Congratulations to the 2012 National Award Program recipients!

The College and the sponsors of these awards are pleased to honour the individuals, teams and organizations that are making a difference across the health care community. The College’s National Awards Program recognizes the importance of leadership, commitment and performance and we are proud to recognize the recipients for their outstanding accomplishments.

The programs featured in this booklet provide examples of sustainable leading practices that can be replicated in organizations across the country. Small or large, all organizations can learn from these innovative initiatives. The individuals profiled in the booklet illustrate leadership at its finest and demonstrate the impact that one person can have within their organization and beyond.

As you reflect on the outstanding accomplishments of those profiled, I urge you to consider other individuals, teams and programs that are worthy of recognition. For nomination information regarding the 2013 National Awards Program, please visit: www.cchl-ccls.ca.

Sincerely,

Ray J. Racette, MHA, CHE
President and Chief Executive Officer
Canadian College of Health Leaders
# Table of Contents

- National Awards Advisory Committee .............................................. 4
- 3M Health Care Quality Team Awards ........................................... 5
- Chapter Award for Distinguished Service ....................................... 9
- CHE Self-directed Learning Paper Award ....................................... 11
- College Award for Distinguished Service ....................................... 14
- College Honorary Life Member Award ......................................... 16
- Energy and Environmental Stewardship Award ............................ 18
- Health Care Safety Award ............................................................. 25
- Innovation Award for Health Care Leadership ............................... 31
- Mentorship Award ......................................................................... 37
- Nursing Leadership Award .............................................................. 50
- President’s Award for Outstanding Corporate Membership in the College ................................................................. 59
- Quality of Life Award ...................................................................... 61
- Robert Wood Johnson Awards ....................................................... 70
- Robert Zed Young Health Leader Award ....................................... 73
The College would like to thank the members of the National Awards Advisory Committee for their guidance and support.

Paula M. Rozanski, CHE (Chair)  
Executive Director  
Saint Thomas Health Centre

Dawn Beaubien  
Business Manager, Longer Term Care and Home Care  
3M Canada Company – Health Care

Amy N. Boudreau  
Director, Strategic Planning and Operations  
The Provincial Centre of Excellence for Child and Youth Mental Health  
Children’s Hospital of Eastern Ontario

Diane Browne  
Vice President, Business Development  
ARAMARK Healthcare

Phillip G. Christoff  
Director, Quality and Risk Management  
Hamilton Niagara Haldimand Brant LHIN

Jaime M. Cleroux (Ex-officio)  
Vice President, Membership and Corporate Services  
Canadian College of Health Leaders

Jennifer A. Duff, CHE  
Program Director  
Providence Health Care, St. Paul’s Hospital

Barbara C. Hall, CHE  
Vice President, Person Centred Health  
Capital District Health Authority – Cobequid Site

John D. Knoch, CHE  
Director, Corporate Services  
City of Red Deer

Diana M. Korol, CHE  
Charge Technologist, Lab and X-Ray  
Forth Smith Health & Social Services Authority

Cindy MacBride (Ex-officio)  
Manager, Awards and Sponsorships  
Canadian College of Health Leaders

Pauline E. MacDonald, CHE  
Director of Quality Management  
Guysborough Antigonish Strait Health Authority

Cynthia A. Majewski  
Executive Director  
Quality Healthcare Network

Ray J. Racette, MHA, CHE (Ex-officio)  
President & Chief Executive Officer  
Canadian College of Health Leaders

Pamela Winsor  
Director, Health System Strategies & Chief Marketing Officer  
Medtronic of Canada Ltd.
3M Health Care Quality Team Awards

This award recognizes three important elements: innovation, quality and teamwork. 3M Health Care encourages institutions and health care providers to embrace quality management by developing innovative approaches that bring about sustainable improvement.

Full descriptions of all award nominees can be found in the 3M Health Care Quality Team Awards Executive Summaries booklet, available at: www.cchl-ccls.ca.
Award Recipient: Programs and Processes in an Acute Care Hospital Environment

eCare Project
North York General Hospital

In 2004, the Canadian Adverse Event Report identified that between 9,000 and 24,000 patients die per year due to adverse events. Of significance is that 37% of adverse events are highly preventable; and 24% of preventable adverse events were related to medication error. In this age of advancing technology we cannot rely on human vigilance when in reality a demanding patient workload and shift work can result in human error.

The eCare Project is an initiative that includes an advanced electronic medical record, standardization of evidence-based care, safe prescribing and medication administration, and clinical decision support components. Two key features of the eCare Project are:

- computerized provider order entry: a system which allows physicians and nurse practitioners to enter patient care orders electronically, reducing the potential for misinterpretation and increasing information-sharing among healthcare providers; and

- closed loop medication administration: which includes unique bar-coding alert technology that identifies individual medications to individual patients, therefore reducing potential errors when administering medications.

These two components provide clinicians the necessary tools to be successful in providing the best care possible and ensure clinician adoption as evidenced by:

- patient mismatches: >1,300 potential medical errors were prevented using closed loop medication administration systems;

- Venous Thromboembolism (VTE) prophylaxis: 36% increase in VTE prophylaxis use in patients with hip fractures;

- clinician satisfaction: 83% of primary users were satisfied with the system; and

- scanning compliance: 84% of medications administered have medication and patient scans completed (some medications cannot be scanned as they are non-formulary or patient’s own medication)

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Award Recipient: Programs and Processes in a Non-acute Care Environment

Glenrose Rehabilitation Hospital Services Access Redesign
Alberta Health Services

This project focuses on the redesign of tertiary-level inpatient rehabilitation services at the Glenrose Rehabilitation Hospital (GRH). In the fall of 2009, as Alberta Health Services (AHS) placed its emphasis on improving access and quality of care to all Albertans, the Glenrose Hospital was challenged to increase its administration rate by 5 patients per day. The strategy was to move patients more quickly out of acute care and into appropriate rehabilitation programs with a goal of returning home. At the GRH, this directive mobilized an immediate service review and a resulting proposal for the redesign of first inpatient and then outpatient service with an aim to improve patient access to GRH services. The underlying assumption was that inpatient service redesign would also influence outpatient and day patient utilization resulting in an overall increased admission rate of 5 patients per day.

