

This bulletin is broadcast via email monthly to Residents and Clinical Fellows at both LHSC and SJHC. If you would like to have an announcement in this bulletin please contact Maureen Macpherson at maureen.macpherson@lhsc.on.ca by the 2nd Wednesday of the month.

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1. Resident Loan Interest Relief

What is the Resident Loan Interest Relief Program?

The Resident Loan Interest Relief Program was negotiated as part of the 2008 Physician Services Agreement to provide eligible residents with financial assistance during a critical time of professional development. The program will pay interest and defer principal payment on any outstanding Canadian federal or provincial government student loan.

Further information can be viewed by clicking on the link below:

http://www.londonhospitals.ca/departments/medical_affairs/whats_new/documents/ResidentLoanInterestReliefProgrammemofinal2.pdf

2. Call Room Locker Use

The lockers in the designated shared call room areas in the C10-100 block at UH and the C2-800 block at VH are for day / night use only. The 8 lockers in the computer room C10-136 and the 5 lockers in the kitchenette area of the lounge C10-111 at UH and the grey lockers numbered 1 to 23 across from C2-832 and C2-830 in the C2-800 block at VH are designated for those residents or clerks that are on night or day call (from noon the day they are on call till noon the next day).

Please note that locks will be cut off from these lockers if this policy is not adhered to. Please be respectful of this so that all residents and designated clerks can have equal access to the lockers.

3. New Collection Kits for *Chlamydia* and *N. gonorrhoeae*: Effective July 13, 2009

The Public Health Laboratory has implemented a new antigen detection procedure for testing for *Chlamydia* and *N. gonorrhoeae*. As a result, the collection kits for this test, NGCAD, have changed and will be put into use by **July 13, 2009**.

The pink and blue swabs have been replaced with a single Unisex swab for collecting cervix and urethral swabs. Urine samples, collected in a sterile container, will have to be transferred into a collection kit specific for NGCAD testing. There is also a collection kit for vaginal swabs from patients who have had a hysterectomy.

Please see the two links below for more information.

http://www.londonhospitals.ca/departments/medical_affairs/whats_new/documents/MemofromLLSGreNGCAD.pdf

http://www.lhsc.on.ca/priv/labtrain/chlamydia_collection_guide.htm

4. Managing Abusive and Inappropriate Behaviours (LHSC)

London Health Sciences Centre has updated and replaced Abuse Policy GEN017 with two policies - one for staff and affiliates, another for patients, families and visitors - to improve ease of use and understanding.

The Managing Abusive and Inappropriate Behaviours Policy strengthens the abuse investigation process and addresses the expectations of privacy during investigations.

The new policies are:

- STF 002 Managing Abusive and Inappropriate Behaviours: Staff and Affiliates

http://appserver.lhsc.on.ca/policy/search_res.php?polid=STF002&live=1

- STF 003 Managing Abusive and Inappropriate Behaviours: Patient, Family, & Visitor

http://appserver.lhsc.on.ca/policy/search_res.php?polid=STF003&live=1

LHSC is committed to providing a healthy and safe environment, one that is free of discrimination and harassment, and in which all individuals are treated with respect and dignity. LHSC will not tolerate any inappropriate behaviour in the hospital and all incidents will be investigated. Inappropriate behaviours are unacceptable not only on hospital premises, but anywhere hospital business is conducted including travel, training, and social functions.

5. Alternate Level of Care: New Definition

On July 1, 2009, all acute and post-acute hospitals across Ontario began using a standardized **Provincial Alternate Level of Care (ALC) Definition** to designate patients as ALC. The use of a standardized definition is a key step towards capturing high quality, real-time data on all patients waiting in hospitals for alternate levels of care. This data will help improve patient flow, reduce ER wait times and inform decisions regarding the allocation of resources to hospitals and communities.

Physicians play a critical role in designating patients as ALC and in addressing the complex needs of ALC patients, and we encourage you to learn more about the standardized definition and the materials that are available to support you in its application.

Below you will find a link to the Provincial ALC Definition and a number of case studies that provide guidance as to when to consider designating patients as ALC.

- **Communication:**

http://www.londonhospitals.ca/departments/medical_affairs/whats_new/documents/WesternCommunication_ProvincialALCDefinition_July82009Final.pdf

- **Practical Guide for Clinicians:**

http://www.londonhospitals.ca/departments/medical_affairs/whats_new/documents/ALCDefinitionPracticalGuideforPhysicians.pdf

If you have any questions about the definition, please email ALCdefinition@cancercare.on.ca or visit: <http://www.cancercare.on.ca/ocs/alc>.

