funded team to investigate the use of e-health technologies to improve patient safety and support integrated care for chronic disease. She also leads

initiatives such as the Medical Office of the 21st Century (MOXXI) to optimize drug management, improve the safety of drug prescribing and enhance the early uptake of evidence into primary care practice. As scientific director of IRIS-Quebec, a novel provincial infrastructure for healthcare and research funded by the Canadian Foundation for Innovation, she integrated clinical data from four academic university health centres and their extended primary care networks with the provincial administrative data repository. She is the scientific director of the Clinical and Health Informatics Research Group at McGill University. She has been a member of the CIHR-IHSPR Institute Advisory Board since 2005.

### Minister Clement Announces the Appointment of Six New Members to Science, Technology and Innovation Council

The Honourable Tony Clement, minister of industry, recently announced the appointment of six new members to the Science, Technology and Innovation Council (STIC), the federal government's advisory body on science, technology and innovation issues.

The new appointees are David Agnew, president of Seneca College in Toronto, Ontario; Louis Lévesque, deputy minister of international trade; Dr. Simon Pimstone, president and chief executive officer of Xenon Pharmaceuticals in Burnaby, British Columbia; Dr. Indira Samarasekera, president and vice-chancellor of the University of Alberta in Edmonton, Alberta; Dr. Neil Turok, executive director of the Perimeter Institute for Theoretical Physics in Waterloo, Ontario; and Glenda Yeates, deputy minister at Health Canada.

The STIC is composed of a chair and 17 members, of which 15 come from outside government. Members are selected to cover many sectors of the Canadian economy and have varied competencies and areas of specialization.

The government established STIC in 2007 as a single, integrated advisory body. Its twofold mandate is to provide timely advice on critical issues of science, technology and innovation and to produce regular reports benchmarking Canadian science, technology and innovation performance against international standards of excellence.

### Matthews Appointed Acting CEO in Niagara Health System

The Niagara Health System (NHS) Board of Trustees recently announced a change in the senior leadership at the Niagara Health System

(NHS). Dr. Sue Matthews has been appointed interim president and chief executive officer, replacing Mrs. Debbie Sevenpifer. Dr. Matthews joined the NHS in 2009 and most recently served as executive vice president, clinical operations and chief nursing executive for the health system.

Mrs. Sevenpifer was named NHS president and CEO in March 2003, and was instrumental in advancing the multisite hospital through its first decade, which was characterized by some of the most turbulent years in the history of healthcare in the Niagara Region. Under Mrs. Sevenpifer's leadership, the NHS was well managed, earned a prestigious accreditation award, secured greatly needed funding and developed the new health-care complex and regional cancer centre currently under construction in west St. Catharines.

### **New Chief of Toronto Emergency Medical Services**

City of Toronto Emergency Medical Services (EMS) Chief Bruce Farr announced that the current deputy chief, Paul Raftis, would become chief of Toronto Emergency Medical Services after Chief Farr's retirement on March 1, 2011.

Paul Raftis has worked at Toronto EMS since 1991. Starting as a paramedic, he rose quickly in the service, assuming roles of increased leadership in the organization. His latest promotion was in January 2010, when he was appointed deputy chief of operations. In this recent role, he oversaw a staff of over 930 and a budget totaling \$112 million.

As the new chief of Toronto EMS, Raftis will lead one of the largest emergency medical services in Canada. He will oversee a staff of 1,200, including paramedics, emergency medical dispatchers and support staff, all supported by a fleet of 155 ambulances in 45 ambulance stations.

### **New Vice President of Education at Sunnybrook Health Sciences Centre**



Dr. Joshua Tepper was recently appointed the new vice-president of education for Sunnybrook Health Sciences Centre in Toronto. Dr. Tepper is a family physician and associate professor in the Department of Family and Community

Medicine at the University of Toronto. His most recent position before joining Sunnybrook was his role as the assistant deputy minister at the

Ontario Ministry of Health and Long-Term Care, Health Human Resources Strategy Division.