Phase one focused on inpatient adult rehabilitation and geriatric services redesign. Planning for Phase Two Outpatient Redesign commenced in January 2011. Based on a post one-year implementation evaluation conducted by the GRH Office of Research, the redesign resulted in increase rates of admission. While the combined inpatient admission rate increased by approximately 1.6 patients per day, the overall site (inpatient, outpatient, day patient) rate increased by 4.07 patients per day. Almost 450 more patients had access to rehabilitation in 2010 than in the 2008-2009 pre-implementation period; a 33% increase in access for patients requiring rehabilitation.

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3M Health Care Quality Team Awards

Selection Committees

Programs and Processes in an Acute Care Hospital Environment

Frank Demizio, CHE (Chair)
Healthcare Consultant

Pattie A. Cochrane, CHE
Vice President, Patient Services and Quality & Chief Nursing Officer
Trillium Health Centre

Maura Davies, FCCHSE
President & Chief Executive Officer
Saskatoon Health Region

Arlene Gallant-Bernard, CHE
Executive Director
Prince County Hospital

Jeanie Joaquin, CHE
Executive Director
Scarborough Centre for Healthy Communities

Larry McBride (Ex-officio)
Corporate Relations Manager
3M Canada Company

Chris Power, CHE
President and Chief Executive Officer
Capital District Health Authority

Programs and Processes in a Non-acute Environment

Marguerite L. Rowe, CHE (Chair)
Executive Director, Continuing Health Services
Vancouver Island Health Authority

Sandra Blevins, CHE
Vice President, Clinical and Operations Support
Saskatoon Health Region

Barbara Boyer
Consultant
Boyer Health Management Consulting

Akos M. Hoffer, CHE
Chief Administrative Officer
The Perley and Rideau Veterans’ Health Centre

Larry McBride (Ex-officio)
Corporate Relations Manager
3M Canada Company

Kelli A. O’Brien
Chief Operating Officer,
Long Term Care and Rural Health Western Health

Joanne C. Watson
Manager, Administrative Services
Port Hope Community Health Centre

Sandra V. Whittall, CHE
Integrated Vice President, Mental Health Services
St. Joseph’s Health Care & LHSC
Chapter Award for Distinguished Service

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

Assiniboia
Suzanne Boudreau, CHE
Project Lead, Procurement Project
Saskatchewan Association of Health Organizations, Shared Services Office

Manitoba
John Borody, FCCHL
Managing Director, Africa and the Middle East
Accreditation Canada International

BC Lower Mainland
David Thompson, CHE
Vice President, Seniors Care & Clinical Support Services
Providence Health Care

Midnight Sun
Stephen R. Jackson, CHE
Acting Manager, System and Infrastructure Planning
Department of Health & Social Services
Government of the NWT

Bluenose
Brenda Worth, CHE
Director, Nursing
Prince County Hospital, Health PEI

Newfoundland & Labrador
Rick Prowse
Executive Client Director
GE Healthcare

Eastern Ontario
Wendy Nicklin, CHE, FACHE
President & Chief Executive Officer
Accreditation Canada

Quebec
Paula Rozanski, CHE
Executive Director
Saint Thomas Health Centre

Greater Toronto Area
Jatinder Bains, CHE
Manager, Ambulatory Care
Rouge Valley Health System

Southern Alberta
Nancy Guebert
Vice President, Rockyview General Hospital
Alberta Health Services

Hamilton & Area
Peter S. Szota, CHE
Executive Director
Grand River Community Health Care
CHE Self-directed Learning Paper Award

This award, established by the College’s Board of Directors in 2005, recognizes high quality papers submitted as a component of the CHE certification program. The papers demonstrate comprehensiveness, critical thinking and strategic problem solving skills. They are widely applicable and often add new information to the literature in the field.
Award Recipients

1st Place:
*Examining the Term “Medically Necessary” in Health Services Policy and Governance*

Marie E. Lubiniecki, CHE
Health Services Officer, Canadian Forces, Edmonton, AB

Major Marie Lubiniecki is a Health Services Administration Officer in the Canadian Forces with 19 years of service. She graduated from the Royal Military College of Canada in 1998 with a degree in Business Administration and completed a Masters in Public Health in Health Policy and Management from the University of Alberta in 2007. She has worked as a military health administrator in both field and in-garrison healthcare settings throughout her career. Highlights include an operational tour of duty to Bosnia-Herzegovina as the National Medical Liaison Officer in 2004, and more recently as Commanding Officer of 12 Canadian Forces Health Services Centre in Wainwright, Alberta in 2008. Major Lubiniecki is currently employed as the Regional Operations Officer at 1 Health Services group in Edmonton, Alberta where she coordinates health services support to military operations and training in western Canada. Marie is a Certified Health Executive (CHE) and is a recipient of the Robert Wood Johnson Award.

Honourable Mention:
*Innovative Ambulatory Model of Care for Women Undergoing Breast Cancer Reconstruction*

Terri L. Stuart-McEwan
Executive Director, gattuso Rapid Diagnostic Centre, Princess Margaret Hospital, University Health Network, Toronto, ON

Terri Stuart-McEwan is the Executive Director of the gattuso Rapid Diagnostic Centre and medical oncology at Princess Margaret Hospital, and is cross appointed as an adjunct lecturer at university of Toronto- Bloomberg Faculty of Nursing. She received her Nursing Diploma (1985), Bachelor of Science in Nursing (1995) and Masters in Health Studies (2005). As a healthcare leader for the past 26 years, she has lead teams to develop a “one-stop shop” breast centre, develop and implement surgical best practices, and create academic cancer diagnostic assessment programs. She is also the Cancer Care Ontario lead for academic and large community hospitals. In 2004, she was appointed by the MOHLTC Wait Time Strategy as a perioperative coach. In addition she has been expert panel member for the OHA Surgical Safety Checklist toolkit, ISMP OR Medication Safety Checklist. She has presented and co-authored several studies regarding patient safety initiatives, new models of care in breast health and most recently involved in creating an innovative ambulatory model of care for women undergoing breast cancer reconstruction that was accepted as a leading practice by Accreditation Canada.
CHE Self-directed Learning Paper Award

