

# Baycrest

SPRING 2020

# IMPACT



**IMPACT highlights transformative initiatives across Baycrest that drive quality improvement, maximize efficiencies and enhance the experience for those we serve.**



Dr. William Reichman,  
President and CEO  
Baycrest

# BRINGING OUR EXPERTISE TO MORE PEOPLE.

In 1918, our community imagined the beginnings of a place that could help older adults, and from imagination sprung reality.

For more than 100 years, the Baycrest we have come to know - the one relied upon by thousands of patients, residents, clients and families daily - has been built up by our dedicated staff, clinicians, volunteers and community of supporters to become what we are today: a world leader in the geriatric health and residential care sector and the field of aging and brain health. Together, we have created a place that is renowned for our work in care, research, education and innovation.

For a long time, our value as a campus that contains a hospital, a long-term care home and a leading research institute has remained primarily local and provincial in nature. As we've grown, the recognized value of our research and innovative care practices for the seniors' population has quietly - and steadily - increased both nationally and internationally.

Now, it is time for Baycrest to help even more people - to move our expertise beyond a place or location. It is time to build and expand upon what has come before and share it more broadly with those in need across Canada and worldwide.

In keeping with the goals outlined in our Strategic Plan 2018-2023, we will take steps to reach more people, since there are limits to how many we can serve directly on our campus alone. While doing so, we will ensure that we are a strong system partner in the face of transformational changes across our healthcare system with the formation of the Ontario Health Teams.

With successes such as our Baycrest Global Solutions consulting work in the Pacific Rim Countries, the Centre for Aging + Brain Health Innovation (CABHI) and our Cogniciti online brain health assessment tool, we continue to amplify Baycrest, not only as a place of excellence in dementia and complex geriatric care, but also as a recognized force for innovation, research and education in the field of brain health and aging.

In so doing, we will also derive the benefit of new sources of revenue to support the unique programs and services we provide on our campus, which fall outside the mandate of the provincial government to fund. These include our robust culture and arts programs, our research and training activity and the provision of kosher food as part of our Judaic roots.

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It cannot be stressed enough that the healthcare sector in Ontario and Canada is changing and we need to adjust our own supporting efforts within the system and beyond.

We still do not have all the details about how the new Ontario Health Team (OHT) model - which represents an unprecedented change in our healthcare system and replaces the old Local Health Integration Network (LHIN) structure - will impact Baycrest.

To date, Baycrest has largely functioned as a strong, public sector healthcare system provider. This will continue to be a vital component of our organization.

However, our future work includes having a broader impact on dementia and complex geriatric care for people who need it, both in our local communities and beyond. Some of this will be provided through innovations such as Baycrest@Home and the expansion of our residential series into new communities.

We have made great strides towards our goals in the current, five-year Strategic Plan. Now, it is time for us to evolve further.

Baycrest has always responded to any challenge or opportunity set before it; first and foremost because of the dedication and perseverance of our staff; and because it is fundamentally within our DNA as an organization to successfully adapt to changing times. We have a century of success supporting multiple generations as the greatest testament to these capabilities. Our next century will grow our reach even further.



# MOVING FORWARD TREATMENTS FOR DEMENTIA

Whether individuals are seeking to be proactive in attending to their brain health or have been diagnosed with the early or late stages of a neurodegenerative disorder, our Rotman Research Institute's new Clinical Trials Unit (CTU) provides access to experimental treatments that could improve their symptoms.

The CTU was created to respond to a growing need to explore and test new therapies to prevent and treat dementia. Clinical trials are an essential step in developing effective treatments for Alzheimer's disease and related dementias.

"There are at least 20 prevention strategies currently available that have the potential to slow cognitive decline and prevent various forms of dementia," says Dr. Howard Chertkow, Director of the CTU. "While we still have a long way to go in having a better understanding of the brain and Alzheimer's disease, there are promising leads that have been uncovered over the last few decades. Through our clinical trials, we hope to be able to offer these cutting-edge treatments to clients and their loved ones, which will also help us gain a better understanding of ways to further improve treatment development."

Individuals who are 50 years and older may qualify to participate in a Baycrest clinical trial.



The CTU offers a variety of research interventions, which may include but are not limited to:

- Drug therapies
- Dietary advice
- Sensory, cognitive and exercise training
- Non-invasive and safe electrical brain stimulation
- Meditation
- Light therapy
- Other non-pharmacological approaches to boost brain function

All studies offered through the CTU are first reviewed and approved by the Baycrest Research Ethics Board to ensure that they meet current ethical standards.

Through a partnership with Baycrest staff, local family doctors and specialists, the CTU welcomes members of the public to participate in studies that provide hope and potential solutions to individuals with Alzheimer's disease and other dementias and their loved ones.

Anyone interested in participating can email [ctuscreening@research.baycrest.org](mailto:ctuscreening@research.baycrest.org) or call 647-881-7357.