Additional information is also available on the **PAIRO** website at:

<http://www.pairo.org/News/News.aspx?id=342> .

6. Professional Staff Bylaws

Professional Staff By-laws for SJHC and LHSC have been approved by the Boards and the new By-laws are effective **July 1, 2009**.

The By-laws may be viewed by clicking on the links below:

LHSC:

http://www.londonhospitals.ca/departments/medical_affairs/orientation/network/bylaws/documents/lhsc_bylaws.pdf

SJHC:

http://www.londonhospitals.ca/departments/medical_affairs/orientation/network/bylaws/documents/sjhc_bylaws.pdf

7. The Vision of the Indigenous Physicians Association of Canada (IPAC)

The IPAC has embedded in our belief that we need more First Nations, Inuit and Métis physicians and this belief is shared by many others which is evident by the Aboriginal Health Human Resources Initiative.

One of the difficulties in health human resource planning is the lack of current and accurate information about Indigenous health professionals to serve as a baseline for both planning and evaluation purposes. The last recalled "counting" of Indigenous physicians occurred in the mid-1990's, and is the basis of the oft-quoted number of 150 – 200 Indigenous doctors currently in Canada. The truth is we don't really know, but we recognize the importance of obtaining this information. It is our intent to collect this information in a way that respects the rights of those we represent, such as rights of confidentiality, ownership and privacy.

IPAC has developed the Health Human Resource Data Collection form which is a development of data collection, storage, analysis and sharing of collected information guided by the principles of Ownership, Control, Access and Possession (OCAP) and policies developed to be utilized for the data collection.

Please review the attached policies and print off the Survey by clicking on the link below:

http://www.londonhospitals.ca/departments/medical_affairs/whats_new/documents/IPACLetterPolicyandSurvey.pdf

Please submit your form by fax to 204-221-4849, scan and email a copy to info@ipac-amic.org or mail to 305 - 323 Portage Avenue, Winnipeg, MB R3B 2C1. Please do so by **August 7, 2009**. Additional information is available on line at www.ipac-amic.org

8. Moving July 20 - The Ivey Eye Institute at St. Joseph's Hospital (excluding cataract suite)

As of July 20, 2009 the Ivey Eye Institute at St. Joseph's Hospital (excluding cataract suite) will be located in a newly renovated space on the first floor. The move from the second to the first floor will begin after hours on July 16, 2009 with minimal disruption to service. Clinics will begin operating out of the new space on July 20, 2009.

Please review and share the memo with your staff, as appropriate, by clicking on the link below.

http://www.londonhospitals.ca/departments/medical_affairs/whats_new/documents/Memo-IveyEyeInstituterelocation.pdf

9. Releasing Information to Family Physicians

The Privacy Office has received concerns from Family Physicians that they are facing challenges obtaining information from clinical areas about their patients in hospital. They report that employees often tell them that, "because of privacy" they cannot release any information.

An article was posted to E-Print and to the Privacy Intranet site this week to remind physicians and residents of the process to validate a patient's wishes regarding releasing information to Family Physicians. Please make your staff and affiliates aware of this process and that they can release information to a Family Physician unless restricted by the patient. If staff have further questions please compile them and send them directly to the Privacy Office.

The article can be viewed by clicking on the link below.

http://intra.sjhc.london.on.ca/refer/privacy/newsletters/jun_2009_1.pdf

We will be posting previously published key articles on the Privacy Intranet site under "Additional Privacy Education and Newsletter Articles" as an ongoing resource.

10. Upcoming Courses/Events

Crucial Conversations

Fall 2009 Course Dates: September 14, 21, 28, October 5, 2009

Cost: Now covered by the hospital. **Note:** This course normally costs \$995 US dollars.

Location: St. Joseph's Hospital, Roney B (D1-226)

Contact: Stacey Thompson at extension 75115 or stacey.thompson@lhsc.on.ca to register.

This course is for physicians, dentists and midwives. If you wish to attend a course whereby the group consists of a variety of people in different roles, you may register for a course provided by Learning Services.

(LHSC) <http://www.lhsc.on.ca/priv/elearn/leaders/crucial.htm>

(SJHC) <http://intra.sjhc.london.on.ca/depts/edserv/opportunities/leadership/ccv.pdf>