Selection Committee

**Mark Fam, CHE (Chair)**
Senior Manager  
Deloitte Inc.

**Theresa Fillatre, CHE**  
Senior Director, Atlantic Canada  
Canadian Patient Safety Institute

**Sandra Hanmer, CHE**

**Susan E. Kwoleck, CHE**

**Johanne Messier-Mann, CHE**  
Chief Nursing Officer and Director  
Maternal Child and Medical Programs  
Sault Area Hospital

**Beatrice Mudge, CHE**
Vice President, Best Practice, Education, Research & Chief Nursing Executive  
VHA Home Healthcare

**Joanne Simard, CHE**
Senior Staff Officer Resource Management, Infrastructure  
CF Health Services Group

**Capt(N) John Roland Young, CHE**
Commandant  
4 Health Services Group
College Award for Distinguished Service

The College Award for Distinguished Service recognizes an individual or corporate member for their significant contribution to the College or to the advancement of our mission, vision, values and strategic directions.
Award Recipient

Don Desjardins

Don, National Business Development Director, is one of two directors responsible for Smith & Nephew’s Wound Care Division in Canada. His focus over the past seven years has been to prevent, or help reduce, the severity of pressure ulcers and surgical site dehisced wounds. Working with a team of advanced practice nurses, Don has been able to bring attention to an issue that is often overlooked in the hectic world of healthcare.

Don has been recognized internationally, by Smith and Nephew Inc., receiving their Marketer of the Year Award for the Wound Prevention, Care and Healing System. Don’s team of advanced practice nurses, led by Theresa Hurd, has presented and published internationally. This team is helping change the way wounds are cared for, improving the lives of patients all over the world.

Over the last seven years, Don has been deeply involved with the Canadian College of Health Leaders. He is very passionate about the leadership role the College plays in championing improvements in healthcare in Canada. Don is a member of the College’s Corporate Advisory Council and participates regularly at College events, including the National Health Leadership Conference and the Harnessing Disruptive Change Conference.

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College Honorary Life Member Award

This award recognizes a long standing College member who has contributed significantly to Canada’s health system through their role as health care leader. Honorary life members are selected at the discretion of the College’s Board of Directors.
Award Recipient

Bob Smith, MBA, FCCHL

Robert (Bob) Smith is Adjunct Professor, Sauder School of Business, Director of Education of the UBC Centre for Health Care Management and President of Perform Management Consulting Inc. Mr. Smith’s career as a health leader includes his appointment as CEO of the Fraser Health Authority from June 2002 to 2005, President and CEO of the Capital District Health Authority, in Halifax, Nova Scotia 1998-2002; President and CEO of Lions Gate Hospital in North Vancouver, BC 1989-1996; Deputy Director of the BC Cancer Agency 1980-1989; and Executive Director of the Arthritis Society in BC 1975-1980.

He has held numerous health leadership and governance roles provincially and nationally, including Chair of the Canadian Hospital Association, Chair of the BC Health Association, Director of the Association of Canadian Academic Health Organizations; and Director of the Health Administrators Association of BC. He is a founding Director of the Canadian Telehealth Society and the Screening Mammography Program of BC.

He has served as Director of the Canadian Health Services Research Foundation, Director of the Canadian Stroke Network, and Chair of the Canadian Stroke Strategy. Other directorships include terms with the Canadian Healthcare Association, Ottawa; Continental Home Health Care Inc., Los Angeles; and Saint Elizabeth Health Care, Toronto. He is currently a member of the BC Law Society Hearing Panel and member of the Vancouver Board of Trade Health Committee. Robert joined the College in 1981 and obtained his Fellowship in 1991.

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Energy and Environmental Stewardship Award

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

Sponsored by:

Honeywell
Award Recipient

The Ottawa Hospital

The Ottawa Hospital (TOH) is an academic health care leader that supports advancing environmental innovations, and each year continues to bring forward new technologies and initiatives, which improve the environmental footprint for our organization and community. TOH has established a green team that leads our environmental initiatives that focus on three key themes, including: energy conservation, waste reduction and employee engagement.

Since the inception of the program, in the early 1990’s, TOH has achieved efficiencies and savings associated with environmental initiatives of over $42 million and continues to identify new innovative strategies to improve our environmental footprint. Most recently, in 2011/12, TOH invested in air cooled lab systems, LED exit signs and chiller upgrades. Finally, in 2011/12, we implemented a composting program for our cafeteria operations, which is diverting approximately 68 metric tons of food waste annually.

Annually, our green team organizes and participates in a series of staff events to promote the importance of our environmental programs and educate and engage staff in advancing our energy and environmental stewardship agenda. In addition, through our purchasing department we have implemented environmentally preferable purchasing policies as well as a new sustainable construction standard to continue with a focus on procuring environmentally friendly products.

TOH believes that there is a connection between healthy patients and staff and a healthy environment, and we have a corporate responsibility to demonstrate leadership in this field. Moving towards more sustainable operations will conserve natural resources, generate long-term cost savings, and improve the health and safety of the hospital environment. Through our sustainability program, we encourage all employees to become environmental stewards in their workplace and their communities. All of these benefits will contribute to the exceptional service and world-class care that TOH strives to provide for each patient.

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Bluewater Health

Bluewater Health is one of Canada’s first hospitals to achieve LEED certification. This means design and construction deliver high performance in water savings, energy efficiency and indoor air quality, through innovation. Innovations include an underground cistern to collect rainwater for use in landscaping of green spaces on rooftops, which in turn helps maintain building temperature. The building plan included a program to recycle 96% of construction waste. More than 26% of the building materials were manufactured regionally and 10% of those materials contain recycled content. We use non-toxic cleaning supplies throughout the facility.

LEED certification is an internationally-accepted certification process that is specifically targeted at the early adopters of Green building practices. The third party assessment and certified performance represented by a LEED Certification signals the improved environmental credentials of these Green buildings to the market, allowing them to achieve premium value within their local markets Credit Groups include Sustainable Sites, Water Efficiency, Energy and Atmosphere, Indoor Environmental Quality, Materials and Resources and Innovation in Design. Innovation Credits provide a mechanism for rewarding innovative green practices.

The design was driven by:
- environmentally sustainable principles;
- providing a practical space for employees, patients and visitors; and,
- cost effectiveness.

Bluewater Health’s transformation into a Green Leader is exhibited by its mandate to:
- incorporate features that save energy, water, and operating costs;
- use fewer raw materials; and
- improve occupant comfort.