# RESEARCH DISCOVERY:

## YOUR GENES AREN'T THE ONLY FACTOR DICTATING ALZHEIMER'S RISK

In the first study published about Alzheimer's disease among identical triplets, researchers from Baycrest's Rotman Research Institute (RRI) and the University of Toronto found that despite sharing the same DNA, only two of the triplets developed Alzheimer's. They were diagnosed in their mid-70s.

"These findings show that your genetic code doesn't dictate whether you are guaranteed to develop Alzheimer's," says Dr. Morris Freedman, a senior author on the paper, Head of Neurology at Baycrest and scientist at the RRI. "There is hope for people who have a strong family history of dementia since there are other factors, whether it's the environment or lifestyle, which could either protect against or accelerate dementia."

The research team analyzed the gene sequence and the biological age of blood cells taken from each of the triplets, as well as the children of one of the triplet's with Alzheimer's. Among the children, one developed early onset Alzheimer's disease at age 50 and the other did not report signs of dementia.

The research team also discovered that although the triplets were octogenarians at the time of the study, the biological age of their cells was 6 to 10 years younger than their chronological age. In contrast, one of the triplet's children, who developed early onset Alzheimer's, had a biological age that was nine years older than the chronological age. The other child, who did not have dementia, of the same triplet showed a biological age that was close to their actual age.

"The latest genetics research is finding that the DNA we die with isn't necessarily what we received as a baby, which could relate to why two of the triplets developed Alzheimer's and one didn't," says Dr. Ekaterina Rogaeva, another senior author on the paper and researcher at the University of Toronto's Tanz Centre for Research in Neurodegenerative Diseases. "As we age, our DNA ages with us and as a result, some cells could mutate and change over time."

In addition, there are other chemical factors or environmental factors that don't necessarily change the gene itself, but affect how these genes are expressed, adds Dr. Freedman, who is also a professor in the Division of Neurology, Department of Medicine, at the University of Toronto.

As next steps, the researchers aim to further explore the interaction between genetics and environment in the development of Alzheimer's disease and the impact of environmental factors in delaying the onset of this disorder.



# ACCESS TO GROUNDBREAKING RESEARCH STUDIES

Innovation has long been at the core of Baycrest's identity.

Research plays a critical part in the pursuit of better solutions. Our clients have made important contributions towards our vision of creating a world where every older adult enjoys a life of purpose, inspiration and fulfilment.

The Baycrest Client Registry plays a key role in allowing our researchers to advance efforts to improve aging brain health and dementia prevention, detection and care. The registry is one of the few centralized study participant recruitment tools in Canada that allows individuals across campus to seamlessly partake in ethical, scientific studies that contribute to treatment developments.

Baycrest clients wanted an easier way to become involved in the discoveries happening on campus and the client registry helps make that happen.

Since 2014, all Baycrest inpatients, outpatients and clients are automatically included within the client registry. Anyone can easily opt out from the registry at any time by contacting the Research Hotline at 416-785-2500 ext. 2900 or emailing [researchhotline@baycrest.org](mailto:researchhotline@baycrest.org), with no impact on the quality of care they receive.

# BAYCREST LEADS THE WAY IN DEMENTIA PREVENTION WITH CCNA

Since 2018, Baycrest has been home to the scientific headquarters of the Canadian Consortium on Neurodegeneration in Aging (CCNA), which consists of nearly 400 clinicians and researchers in Canada who are working to accelerate progress in age-related neurodegenerative diseases. Through CCNA, Baycrest is playing a central role in the federal government's strategy to advance new research on the prevention and treatment of dementia.

"CCNA intends to make Canada a leader in dementia prevention by creating an infrastructure and a master protocol that can be used to test combination interventions, both pharmacological and non-pharmacological," says Dr. Howard Chertkow, Scientific Director of CCNA, Chair in Cognitive Neurology and Innovation and Senior Scientist at Baycrest's Rotman Research Institute (RRI).

CCNA is leading the largest-ever Canadian study on cognitive decline and dementia: COMPASS-ND, the COMPrehensive ASSESSment of Neurodegeneration and Dementia Study. Its aim is to gather extensive data from people with memory loss and dementia in the real world, rather than only in the context of a drug study. With this data, ranging from brain imaging to genetic and biological information, dozens of CCNA researchers will be able to answer crucial questions about dementia, which may in turn lead to the development of better care and treatment.

Several Baycrest researchers have also been involved in other CCNA projects since its scientific headquarters relocated, including creating the first Canadian Brain Health Food Guide in collaboration with CCNA nutritionists and running clinical trials to reduce the risk of dementia through lifestyle changes.

"In partnership with CCNA, Baycrest can advance to the next level of accomplishment, our shared goals to identify, apply and redefine best practices in prevention and in the treatment of brain health diseases such as Alzheimer's and related dementias," says Dr. William Reichman, President and CEO of Baycrest.



## **WE CAN'T DO IT ALONE: DONORS TAKE BAYCREST TO THE NEXT LEVEL**

Many of our accomplishments at Baycrest would not be possible without donor giving. Two-thirds of our support comes from the province, and the funding is not enough to cover the cost of programming that addresses the emotional well-being of older adults and their cultural needs.