As an assistant deputy minister, Dr. Tepper led the HealthForceOntario health human resources strategy and reported jointly to the Ministry of Health and Long-Term Care and the Ministry of Training, Colleges and Universities, as well to Premier Dalton McGuinty on the Family Health Care for All health results table.

With a degree in public policy from Duke University, Dr. Tepper has been involved in health policy and research relating to health human resources at both the provincial and national levels. He is a graduate of McMaster University medical school, and he holds a master's degree in public health from Harvard University. He is currently completing an executive MBA degree at the Richard Ivey School of Business at the University of Western Ontario.

### **Acting CNO at West Parry Sound Health Centre**

Ms. Anne Litkowich, RN, will be assuming the position of acting chief nursing officer and director of patient care with the West Parry Sound Health Centre (WPSHC) effective immediately. She has extensive experience in healthcare management, holding positions with the Niagara Health System and the Community Care Access Centre Niagara. Ms. Litkowich joined WPSHC in 2006 as the manager of outpatient and surgical services, and has served most recently as manager of quality, risk management and patient safety.

### **South West Local Health Integration Network Appoints New Board Chair**

The South West Local Health Integration Network (LHIN) recently announced the appointment of Jeffrey Low as chair of the South West LHIN Board of Directors.

Mr. Low has more than 16 years of governance experience in the fields of healthcare and post-secondary education, and joins a geographically diverse board with representatives from communities throughout the South West LHIN. Until his appointment as chair of the South West LHIN, Mr. Low was a member of the London Health Sciences Centre Foundation (since 2006) and continues as a board member of Huron University College (since 2007). Previously, he served for 12 years on the London Health Sciences Centre (LHSC) board of directors, including a two-year term as chair. Mr. Low also served three years as a committee member of the University of Western Ontario Development Committee, and served as chair of the Lawson Health Research Institute in 2005.

## McGuinty Government Appoints Prestigious Heart Surgeon

Dr. Wilbert Keon was recently appointed the new chair of the board of directors of Champlain Local Health Integration Network. Dr. Keon has led a distinguished career in medicine as a heart surgeon and healthcare executive, and is also a retired senator. He founded the University of Ottawa Heart Institute at the Ottawa Civic Hospital in 1976, a world-renowned facility that now bears his name. He acted as the institute's CEO for more than 30 years until his retirement in 2004. Dr. Keon was appointed to the Senate in 1990, and has been named to the Order of Canada and the Canadian Medical Hall of Fame.

## Health Minister Appoints Five New Alberta Health Board Members

Alberta's Health and Wellness Minister, Gene Zwozdesky, has appointed five new members to the Alberta Health Services (AHS) board effective immediately, each for a three-year term.

The new board members are: Ray Block (Edmonton/Athabasca), Dr. Ruth Collins-Nakai (Edmonton), Don Johnson (Barnwell), Dr. Eldon Smith (Calgary) and Sheila Weatherill (Edmonton). The terms of all five board members will run until March 31, 2014.

## Announcements

### Infoway Invests \$380 Million to Help Physicians and Nurse Practitioners Implement Electronic Medical Record Systems

With its newest investment program, Canada Health Infoway (Infoway) is funding electronic medical record (EMR) systems in community-based practices and outpatient settings throughout Canada. Infoway president and CEO Richard Alvarez recently provided details about the \$380-million fund, which is designed to focus investment at the points of care where the benefits of health information technology can deliver immediate value to patients and clinicians.

"Connecting health providers to the health information systems being developed across the country is fundamental to Infoway's mandate," says Alvarez. "This new wave of investment, in collaboration with the provinces and territories, will help us reach our target to enrol an additional 8,000 to 9,000 physicians and nurse practitioners in EMR programs by March 2012."

Infoway's investment in electronic medical

records is part of the \$500 million in new funding provided by the Government of Canada in its 2010 budget. Through this program, Infoway will co-fund EMR systems for physicians and nurse practitioners, working through funding programs in provinces and territories throughout Canada. Infoway support will allow provinces and territories that have programs in place to expand their current programs. In jurisdictions planning to introduce a formal EMR program in the near future, Infoway will assist with start-up costs.