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Lower Mainland Facilities Management (LMFM)

Organizational sustainability is a key element in the Lower Mainland Facilities Management’s business process. Within the LFMFM is the Energy & Environmental Sustainability (EES) group, which covers: Vancouver Coastal Health (VCH); Providence Health Care (PHC); Provincial Health Services Authority (PHSA); and Fraser Health Authority (FHA).

Mauricio Acosta, Director of Energy and Environmental Sustainability, leads an eager EES team of energy and sustainability focused staff. Conservation has been a focal point of work and significant success has been achieved over the last year.

Energy Management has accomplished the following:
- VCH: 20 projects completed or in progress (total est. savings, 3.6 GWh & 20,000 GJ)
- FHA: 15 projects completed or in progress (total est. savings, 2.6 GWh & 11,000 GJ)
- PHC: 3 projects completed or in progress (total est. savings, 1 GWh)
- PHSA: 10 projects completed or in progress (total est. savings, 2 GWh)

Behaviour focused programs have accomplished the following:
- Green+ Leaders: Trained roughly 170 new volunteers.
- GreenCare "Cut the Carbon Community" (C3):
  - Online social media engagement site launched in March '11.
  - Over 2,300 staff currently registered on the site.
  - Staff Commitments: (home / work savings)
    - Reduction of 6,000 GJ
    - Reduction of 1 GWh
    - Reduction of 520 eCO2 tonnes

Materials / Waste reduction has accomplished the following:
- Recycling
  - 8 sites had comprehensive recycling programs rolled out.

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Ross Memorial Hospital

At the Ross Memorial Hospital, “lightbulb moments” are not only good ideas – they’re green, such as the “Save a Little ... Save a Watt” campaign, which encourages staff to conserve energy. By turning off lights, computers/monitors and taking the stairs, RMH can reduce its carbon footprint by 31 tonnes of GHG by Earth Day.

Conservation initiatives include the installation of touchless faucets, low water volume toilets and motion detector lights. Honeywell Limited has identified further opportunities for savings. Projects range from major undertakings, such as an infrastructure renewal project in the oldest wing of the hospital, to an effort that involves “virtualizing” computer servers to reduce the energy required to run and cool new units.

Departments “adopted” the hospital’s gardens, ensuring the grounds remain beautiful yet cost-effective to maintain. A Local Food Pilot Project is investigating the viability of local food purchases.

The award-winning vermiculture program uses worms to speed the composting of food waste and create soil that enriches the patients’ therapy garden. RMH recycles electronics, batteries, kitchen grease, even the material that wraps sterile surgical instruments; volunteers sew it into tote bags. Green achievements are celebrated by senior administration and the local media, encouraging even more “lightbulb moments” within the team.

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St. Joseph’s Healthcare Hamilton

St. Joseph’s Healthcare Hamilton’s (SJHH) multidisciplinary green team, Team Environmental Vision & Action (Team EVA), is dedicated to the greening of health care and has developed a grassroots, multi-pronged approach to tackling health care greening initiatives that has achieved great success since starting in 2008.

A healthy balance between grassroots initiatives and corporate projects has resulted in many successful greening initiatives at SJHH, including the reduction of energy and natural gas usage, implementation of an effective waste diversion program and developing a culture of commuting. SJHH has implemented a comprehensive Energy Saving and Facility Renewal Program that is both fiscally and environmentally responsible. This program has resulted in a cumulative reduction of 14,105,829 kWh of hydro and 2,363,484 m3 of natural gas consumption, while at the same time allowing SJHH to realize over $1M annual savings in utility costs.

This reduction of hydro and natural gas consumption is the equivalent of reducing our greenhouse gas emissions (CO2) by 444,872 tonnes (148,291 tonnes per year). A blue bin recycling program was initiated by Team EVA to recycle glass/cans/plastics and fine paper for high traffic areas, as well as recycling used plastic jugs from our dialysis units. This recycling program has resulted in the diversion of 64.61 tonnes of waste in 2009 alone, with the potential to realize an additional 87.5 tonnes diverted with the current strategies being implemented following a comprehensive waste audit.

New to the Hamilton Transportation Management Association (TMA) in 2009, SJHH has been the fastest growing member with a number of impressive accomplishments over the relative infancy of our participation and has been awarded the Hamilton TMA Smart Commute Employer of the Year 2010. By harnessing the commitment and know-how of dedicated staff and volunteers, SJHH has worked to infuse green approaches to health care into our culture, everyday decision making and delivery of health services.

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Energy and Environmental Stewardship Award

Selection Committee

Tony Dagnone, FCCHSE, FACHE (Chair)
Past President and CEO
London Health Sciences Centre

Suzanne Boudreau, CHE
Project Lead – Procurement Project
SAHO – Shared Services Office

David Crockett, CHE
Vice President, Facilities Management
London Health Sciences Centre and
St Joseph’s Health Care, London

Sandra Hanmer, CHE

Steve Hardcastle
Health Care Consultant

Andrew Neuner, CHE (Excused)
Vice President, Community Integration
Interior Health

Ron Noble, FCCHL, FACHE
Chief Financial Officer and Vice
President
The Credit Valley Hospital

Gino Picciano, CHE (Excused)
Senior Vice President and Chief
Operating Officer
The Ottawa Hospital

Luis Rodrigues (Ex-officio)
Vice President, Energy Solutions
Honeywell

Mike Hickey
Director, Facilities Management &
Support Services
Northern Interior Health Region

Gord Trann
Regional Director, Facilities
Management
Winnipeg Regional Health Authority
Health Care Safety Award

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

Sponsored by:

BD
Award Recipient

The Credit Valley Hospital and Trillium Health Centre
*Reducing Unnecessary Catheters: Positive Deviance, Sustainability and Spread*

Urinary tract infections (UTI) are the most common nosocomial infection, eclipsing other infections that have received system-wide attention. The vast majority of nosocomial UTIs are related to the use of an indwelling urinary catheter (IUC). Catheter associated urinary tract infections (CAUTI) are costly to the health care system and are now viewed as a preventable source of morbidity and mortality.

This initiative was generated in a culture where positive deviance is encouraged and supported. As such, this initiative was frontline led, primarily through the volunteerism of team members committed to patient safety and quality improvement, and was done within existing resources. Project goals were to decrease use of unnecessary IUCs, decrease CAUTIs, support patient safety, promote earlier patient mobilization (particularly for seniors) and support discharge practices that enhance throughput in the organization.