Some big-ticket projects are on the horizon. In the year ahead, the Foundation will be launching campaigns to fund renovations for the kosher kitchen as well as the Apotex Centre, Jewish Home for the Aged, where furniture and infrastructure upgrades are needed. The therapeutic pool at the Terraces of Baycrest closed in 2018, and the Foundation is raising funds for extensive renovations. In addition, fundraising is underway for the Patient, Family and Consumer Education Program.

Each year, the Baycrest Foundation engages the community in fundraising events like the Scotiabank ProAm for Alzheimer's, the annual Barrie to Baycrest (B2B) bicycle ride and the Yogen Früz Brain Project; conducts direct mail campaigns; and reaches out to donors to encourage their support for care, education, research and innovation at Baycrest.

Funds are also needed to support scientific research; modernization of the hospital pharmacy; beds and mattresses; arts and culture programs; innovation at Baycrest to introduce technology and improve life for residents and patients; and upgrades to imaging equipment at the Rotman Research Institute. If you or someone you know wishes to make a donation, please contact the Foundation.

Donors support Baycrest through restricted and unrestricted giving. When a donation is restricted, the funds can only be used for a particular purpose set by the donor. These gifts are remarkably valuable to us and they allow donors to make an impact on a cause that is close to their hearts. Unrestricted contributions are equally important because they enable us to be innovative and flexible. Often, we need unrestricted funds to enhance the patient experience and support our most pressing needs. Our hospital, day programs, clinics, residential care, outreach teams and counselling services are sustained through this form of giving. Donor support, whether it is through restricted or unrestricted giving, is vital to our success and helps keep us strong for those who rely on us.

### **Edwin Goldstein Neighbourhood**

Thanks to generous donors who honoured Edwin Goldstein's 50 years of service to Baycrest, we created a beautiful new lounge and dining and activity spaces on the second floor of the Apotex Centre, Jewish Home for the Aged. The Edwin Goldstein Neighbourhood provides a welcoming, open-concept space where residents can enjoy their dining experience, socialize and, most importantly, feel at home.

### **Charlotte and Lewis Steinberg Family Rehabilitation Wing**

The Charlotte and Lewis Steinberg Family Rehabilitation Wing is a shining example of the impact donors have on client care at Baycrest. The newly renovated seventh floor of the hospital is dedicated to the delivery of care for adults 55 and older who are recovering after an acute illness, injury or surgery. Charlotte and Lewis Steinberg's generous gift brought together physiotherapists, occupational therapists and their assistants to one floor to improve patient care.



## **BAYCREST@HOME:** REVOLUTIONIZING THE AGING EXPERIENCE

Baycrest@Home (B@H) is a new service designed to prepare and support family caregivers of older adults experiencing declining cognitive health through a combination of technology and dementia-care expertise. B@H helps caregivers respond to a crisis and minimizes the risk of future crises. It provides the knowledge, tools and services necessary to help families make better decisions, increase their capacity to provide care and improve their quality of life.

When older adults experience cognitive decline, family members are integral to their ability to remain living in the community. B@H is designed specifically for the needs of these family caregivers. All aspects of caregiver concerns are taken into account, whether it be anxiety about their loved one's day-to-day safety, maintaining self-care, providing social connections and recreational activity or managing medical care. B@H leverages more than 100 years of Baycrest expertise, ingenuity and emerging technological solutions to enhance the quality of life of older adults living at home.

This year, Baycrest@Home is working with a select group of clients to pilot and shape the service model of the future. These initial clients receive care navigation support and counselling and will be the first to trial new services as they are made available through B@H.

Here is a snapshot of some of the services the B@H team will provide in 2020:

**Virtual self-care:** a support tool for caregivers to actively take time out for themselves. An initial questionnaire available in an online format allows caregivers to understand the key areas of focus for their own health and well-being. Goal setting and educational materials assist the caregiver in prioritizing activities while being offered fun rewards to keep them on track and motivated.

**Safety sensors and monitoring apps:** interactive safety monitoring tools designed to be seamless in the home of the person with dementia. Caregivers have the opportunity to track the sleep habits, movement and wandering of their loved one. The caregiver can be notified of any unusual changes through the mobile application and can also decide who has access to this information within the family.

**Online memory aging program:** an online learning module through which caregivers will have the opportunity to learn about their own memory concerns and educate themselves on aging and brain health. Caregivers will also be able to take part in live-virtual sessions complementing the online course. (Baycrest Original)

**Video-streaming designed for seniors:** technology designed for seniors, easy to use with a novel one-click-of-a-button remote. It allows anyone with a TV to have access to dementia care related content in a video-streaming format.

During its pilot phase, B@H will continue refining its service, using feedback from pilot clientele to enhance its features and deliver the best quality of care and support.

Visit [Baycrest@home.com](https://www.baycrestathome.com) for more information.