Infoway will also invest in clinical peer support networks so that health professionals using EMR systems can learn from others' experience and share best practices, innovation projects and other efforts to accelerate clinical value from the use of information and communications technologies. As well, support will be provided to qualifying information technology vendors needing to upgrade their current product lines to meet Infoway privacy, security and interoperability standards.

### Saskatchewan Deputy Minister of Health Dan Florizone Receives National Health Award

Saskatchewan's deputy minister of health, Dan Florizone, is the 2011 winner of the Excellence through Evidence award from the Canadian Health Services Research Foundation (CHSRF). The award celebrates leaders who have accelerated



Dan Florizone with CHSRF President Maureen O'Neil

change and strengthened healthcare in Canada.

With nearly 25 years of experience in Saskatchewan's healthcare system, Florizone's notable contributions include executive sponsorship of the province's Patient First Review, which consulted Saskatchewan residents to

determine ways to improve the patient experience and the delivery of health services. He was also the first health region CEO in Saskatchewan to implement the concept of “Lean” healthcare, an approach that increases efficiency in order to provide the highest level of care to the patient. Lean healthcare has since spread to the rest of the province’s health system.

### **CAMH Launches First Research Laboratory on Wheels Dedicated to Mental Health and Addictions**

In February, the Centre for Addiction and Mental Health (CAMH) launched Canada’s first mobile research laboratory to study mental health and addictions in communities across Ontario. The mobile lab will allow CAMH researchers to reach underserved populations in rural, remote and First Nations communities to help improve prevention and treatment services in these communities and beyond.

CAMH scientists will embark on the lab’s first research program this spring. Researchers are targeting Ontario communities that are less advantaged owing to higher unemployment or poverty rates, among other factors. Among the series of studies planned, one line of research will tease out the complex interactions between a person’s genes and problems in the community, which may put people at risk for mood and anxiety disorders, substance abuse and violence.

The lab will be used to conduct interviews and surveys, run focus groups and take hair, saliva and blood samples to measure stress or obtain genetic information. This information will produce knowledge about communities that is often not available from large-scale telephone surveys. Over time, as information is gathered from across the province, CAMH researchers will create a powerful database that will advance our collective knowledge of mental illness, addictions and violence.

The mobile research laboratory received funding from the Canada Foundation for Innovation (CFI). The first research program, *Researching Health in Ontario Communities*, was supported by a team grant from the Canadian Institutes of Health Research (CIHR).

For more information, please visit [www.camh.net](http://www.camh.net).

### **How Is Saskatchewan’s Healthcare System Performing? New Online Reporting Tool Gives Managers, Providers and the Public Ready Access to Information about Quality of Care in the Province**

The people managing and delivering healthcare in Saskatchewan – and the people using those services – now have easier access to information about the quality of healthcare in the province, thanks to a new online reporting tool ([qualityinsight.ca](http://qualityinsight.ca)) launched today by the Health Quality Council (HQC). It was developed in response to demand from providers, health regions and government for timely information about how the health system is performing.

This new provincial resource displays results for various indicators of healthcare quality in Saskatchewan. An indicator is a tool for measuring, monitoring and comparing important factors that influence the quality of healthcare, in the same way that the gauges on a car’s dashboard show how the vehicle is running. (Adapted from *A Citizen’s Guide to Health Indicators*, Health Council of Canada, January 2011).

Marlene Smadu, chair of the HQC and associate dean (Southern Saskatchewan Campus) for the University of Saskatchewan’s College of Nursing, says this province is again leading the way in healthcare with the launch of Quality Insight. “Our health system is ahead of other jurisdictions in Canada in its understanding of – and use of – measurement and transparent reporting to improve care, and in its collaborative approach to identifying indicators of quality that will be useful for improvement,” says Smadu.

Right now, most of the information in Quality Insight measures the health system’s progress in achieving targets set for the Saskatchewan Surgical Initiative; this major improvement effort was launched by the province’s Ministry of Health in March 2010, in response to the Patient First Review. In addition to measuring improvement progress, the indicators about quality of surgical care will also help inform efforts by managers and providers to shorten waits for surgery and improve patients’ experiences with the health system. Over time, HQC will add more indicators related to quality of surgical care, as well as other measures of quality in other parts of the system. The site will also include indicators available from other reporting organizations, such as the Canadian Institute for Health Information (CIHI).