The creation of a nurse-led IUC clinical protocol reduced IUC prevalence from 27% to 14.5% at one year (relative reduction of 46.5%). Unnecessary IUC use was reduced from 78.2% to 25.8% (relative reduction of 67%). CAUTI rate was double the literature benchmark at baseline and was reduced to zero in the pilot phase of the project.

Improvement gains were sustained with minimal added efforts and the intervention was successfully spread to all noncritical care areas in the organization. This initiative demonstrates how positive deviance and a simple intervention can result in sustained culture change, enhanced high quality and safe care, and spread throughout a large organization in a relatively short time and with minimal resources.

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North York General Hospital

Business Intelligence

With financial and clinical pressures mounting, health care executives are being asked to do more with less without compromising quality or patient safety. A wrong decision can have a detrimental impact to the organization. The demand for quick analysis of data to inform decisions is not only growing but becoming increasingly complex, and more strongly linked to funding. Also adding to the pressures is the visibility of information, now becoming more public, and the expectations that hospitals post publicly their performance on a number of indicators related to patient safety.

The significance of the Business Intelligence innovation crosses many boundaries in health care. For data measurement and indicator development Business Intelligence is cutting edge in the cohesiveness of information and responsiveness to data. In strategic planning it focuses the entire organization on priorities and provides useful information about effectiveness in achieving the priorities. For the community and patients, the capabilities of Business Intelligence to draw information from multiple sources, internal and external, enables users to focus on patient safety as the information they require is available, reliable, and accessible within benchmark timeframes.

For health professionals the Business Intelligence facilitates their decision-making abilities by creating a response-able culture. The Business Intelligence project is an ongoing improvement venture for North York General Hospital that is providing support and direction to implement the right actions, in the right places, by the right people for the right reasons.

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In 2004, the Canadian Adverse Event Report identified that between 9,000 and 24,000 patients die per year due to adverse events. Of significance is that 37% of adverse events are ‘highly’ preventable; and 24% of preventable adverse events were related to medication error. In this age of advancing technology we cannot rely on human vigilance when in a reality demanding patient workload and shift work can result in human error.

North York General Hospital’s ‘eCare Project’, is an initiative that includes advanced Electronic Medical Record (EMR), standardization of evidence-based care, safe prescribing and medication administration, and clinical decision support components. Two key features of the ‘eCare Project’ are:

- Computerized Provider Order Entry (CPOE), a system which allows physicians and nurse practitioners to enter patient care orders electronically, reducing the potential for misinterpretation and increasing information-sharing among healthcare providers, and;

- Closed Loop Medication Administration, which includes unique barcoding technology that identifies individual medications to individual patients, therefore reducing potential errors when administering medications.

The launch of this bold and innovative project has improved patient safety by enabling safe prescription and medication administration, reducing medication administration errors and improving medication reconciliation. CPOE allows physicians to enter patient care orders, including medications, electronically instead of on paper. Thus reducing the possibility for misinterpretation and increasing information-sharing among health-care providers. Closed Loop Medication Administration includes barcode scanning to uniquely identify each medication and associate with patient specific medication orders. These systems reduce the risk for medication errors by alerting health-care providers if they are about to make an error when ordering or administering medications.

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Vancouver Island Health Authority

Vancouver Island Health Authority Computerized Hand Hygiene Audit Tool

Hospital acquired infections affect approximately 10% of hospitalized patients each year. Hand hygiene is recognized as the single most effective method in reducing cross infection. Hand hygiene compliance audits have been performed annually across the Vancouver Island Health Authority since 2007, and although overall rates increased they remained below 40%. The VIHA Infection Prevention and Control (IPC) team adapted the Canadian Patient Safety Institute hand hygiene audit tool. Once the changes were made the tool remained unchanged, whether paper based or electronic form.

In 2009, collaboration began between the VIHA Information Management and Information Technology (IMIT) and the Performance Monitoring and Improvement (PMI) Departments, with the IPC Team to develop computerized hand hygiene audit tool to replace the existing system where auditors recorded observations on a paper form that was sent to a central location for entry into an Access database. Staff in each program area was provided with support to assume responsibility for the completion of audits on a regular schedule. The IPC Program continues to provide the clinical and subject matter expertise.

The introduction of the electronic system meant the length of time from audit completion to availability of compliance results was substantially reduced. Staff are immediately aware of how their practice impacted their unit/program result. This represented a significant improvement over the previous approach which was a four month wait between the date the observations were recorded and the date a report was made available. This lag time reduced any personal accountability for the results.

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# Health Care Safety Award

## Selection Committee

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Affiliation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Barbra Gold</strong> (Chair)</td>
<td>Executive Director</td>
<td>Maimonides Geriatric Centre</td>
</tr>
<tr>
<td>Mike Bond (Ex-officio)</td>
<td>Vice President, Sales and Strategic Account Management</td>
<td>BD Canada</td>
</tr>
<tr>
<td><strong>Patti Boucher</strong></td>
<td>Vice President, Prevention Services</td>
<td>Public Services Health and Safety Association</td>
</tr>
<tr>
<td><strong>Barbara C. Hall, CHE</strong></td>
<td>Vice-President, Person Centered Health</td>
<td>Capital District Health Authority</td>
</tr>
<tr>
<td>A. Arden Krystal, CHE</td>
<td>Vice President, Clinical Operations</td>
<td>Fraser Heath Authority</td>
</tr>
<tr>
<td>Cynthia Majewski</td>
<td>Executive Director</td>
<td>Quality Healthcare Network</td>
</tr>
<tr>
<td>Patricia McKernan</td>
<td>Director, Risk Management &amp; Quality Improvement</td>
<td>St. Michael's Hospital</td>
</tr>
<tr>
<td>Wendy L. Nicklin, CHE, FACHE</td>
<td>President and Chief Executive Office</td>
<td>Accreditation Canada</td>
</tr>
<tr>
<td>Michael J Rendenbach, CHE</td>
<td>Vice President, Primary Health Care</td>
<td>Regina Qu’Appelle Health Region</td>
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Innovation Award for Health Care Leadership

This award recognizes the outstanding capabilities and achievements of a senior executive who has made innovation a focal point of his or her organization’s strategy in order to create high impact results.