# BAYCREST INNOVATION OFFICE (BIO): DRIVING INNOVATION FORWARD AT BAYCREST

For many years, Baycrest has been committed to pursuing its mission and achieving its vision through compassion, advocacy, respect, education and a sustained focus on achieving excellence. In 2019, Baycrest added a new value to its mission and vision: innovation. With this addition came the establishment of the Baycrest Innovation Office (BIO), a new department dedicated to helping Baycrest staff, students and volunteers to advance homegrown innovations for older adults.

The BIO team has been hard at work fostering a culture of innovation at Baycrest, supporting our innovators and adopting the best technology to improve the quality of life for our residents.

In order to better understand and encourage a culture of innovation at Baycrest, BIO - in collaboration with Baycrest's Centre for Aging + Brain Health Innovation (CABHI) - launched an event series called Innovation Rounds. It features short, inspiring talks by leaders in innovation with the goal of helping the Baycrest community explore various ways they can become innovators across campus and beyond. "At each event we have far surpassed our expectations and garnered very positive feedback from attendees. To me, this is a clear indicator that Baycrest staff members are ready and eager to innovate," says Ran Manor, Director of BIO.



In addition to Innovation Rounds, BIO also hosts innovation skills days, hands out Innovation Awards and has launched Planbox, an innovation discussion platform for staff to keep up-to-date on Baycrest's latest innovation projects, engage with each other and provide feedback. BIO has also partnered with institutions such as OCAD University to design assistive products and tools for older adults with moderate to severe dementia.

Besides fostering a culture of innovation, BIO supports Baycrest's leading innovation projects, such as the Patient Oriented Discharge Summaries (PODS) initiative. The PODS initiative provides various allied health professionals with a more patient- and family-oriented experience upon discharge and during transitions in care while also addressing workflow efficiencies. Another example of a Baycrest-led, high-impact innovation is the Baycrest Behavioural Assessment System (BBAS), a faster, evidence-based and systematic method of identifying and tracking responsive behaviors such as aggression and agitation in patients with dementia. BBAS improves workflow and reduces point-of-care workload by providing a means to quickly and comprehensively document behaviours.

"It's very exciting to be at the forefront of innovation at Baycrest. Staff members are ready to share their innovations on campus and beyond, and we're ready to help them every step of the way," says Ran Manor.

Last year, BIO applied cutting-edge technology at Baycrest. This included HeartLegacy, a solution that helps older adults in long-term care stay connected with their families through accessible video technology.

The BIO team looks forward to cultivating Baycrest's creative spirit, making it a global beacon of innovation in brain health care.

# HOW THE CENTRE FOR AGING + BRAIN HEALTH INNOVATION (CABHI) IS IMPROVING THE AGING EXPERIENCE

## IN CANADA

It has been five years since a historic visionary and transformative investment was made to establish the Baycrest-led Centre for Aging + Brain Health Innovation (CABHI) in Toronto. Fueled by nearly \$100 million in seed money from the federal and provincial governments at the time, for an initial five-year trial mission to optimize the cognitive, emotional and physical well-being of older adults - across Canada and around the world - CABHI's impact and success to date has been profound and far-reaching.

The need for this innovation accelerator for the aging and brain health sector could not have been more pronounced. As Canada's older adult (65+) population increases, so does the prevalence of age-related brain disorders such as Alzheimer's disease, the principal cause of dementia in seniors. More than 564,000 Canadians currently live with dementia<sup>1</sup>. That number is expected to nearly double by 2031. Costs for the direct care of Canadian dementia patients have been estimated at \$10.4 billion<sup>2</sup>; the combined direct and indirect costs already exceed \$30 billion; and, of course, the physical and emotional costs to individuals and their caregivers living with dementia are immeasurable.

Enter CABHI. CABHI provides funding and support to innovators for the development, testing and dissemination of new ideas and technologies that address unmet brain health and seniors' care needs, with a specific focus on dementia. It brings together partners in the health care, science, industry, not-for-profit and government sectors with a clear aim to help improve quality of life for the Canadian and global aging population. One of its most important goals is to provide older adults the opportunity to age and thrive safely - and with dignity - in the setting of their choice while maintaining their cognitive, emotional and physical well-being.

In the five short years since its inception, CABHI has developed a global reputation as the go-to organization that innovators seek out to advance their work in the seniors' health and residential care sector. CABHI has substantially raised Ontario and Canada's global profile in the seniors' innovations sector. It continues to partner with international innovation consortia and high-profile innovators, including an increasing number from Silicon Valley, the Israeli tech incubators and other innovation hot spots. In short, it has taken less than half a decade to bring the best aging tech solutions from around the world to Canadians, while helping Canadian innovators reach global markets.

The innovations supported by CABHI have brought many sought-after solutions to the Canadian healthcare system by accelerating new models of care and technological solutions to improve health outcomes and quality of life for seniors and their families. All the while, they have created greater efficiencies and unlocked potential savings for the provincial healthcare systems, in addition to stimulating economic opportunities nationally. However, there is more to do.