## Ontario Food Takes the Plate at Hospitals and Long-Term Care Facilities

Providing safe and nutritious meals to those convalescing in hospitals and living in provincial long-term care facilities is an important part of the services these institutions provide. Now, this goal will become easier as more Ontario food will make its way into the kitchens of hospitals, long-term care facilities and other broader public sector institutions. With funding from the Ontario government, food services operators and distributors will offer more diversity of products from Ontario. These changes will help create a ripple effect in the procurement of local food to other institutions, both public and private, across the province.

The funding is being administered by the new Greenbelt Fund via its program, the Broader Public Sector Investment Fund: Promoting Ontario Food.

### About the Greenbelt Fund

The Greenbelt Fund is helping to increase the amount of Ontario food served in daycares, schools, universities and colleges, hospitals and long-term care facilities through its program, the Broader Public Sector Investment Fund: Promoting Ontario Food.

With funding from the Ontario government, this program provides grants to local food industry leaders, producers, distributors, food service providers and public institutions working to serve more Ontario food. Helping to overcome challenges, and support economic growth and the sustainability of agriculture in Ontario, the fund will aim to create systemic change to permanently increase the amount of local food in the province's public institutions. For more information about the program and grants, please visit [www.ontariofresh.ca](http://www.ontariofresh.ca).

### A Total of \$6.5 Million in New Financing for the Centre de cancérologie Charles-Bruneau

In its continued efforts to meet the priorities of the Centre de cancérologie Charles-Bruneau at CHU Sainte-Justine, the Fondation Centre de cancérologie Charles-Bruneau is proud to announce that it has pledged to remit \$6,444,524 in new financing to the Centre de cancérologie Charles-Bruneau over the next five years. This contribution will serve mainly to support major research projects in paediatric oncology and finance the purchase of several specialized devices with leading-edge technology.

These funds will be earmarked primarily for the

fundamental research program on neuroblastoma, as well as the research program on umbilical cord blood. The first program studies the cancer stem cells that cause cancer among children, while the second explores means of improving cord blood transplantation, a commonly used treatment for chemotherapy-resistant cancer and leukaemia. The Centre de cancérologie Charles-Bruneau is among the world leaders in cord blood transplantation, with close to 200 transplant procedures performed to date and a major research program on cord blood. To promote the recruitment of specialists, the centre's fellowship program will see its number of fellows increased from four to six in 2011. Lastly, the music and art therapy programs for children treated at the centre will also receive a share of this new funding.

### Technological platforms targeted

The Centre de cancérologie Charles-Bruneau will also receive financing to defray the annual costs of operating its new ultra-modern equipment in 2010 and 2011. Indeed, the flow cytometry platform – which makes it possible to quantify the components of a cell using super high-speed manipulation – and the Elispot platform used to analyze individual cell response to stimuli are indispensable tools for the centre's research team. And by sustaining its annual pre-clinical research platform – which sees researchers perform a series of tests on humanized mice – the centre hopes to pave the way for major advances.

For more details: [www.charlesbruneau.qc.ca](http://www.charlesbruneau.qc.ca).

### New Family Medicine Positions in New Brunswick

Up to six new family residencies, with special emphasis on rural and emergency medicine, are being created and funded in New Brunswick, the provincial and federal governments announced recently.

The provincial government and Dalhousie University's Faculty of Medicine are creating a new three-year integrated family medicine/emergency medicine program designed specifically for family physicians working in rural areas. The federal government is funding up to six new family medicine residents to receive training and provide medical services.

The residents will receive training with a focus on enhanced skills in emergency and acute care. They will spend eight to 16 weeks training in a rural area, giving them an exposure to rural practice that will contribute to their competencies and inclination to practise in smaller communities. Funds will also be used to provide the doctors with the necessary tools and technical support.