Sponsored by:

[Medtronic logo]
Award Recipient

Isabel Henderson
*Alberta Health Services, Glenrose Rehabilitation Hospital*

Since 1995, Isabel Henderson has provided leadership to the Glenrose Rehabilitation Hospital (GRH), one of the largest free-standing academic rehabilitation facilities in Canada. Her vision and passion from improving meaningful living for persons of all ages with a physical or cognitive disability have been underpinned by creative and innovative strategies to giving “voice” to how rehabilitation makes a difference within the healthcare system.

Isabel has positioned the hospital as a leader within Canada in the delivery of innovative rehabilitation services for persons with complex needs through her efforts supporting the integration of clinical care with research, technology and evidence-informed practices. Innovation has taken the form of service redesign based on a functional versus medical model. With a team of over 1,500 physicians and staff, the redesign of inpatient service has increased annual admission by 25% within one year. Through innovative partnership with government, industry and the military, and with the support of the Glenrose Hospital Foundation, she has garnered over $6M in funding for state-of-the-art technology in support of life-long patient independence. Under her leadership, research is being advanced by over 100 researchers in joint or affiliate university positions.

Isabel is a respected and influential leader within the Canadian rehabilitation community and internationally. In a climate of significant healthcare reform in Alberta, Isabel has sustained a person-centred culture of inquiry, continuous improvement, accountability and forward thinking. Innovation is a fundamental value and driver that has merged interdisciplinary team practice with research and technology.

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Connie Clerici
*Closing the Gap Healthcare Group*

Connie Clerici is a visionary leader and change agent who has made a positive impact on the healthcare system through collaboration and partnerships. Surrounding herself with a stellar Advisory Board and leadership team and cultivating relationships within and outside the healthcare sector, she has garnered tremendous respect and influence in improving the healthcare system through continuous innovation.

Connie is the founder of Closing the Gap Healthcare Group (CTGHG), which provides over 200,000 client care visits in Ontario annually and employment to approximately 600 individuals.

As a change agent she has immersed herself in the community and involved peer organizations, businesses, Community Care Access Centres, and Local Health Integration Networks to pilot innovative new models.

In her Family Centred Care model, she advocates for the use of appropriately trained developmental service workers as part of the care team. She was an early advocate of the use of therapy assistants who are trained and supervised by regulated healthcare providers. She pioneered this model which has since been piloted and implemented in the Grey Bruce region in Ontario.

Connie has made investments in innovative new technologies that have brought frontline providers access to client records through a web portal and leaders access to real-time data that services both strategic and operational support functions. Sustainability of the publicly-funded healthcare system necessitates ongoing investment in innovation. As a successful entrepreneur Connie Clerici will continue to champion change through innovation.

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Barbra Gold

Jewish Eldercare Centre and Donald Berman Maimonides Geriatric Centre

In the 20 years Barbra Gold has been the Executive Director of Donald Berman Maimonides (DBM), and the six years she has held the same role at Jewish Eldercare Centre (JEC), she has spearheaded the extraordinary turnaround of both centres’ operations. Barbra’s commitment to innovation in all that she does has built DBM and JEC into pre-eminent long-term care facilities. The Strategic Plans of both centres beautifully evoke Barbra’s mission to deliver high-quality, resident-centered care while highlighting the importance of human interaction and learning.

In her pursuit of excellence through innovation, Barbra has earned a reputation as a hands-on decision maker and ingenious problem solver. In a recent success, she crafted a creative solution to the nursing shortage by establishing the first on-site Learning Institutes for healthcare workers in Quebec. Thanks to these education initiatives and the two centres’ affiliation with McGill, we now recruit and retain first-rate staff and offer the opportunity for professional growth within our walls. In addition to education, Barbra is championing research into the process of aging. DBM now has a full time Research Director and team to uncover knowledge that could help shape the face of long-term care everywhere.

Barbra’s leadership and critical thinking abilities have been recognized by numerous organizations. Most recently, she sat on the Board of AQESSS, the Quebec health and social services association, who named her the top Executive Director in Quebec (2011). She is the first Canadian to serve as Chair of the Association of Jewish Aging Services.

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Lee Hall, CHE
Primary Care Initiative

Lee Hall is Program Director of Alberta’s Primary Care Initiative, responsible for the establishment of strategies, policies and standards for effective development and operations of Primary Care Networks (PCNs). She oversees development, implementation and evaluation of PCNs and evaluation of PCI provincially.

Lee’s special talent is in bringing diverse groups together around a compelling and innovative vision for primary care through leadership that is strategic and effective, focused on building coherence and alignment, and which has generated sustainable results. Functioning within the challenging environment of a tri-lateral structure, Lee demonstrates poise and foresight in her non-partisan approach to holding three powerful yet diverse groups to the task of looking into the future to make meaningful change in primary care.

Over the past three years she has turned what was once a struggling program into a great success, with a stable and engaged staff that produces programs, processes and tools that have enabled PCNs to demonstrate tangible improvements in health outcomes, access to services and economic improvement. It is a credit to her leadership that the level of physician involvement and support within PCNs is among the highest in the country.

In spite of this demanding professional role, Lee finds time to serve on the board of her local CCHL chapter, and as a senior surveyor and team leader for Accreditation Canada, providing extensive teaching, surveying and customized coaching in many countries in the Middle East.

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Innovation Award for Health Care Leadership

Selection Committee

Janet Davidson (Chair)
Canadian Executive, Global Healthcare Practice Advisory Services
KPMG LLP

Carolyn Baker, CHE
President and Chief Executive Officer
St. Joseph's Health Centre (Kingston)

Françoise P. Chagnon, CHE
Associate Program Director
Université de Montréal, Faculty of Medicine

Neil Fraser (Ex-officio)
President
Medtronic of Canada Ltd.