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Renewed funding from the federal government will provide CABHI the ability and opportunity to accelerate and amplify its impact to date. New investment will enable CABHI to critically address the needs of Canada's aging population through some of the following measures: increasing innovation in seniors' care; enhancing the health and quality of life among older Canadians; cementing Canada's reputation as the leading centre for innovation in aging and brain health; and helping grow Canadian companies, while reducing health system costs.

#### **CABHI's Impact to Date:**

- Over \$100 million in funding directed towards advancing healthcare innovations
- \$45+ million in secured investments by CABHI innovators and companies
- 276 innovation projects launched
- \$50+ million directed towards created and sustained highly skilled jobs
- 120+ unique trial sites across Canada and the United States
- 52,000+ older adults and caregivers engaged in innovation projects
- 143 newly validated products, practices and services introduced into market or care delivery



#### **Highlights of CABHI-supported innovations include:**

- RetiSpec, Canadian retinal imaging technology for the early detection of Alzheimer's and recent funding recipient of the Bill Gates- and Jeff Bezos-backed Alzheimer's Drug Discovery Foundation
- SafelyYou, a Silicon Valley-based AI-powered falls detection and prevention system that could save Canada ~1.47B annually by reducing falls for long-term care residents living with dementia
- Curiato, Canadian AI-powered "smart bedsheet" technology that monitors patients' skin to prevent bedsores and other pressure injuries
- GeriMedRisk, an Ontario geriatrician telemedicine resource helping bring critical and timely care to seniors across the province and saving the provincial government an estimated \$6.5M/year and growing

*1, 2 - Alzheimer Society of Canada stats (2019)*

# ENHANCING HEALTH EDUCATION FOR CLIENTS, FAMILIES AND CAREGIVERS

Health literacy is an important predictor of health - more important than socio-economic status, age or education. Low health literacy directly affects the client experience, and when abruptly faced with a serious health condition, anyone can experience low health literacy - no matter who you are, what you know or what you do.

For this reason, Baycrest is enhancing health literacy supports for staff, clients, residents, families and caregivers, with the goal of improving access to reliable health information, providing actionable content and breaking down the barriers to understanding.

To this end, Baycrest's Centre for Education established the Patient, Family and Consumer Education (PFCE) program, which recently designed and implemented a discovery and current state needs assessment to examine our organizational health literacy culture, evaluate patient education practices and identify any practice gaps, and bring existing education activities under a shared and integrated framework. The PFCE initiative engaged diverse stakeholders, including leaders, clinicians, patients, families and the broader community, to voluntarily participate in this project.

As a result, a comprehensive report of the current state of client and family education practice at Baycrest was established. This report includes five strategic directions to:

- Guide program infrastructure development and client and family engagement in health education
- Build staff capacity and professional practice efforts
- Increase access to reliable health information
- Create new educational materials
- Develop programming to improve health self-management and quality of life for our client, family, caregiver and community populations

This customized needs assessment was recently recognized as a Leading Practice by the Health Standards Organization (HSO), in alliance with Accreditation Canada. As a result of this analysis, the PFCE program has started collaborating with staff and developing tools to help promote the following best practices:

1. Using plain language and avoiding medical jargon
2. Using teach-back, a research-informed technique to check for understanding
3. Knowing where to get reliable education materials and using them to reinforce learning
4. Evaluating health information websites used with clients
5. Identifying ways to engage clients, families and caregivers in the learning process
6. Using tools and strategies that meet a client's learning preferences
7. Improving the client's and family's ability to easily navigate the healthcare system

Additionally, the PFCE team has introduced Baycrest's new Health Literacy Roadmap, which is intended to support our clients, residents, families, caregivers and visitors in taking part in, managing and making decisions about care and effectively navigating the healthcare system. Copies of the Roadmap have been distributed to units and clinics and have been placed on news racks around the campus.

Health literacy plays a significant role in maintaining and improving health. The PFCE program in the Centre for Education is actively supporting Baycrest staff in becoming leaders in the field of geriatric health literacy best practices. These practices will help alleviate client and family worry, promote partnership and ensure a positive and engaging health or residential care experience.



## **PARTNERS IN CARE:** **CLIENT AND FAMILY PARTNERS**

Formed in 2017, Baycrest's Client and Family Partner Panel (CFPP) is a group of dynamic, engaged individuals who play an important role in enriching the patient, resident and family experience. The Client Family Partners (CFPs) provide perspective from the viewpoint of clients and families on initiatives, programs, services and policies at Baycrest and beyond. To date, the CFPs have partnered with Baycrest on more than 130 requests, including input for a care model within a new Ontario Health Team and the development of a Baycrest tool that supports access to information.

### **Partnering in Care at Baycrest**

Health literacy is a critical component in a patient's wellness journey, impacting their ability to manage their health conditions, make informed decisions and partner actively in their care. According to a recent Canadian Public Health Association report, more than 60% of adult Canadians, including up to 88% of seniors, have low levels of health literacy.

Recognizing the importance of building this skill set among our patients, families and caregivers, Baycrest's Patient, Family and Consumer Education (PFCE) team within the Centre for Education, along with Baycrest's Quality team, engaged the CFPP to develop a Health Literacy Roadmap this past summer. Working with the CFPP to develop this tool was essential as the group represents the views and perspectives of the audience for which the roadmap is intended.

Over the course of several months, family partners worked with PFCE to offer valuable feedback on the design and content of the roadmap, resulting in a user-friendly, practical booklet that is now included in onboarding packages, available in Baycrest clinic waiting rooms and public areas and distributed by managers and clinicians to clients and patients. This self-directed resource plays an essential role across the Baycrest campus in supporting patients and their families to make informed, positive choices that promote and improve their health.

### **Home & Community Care in North Toronto**

Recently, CFPP members worked with the Toronto Central Local Health Integration Network (LHIN) to develop a home and community care model for the new North Toronto Ontario Health Team, of which Baycrest is a part. The project brought together representatives from Sunnybrook Health Sciences, Saint Elizabeth, Loft Community Services and other organizations to form the People Centred Care Council Working Group, with the goal of creating a long-term vision that modernizes and better integrates home and community care.

The plan strives to offer accessible, integrated and compassionate care, driven by what matters most to clients and families, and the CFPP's patient and family centred perspective was invaluable in developing this care model. Home and community care is an increasingly relied-upon approach to healthcare delivery; and this new care model aims to strengthen innovative service delivery, and support efficient and integrated experience for patients and providers.

In December 2019, the North Toronto Ontario Health Team received approval to move forward by the Ontario government. The plan includes the elements of home and community care developed by the working group.

*<sup>1</sup> Rootman, I. & Gordon-El-Bihbety, D. (2008). A vision for a health literate Canada: Report of the expert panel on health literacy. Ottawa, ON: Canadian Public Health Association. [http://www.cpha.ca/uploads/portals/h-l/report\\_e.pdf](http://www.cpha.ca/uploads/portals/h-l/report_e.pdf)*



# QUALITY IMPROVEMENT PLAN

## WORK FOR PATIENT EXPERIENCE INDICATOR

Providing an exceptional person and family centred residential and health care experience is Baycrest's strategic goal #1. Specifically, one of our improvement goals in the Baycrest 2019-2020 Quality Improvement Plan (QIP) includes improving the client experience.

As we partner with our clients and their families, it is our goal to ensure that they are as involved as they want to be in decisions about their care and treatment. At Baycrest, we aim to improve communication between providers and clients and their family members to help with making decisions about their care and setting goals. As an indicator of improvement, we monitor the number of clients who respond "always" to the client experience survey question "Are you involved as much as you want to be in decisions about your care and treatment?"

In our continuous quality improvement efforts, a working group was developed in April 2019 to enhance the client experience. The working group included two client and family partners in addition to a representation of interprofessional roles, such as Clinical Manager, Advanced Practice Nurse, Unit Clerk, Social Worker, Dietician and Nurse. The group developed a patient and family/caregiver resource designed to orient our clients to Baycrest and further support them as partners in their care experience, specifically for two pilot floors: one in Complex Continuing Care (CCC) (6E) and one in Rehab (7E). Once the materials are launched in early 2020, there will be the potential to spread this project beyond the two pilot units, should engagement remain strong and our client experience survey responses indicate a positive change.

Work is also underway to standardize the content of hospital admission packages on all inpatient units, including a finalized inventory of admission documents in collaboration with and with input from our client family partners. These materials have undergone a robust engagement process with patient and consumer education and our client and family partner panel. In addition, interviews were conducted with newly admitted patients and their family members (if available) on the two pilot hospital units (units 6E and 7E) during the earlier phase of this work. As well, clinical manager input was gathered and interprofessional collaboration was achieved. Because of these efforts, the materials are being launched in early 2020 and staff will be monitoring the success of the project moving forward through ongoing patient and family surveys.

# REDUCING ACQUIRED PRESSURE INJURIES

As part of Baycrest's annual Quality Improvement Plan, a key goal is continued reduction of hospital acquired pressure injuries for complex continuing care patients. Additionally, Accreditation Canada has identified pressure injury prevention among the Required Organizational Practices (ROP).

A pressure injury, also known as a bed sore or pressure ulcer, is an area of skin that has been damaged because of pressure. These injuries cause considerable harm to patients, hindering functional recovery and frequently causing pain and the development of serious infections. They have also been associated with an extended length of stay, sepsis and mortality.

A patient may be at risk of sustaining a pressure injury if they need help changing positions, have decreased feeling or sensation at pressure points on their body (such as the heels or tailbone), have had this type of injury before, are using a medical device (such as a urinary catheter or oxygen nasal prongs) or slide down while sitting in a chair.



Because these injuries can dramatically affect a client's quality of life and potentially lead to many other health problems, including injury to tissue, muscle and bone, decreasing the rate of pressure injury incidents was selected as a key quality indicator for Baycrest's Quality Improvement Plan. Deliberate efforts have been made to achieve improved performance on this outcome measure.