Elma Heidemann, FCCHSE
Co-chair, Canadian Health Leadership Network (CHLNet)

Brock Hovey, CHE
Senior Director, Performance, Contract & Allocations
Central West Local Health Integration Network

Jo-Anne M. Palkovits, CHE
President and Chief Executive Officer
St. Joseph's Health Centre (Sudbury)

Sonia Peczeniuk, CHE
Vice President, Medical Affairs and Clinical Support Services
Rouge Valley Health System

Shirlee M. Sharkey, CHE
President and CEO
Saint Elizabeth Health Care
Mentorship Award

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

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Roche

We Innovate Healthcare
Award Recipient

K. Dwight Nelson, CHE

Throughout his career as a senior leader in healthcare Dwight has sought, and embraced, opportunities to serve as a mentor for emerging and experienced healthcare leaders. Dwight is a role model and leader throughout the health region, and indeed across Canada, via the many collegial networks he has established. In Saskatchewan, Dwight was instrumental in the establishment of the South Regions Forum, and the Academic Health Sciences Network, and has been visible proponent of the activities of the Assiniboia Chapter of the College, in each of these cases, ensuring that management capacity and the development of emerging leaders remain a priority.

Aside from his formal leadership role within the system, Dwight has also taken a personal interest in coaching and mentoring high potential individuals, including both administrative and medical leaders. In doing so, Dwight focuses on the strengths of individuals and encourages their growth, while also fairly and supportively identifying areas for improvement.

Dwight has identified that leadership capacity in the health system, and the development of tomorrow’s leaders, is one of the key issues facing the system today. Dwight is at the forefront of addressing this issue at an individual level, at an organizational level, and at a system level. Those that have benefited personally from Dwight’s mentorship comment upon his thoughtfulness, intelligence, caring and honesty.

Dwight Nelson has been a College member since 1985, a CHE since 1986 and is a two-time College board member, once each as a director from Alberta and Saskatchewan.

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Francis (Fran) Brunelle, FCCHSE, FACHE

Francis (Fran) Brunelle has been a mentor continuously for over forty years. He has mentored at the local, provincial and national levels, to undergraduate and graduate students, doctoral and post-doctoral candidates, as an adjunct faculty member at eight universities; and to healthcare professionals, including CEO’s and physician and nurse executives.

He has mentored at the provincial and national levels, by providing over 100 seminars on career planning to many of the healthcare professions, including both CCHSE and the Canadian Society of Physician Executives; by developing Canada’s first Handbook for Chiefs of Medical Staff; by contributing chapters in books, and articles in peer reviewed journals, including an article on hospital governance that won the best article of the year award.

After obtaining his Master’s (and the top student award) at the University of Ottawa, he earned three diplomas from Harvard University and Fellowships in both the Canadian and American Colleges of Health Leaders. Fran continues his lifelong learning journey and late in 2009 earned Certification as an Assessor of Leadership Competencies from the Center for Creative Leadership.

Even as Fran prepares to launch his next career initiative, he continues to mentor students at both the University of Toronto and at Massey College.

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Liz Buller

Over the past three years that Liz joined William Osler Health System, her commitment to providing safe and compassionate care has been evident. As the Executive Vice President and Chief Nursing Executive, Liz devotes her career to enhancing health systems that serve our diverse communities, while leveraging the diversity among the staff, physicians, and volunteers.

Liz is highly visible and accessible by all of Osler’s stakeholders. She demonstrates stewardship by providing clarity of direction on Osler’s organizational priorities during teams’ strategic planning exercises. Liz actively champions and promotes professional development within Osler. She facilitates courses in the organization and has created and delivered a session entitled “Future Trends in Healthcare”. Her commitment to lifelong learning was instrumental in the re-introduction of the Osler Tuition Reimbursement Program for Professional Development. In addition, she facilitates the development and succession planning process by creating opportunities for high potential leaders to assume greater breadth of responsibility at Osler.

Liz works with her Directors to help them achieve their professional goals, providing guidance and support to her team. She travels with team members to conferences and workshops, encouraging evidence-based work in all that we do at Osler. She builds positive trusting relationships by meeting with internal professional groups and asking difficult questions about their work environment. She does not over promise; rather she facilitates dialogue in reaching a suitable solution to real problems.

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David Byres

As a health care leader, David Byres embodies the spirit of mentorship; both in formal mentoring relationships as well as in his daily leadership. In his current role as Vice President – Acute Clinical Programs and Chief of Professional Practice & Nursing, David serves a role model for those he leads and across health disciplines.

David has served as a formal mentor for many years as part of the CCHL BC Lower Mainland (BCLM) Chapter Mentorship Program. In this way, he has supported new health care leaders as they develop their career paths and assists them in understanding the complexity of the BC health care system. David has also served as a mentor to nursing and other students so that they may benefit from the expertise of a strong leader committed to professional practice in the health care system.

As a member of the BCLM, David supported the development of the Chapter’s excellent Mentorship Program and expansion of the scope of the program beyond Health Administration schools to include other organizations where new health care leaders could benefit from mentorship.

David’s commitment to the profession of nursing is admired across the discipline. He has received the Award of Distinction in Nursing from the College of Registered Nursing in BC, has served as the President of the Xi Eta Chapter of Sigma Theta Tau International Honor Society of Nursing and has completed a Fellowship from the Wharton Program in Management for Nurse Executives.

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Kiki Ferrari, CHE

Over the past year, Kiki has led our Ministry partnership initiative – the Process Improvement Program (PIP) with four participating pilot units from Osler’s two sites. A key indicator of this project’s success is improvement in patient flow and patient wait times. Kiki formed interdisciplinary teams through the organization to implement changes in Osler’s current processes. Through her leadership, Osler successfully achieved its target of reducing wait times and better patient flow, especially with respect to non-acute cases.

As the PIP Project Leader, Kiki has consistently demonstrated strong competence in developing members of her team. She has shown genuine desire to bring out the best in others by providing her team members with opportunities to actualize their potential as future leaders. As a result, there is evident growth within the team members. There is demonstrated confidence in presenting to a Steering Committee and morale has improved because of their involvement in the PIP project. During this initiative, Kiki mentored two Emergency Department novice managers and guided the change process by making herself accessible and coaching the staff.

Kiki has been a role model for her colleagues and direct reports by actively listening and encouraging the best in others. She has a gift in leveraging personal strengths and accepting accountability for her personal development. She has been part of many conferences, both as a participant and presenter. Kiki builds trusting relationships through face-to-face interactions with staff, listening to their challenges, addressing possible solutions, and following through.

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Barbara Hall, CHE

Barbara Hall is a Canadian health care leader who exemplifies a strong personal commitment to mentorship. Barbara has inspired a significant number of learners throughout her career and dedicates countless hours and efforts to this end.