There is continued focus on reducing the incidences of pressure injuries on the Complex Continuing Care (CCC) units this year. To support ongoing improvement in this area, further education in the treatment of complex wound care will be provided.

The pressure injury prevention and treatment improvement initiative included involvement from our Client and Family Partners and extensive engagement with point of care staff and leadership. To support this initiative, a working group was created with representation from hospital 5E and 6W along with the Terraces nursing staff, a geriatrician, a clinical manager, an occupational therapist and an advanced practice nurse.

The working group worked closely together and developed a new brochure with input from clients and families before, during and after implementation. The brochure is now available as a patient education resource within the hospital. The group also received direction from hospital leadership to further enhance this pamphlet and not limit it to patients in the CCC units, but to allow all areas to employ this as an available resource to support the reduction of pressure injury incidences.

The project leads are now in the process of finalizing an approach to patient and family education. Reducing the incidences of pressure injuries is part of our ongoing efforts to improve our clients' experience and their quality of life.

# HAND HYGIENE

## SIMULATION TRAINING

Earlier this year, Baycrest's Infection Prevention and Control Department rolled out a campus-wide Hand Hygiene Simulation Training program. This program takes a direct, practical "hands-on" approach aimed at reinforcing the 4 Moments of Hand Hygiene.

Simulation training was the selected approach because this particular format has been used at Baycrest in the past with great success. The popularity of this training is largely due to its focus on interactive learning in a simulated care environment where nurses, doctors and allied health professionals have a chance to practice hand hygiene in small group settings. It is a safe environment where making errors is not frowned upon. On the contrary, mistakes in training are encouraged, as having peers catch and correct one's errors directly contributes to knowledge retention.

The standard environment was simulated on the units with a patient (played by an Infection Control Practitioner), patient environment (training room), personal protective equipment (PPE), sanitizing hand rubs and various pieces of patient equipment.

Following a brief review of the 4 Moments of Hand Hygiene by the Infection Control Practitioner, participants drew random scenarios tailored to their respective line of work. Various brief scenarios of care and service provision were drafted for nurses, PSWs, allied health professionals, housekeepers, dietary workers and others.

After role-playing the scenario, participants turned to their peers, who were tasked with spotting the errors and explaining the correct course of action. Particular attention was paid to the 4 Moments of Hand Hygiene and use of PPE. This training lasted for several weeks and covered a significant proportion of our staff between three shifts and across all Baycrest point of care areas.

These training avenues are an important component of patient safety. Hand hygiene has a direct impact on quality of care and patient safety across all levels of healthcare services. Not only do they refresh staff knowledge around important moments of hand hygiene, they also support our efforts to ensure we are meeting this critical Required Organizational Practice identified by Accreditation Canada.



# BAYCREST EMPLOYEE RECOGNITION PROGRAMS

At Baycrest, we strive to maintain an environment where staff can excel and achieve their personal best, thereby providing the community we serve the highest-quality service and care. We make it a priority to support and encourage our staff to excel in their careers and individual development. The values-based iCARE Awards recognition program and the Annual Recognition Awards are two ways in which we celebrate excellence. Both of these programs are co-sponsored by Baycrest and the Anna and Frank Schipper Endowment Fund.

Our **iCARE Awards** recognize individuals who practise the behaviours associated with our Baycrest values of Innovation, Compassion, Advocacy, Respect and Excellence (iCARE). Linked to each value is a set of behavioural statements created by staff from across the organization to help all of us at Baycrest put that value into action. By recognizing these actions through iCARE Awards, our employees and the community reinforce the values we all strive to live by. Over the last year, 157 iCARE awards have been presented to Baycrest staff.

**The Annual Recognition Awards** allow employees to nominate their peers to be recognized for excellence by demonstrating continuous improvement, going above and beyond their usual role, building trust with their coworkers and working to develop the next and best practices.

There are awards for individuals and for teams. In the past, individuals have been recognized for excellence in innovation, learning, research and leadership. Teams have been acknowledged for outstanding innovation, exceptional teamwork and interprofessional collaboration.

In addition, Baycrest recognizes staff for their years of service. An **Annual Long Service Luncheon** is organized for those who have worked here for 5, 10 or 15+ years, as well as retirees. In September 2019, 235 employees and their managers were invited to an off-site event hosted by the Executive Team to celebrate their years of service at Baycrest. Each staff member received a pin to commemorate their milestone. Retirees and employees with more than 25 years of service also received gifts.

*(continued)*



### Financial Support for Staff Development

At Baycrest, we are fortunate to have the support of a wonderful group of donors who have identified our employees' learning and development as the target of their generosity. As a result, staff can access financial support to upgrade their skills and qualifications through two donor-supported programs:

Our **Tuition Assistance Program**, supported by endowment funds from Baycrest's generous donor community, reimburses 100% of the cost of learning opportunities to a maximum of \$1,000 per person for full-time staff and \$500 for part-time staff each Baycrest fiscal year. Staff can use these funds to earn a degree or diploma or to enhance their credentials by taking a course from professional associations or certificate issuing bodies. In 2019, 46 employees were given a combined total of \$31,000.

**Our Learning and Development Award Program** covers a broader range of learning opportunities and offers more financial support. Staff can apply for up to \$5,000 to earn diplomas or degrees, attend conferences or travel to learn from the best in their field. There is also an opportunity for groups to apply for up to \$10,000. This program has an assessment component, in which each application is evaluated by a team of leaders from across the organization. In December 2019, a total of more than \$170,000 was given to over 130 grateful Baycrest staff to support their learning and development goals.

This program is made possible through the generous donors who provide ongoing funding for these awards, including:

- Birdie 4 Baycrest Learning and Development Award
- Cole Family Learning and Development Award
- Jonas and Rose Glowinsky Learning and Development Nursing Award
- Goldgrub Learning and Development Nursing Award
- Alfred & Helen Krieser Family Learning and Development Award
- The Maxwell A. and Fanny Levy Learning and Development Nursing Award
- Fela and Saul Lichtblau Learning and Development Nursing Award
- Hy & Bertha Shore and Harry & Sara Gorman Learning and Development Award
- Jerry Solway Learning and Development Nursing Award
- The Yetta Ungerman Learning and Development Nursing Award



## ENSURING OUR FINANCIAL STABILITY

*Brian Mackie, Vice-  
President, Finance & Chief  
Financial Officer, Baycrest*

With great financial challenges come great opportunities for Baycrest. Financial stability has always been our goal, and we are now exploring new ways to achieve this.

What was once the Local Health Integration Network (LHIN)-based operating system is now the Ontario Healthcare Teams (OHTs) structure. This change in landscape means all public healthcare organizations are still awaiting final direction on budgets and funding from the Ministry of Health and Long Term Care.

Last year, we received an inflationary increase of 1% in hospital funding, but we are unsure what this will be for 2020-21. Our budget needs for costs such as upgrades to beds, care equipment and supplies, and salaries remain a priority. And those costs continue to rise.

Baycrest must continue contingency planning in order to weather revenue challenges and funding freezes imposed by the provincial government, and to reduce over-reliance on our Baycrest Foundation for donations that are directed towards our “most urgent needs,” meaning they can be used for any area that requires them most. Those donations have traditionally helped bridge the gaps we have in our operating budget due to increasing costs and diminished funding from the government.

Over the years, funds have been pulled from the Foundation reserve to support our special programs and services, and to maintain our aging infrastructure. While the Foundation continues to receive donations, only those listed as “unrestricted” can be used as our needs arise. However, these funds are less plentiful (usually less than 20% of Foundation revenue), since donors generally prefer giving to specific initiatives with personal meaning to them, and the largest donations are more likely to be restricted to areas of the donor’s choosing.

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We have now depleted the Foundation's reserve funds. This fact, together with the anticipated gap caused by our increased expenses and less government funding, means we must find ways to account for a \$6M gap in funding for Baycrest services for the upcoming 2020-2021 fiscal year.

We must balance our budget and determine ways to create flexibility in our operations so that we can pivot as needed in the face of provincial funding uncertainty. To do this, we must continue in the direction we began several years ago of transforming our business model. We cannot rely on increased operating funding from the annual provincial budget to address all our needs. The increased costs of care services far outpace the funding that we receive from government.

This means identifying other ways to increase our funds. Part of this will involve making our commercial activities more profitable. Baycrest's brand has never been more valuable than it is today.

As focused as we must be right now to find ways to account for a \$6M gap, we are equally focused and optimistic that, over time, we can find \$60M in new revenue with a transformational change in our operations.

With change, there are always challenges and growing pains. We will now begin to rely more on our own revenue generating opportunities, which include commercialization of our knowledge in many forms and across the international community. There is no other organization like ours. We are ready and willing to expand our reach beyond the footprint of our campus, to service both our local community and those far beyond with the excellence in care, research, innovation and education for which we are known.

If we look a little further down the road, beyond today's financial challenges, we can begin to see a future in which our self-reliance is far greater and so too is our reach and impact.

# FUNDING

## BY THE NUMBERS

Over the years, we have had success in applying for infrastructure funding with both the province's Health Infrastructure Renewal Fund (HIRF) formula and other available grants to address specific issues.

This funding is unrelated to the general funding that the province provides to hospitals.

In the 2019-20 fiscal year, Baycrest received \$2.9M through the HIRF, including a \$500,000 special grant. This allowed Baycrest to address numerous infrastructure needs across campus over the last year, including hospital elevator upgrades; accessible washrooms on the hospital's second floor and in the Kimel Family building; hospital Maglock upgrades; and air handling unit upgrades.

However, the total HIRF amount given to Baycrest was down more than \$1.3M from the prior fiscal year as a result of reduced government spending.

It is important to understand that while these funds were available to Baycrest in fiscal 2019-20, there is no guarantee that we will secure similar levels of funding in the new fiscal year. Accordingly, we must continue to plan for the coming year for any similar revenue needs in these areas.



# Baycrest

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