Barbara has been a tireless leader, mentor and role model for over thirty years. As Vice President of Person-Centred Care, Barbara’s exceptional capacity for mentorship is noted through her continuous support of MHA residents. Barbara works untiringly to enable student learning from senior health care leaders. She personally coordinates Capital Health’s MHA Residency program, meeting regularly with students to ensure their learning experience is positive and fulfilling. Barbara also acts as a strategic contact for students, facilitating student connections to leaders within her professional network to aid their completion of course projects and assignments. Students appreciate Barbara’s extraordinary commitment so much that they regularly ask her to emcee their graduation and awards banquet!

Last year, Barbara further exemplified her commitment to mentorship by establishing a Fellowship in Health Administration at Capital Health. In partnership with Dalhousie University, the one-year program provides exceptional graduates of the MHA program an opportunity to gain exposure to senior health care leadership while being mentored by executives at Capital Health. Barbara championed the establishment of this innovative program despite great fiscal constraints and pressures. It continues to be the only such Fellowship of its nature in Atlantic Canada.

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Wolf Klassen, CHE

Wolf Klassen, Vice-President of Programs at Toronto East General Hospital (TEGH), sees mentoring future health care leaders as a key part of his role. Wolf has a history of excellence as an educator in the Institute of Health Policy, Management and Evaluation at the University of Toronto, where he has been a tutor since 2004. Tina Smith, Director of the program, says his success is evidenced by “consistently impressive student evaluations,” and “his particular strength lies in his ability to encourage students to be independent and creative thinkers.”

As preceptor and mentor for 21 Masters Students since 2006, Wolf is sought out due to his reputation for innovation, compassion, leadership and lifelong learning. He provides students with unprecedented access, maximizing their learning experience. This helps explain the increasing attraction for residency placements at TEGH during all three school terms from university programs across Canada and the United States.

Wolf’s mentorship has resulted in a significant contribution to health sector leadership, with many former residents taking on successful leadership roles, i.e. Directors and Managers in acute care, community and primary care organizations.

Wolf’s approachable and calm leadership style makes it easy for staff to seek his advice, help and support. He takes a genuine interest in staff and actively provides his direct TEGH reports with challenging work experiences to enhance their professional development. He provides regular feedback and coaching and encourages his colleagues to coach and mentor others, demonstrating a firm commitment to life-long learning and professional development.

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Ken McGeorge, CHE

Ken McGeorge came to the Long Term Care Sector in 2006 with a wealth of health care experience and has had an enormous impact on the entire sector, largely through leadership and mentoring.

From the outset Ken recognized the need for leadership development and organized opportunities for the team at York Care Center and opened those events to all Nursing Homes within the province.

At York Care center he mentored the senior management team emphasizing the need for formal development resulting in team members completing programs such as Certificate in Leadership and Diploma in Health Care Management. As a result York Care Center and has many new programs and awards in recognition of those programs.

Ken has been a leader on the provincial stage through the New Brunswick Association of Nursing Homes, serving on the Board and chairing the education committee. His development of an Annual Symposium on Excellence in Elder Care brought in leaders from all over North America, influencing leaders in long term care across the province.

Ken’s vision saw the establishment of the Atlantic Institute on Aging, which has quickly shown leadership in bringing research and policy makers together.
Ken has assisted in organizing educational opportunities hosted by the New Brunswick chapter of CCHE with a view to growing leadership capacity.
Additionally Ken initiated and has fostered a mentorship with two leading national long term care organizations, Maimonides (Montreal) and Baycrest (Toronto).

The breadth of Ken’s experience across the Health Care sector has fostered the above initiatives and created a wealth of mentorship ability.

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Carol Mothersill

Carol has served as Mentorship Lead for the BC Lower Mainland Chapter for the past three years. During that time, the mentorship program has doubled in size, scope, and capacity. Under her stewardship, the BC Lower Mainland chapter formed a strategic alliance with the Vancouver node of Emerging Health Leaders (EHL) in June 2011.

Thanks to her foresight, plans are underway to develop a National CCHL Mentorship program as well. Carole brings passion, creativity, and humility to the role of Mentorship Lead. She freely provides guidance, timely feedback, and is always encouraging newer members to take on challenging roles and responsibilities.

Carol also successfully helped to incorporate and implement the LEADS framework into all of our mentorship activities. In doing so, the vision and mission of our programming has become more consistent, streamlined, and purposeful.

Carol leads by example, and her dedication to the principles of mentorship have benefited many people. Unbeknownst to her, she also serves as a mentor to committee members as she actively continues her search for new and better ways to serve our members.

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Ron Noble, FCCHL FACHE

Ron Noble is a highly respected health care leader, with success in corporate wide planning, development and financial management.

Over the years, he has mentored students and colleagues at all levels. He has frequently supported the placement of Master’s level students from the following universities: McMaster, University of Toronto (where he is an Adjunct Faculty member) and University of Ottawa. He has mentored students going through the CHSRF/CCHL Extra program and the Royal Roads Masters of Leadership program. He has also been a champion for the Toronto Region Immigrant Employment Council (TRIEC) as a mentor for new Canadian immigrants seeking professional careers. He has set a strong example through his work with CCHL, namely in his roles as Chapter Chair, provincial Director and Board Chair.

Ron has embraced every opportunity to facilitate the mentorship of his direct reports and to support a culture of learning in the organizations in which he has worked. With his diverse background in both Finance and Health Care he is a natural candidate to oversee the establishment of corporate programs focused on skills acquisition and learning, most recently the Credit Valley Hospital Leadership Development Institute.

Ron is committed to linking influencers across the system as well as linking potential mentees and mentors. He is highly approachable and seeks to empower others in reaching their goals. He is quick to acknowledge others’ strengths and to encourage others in their ability to “take the next step” in their career. Ron used his expertise in student learning and programming in his role as Executive development lead for the U of T Mississauga Academy of Medicine and the Family Medicine Teaching Unit.

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Paula M Rozanski, CHE

Paula is a dedicated health leader, who throughout her career has made mentorship a priority. She shares with her mentees, a passion for healthcare and imparts her wisdom on how to handle any health care challenge. Paula is a hands-on mentor, and also inspires others to follow her path as a life-long learner.

Throughout her career, Paula has been an inspiration to others and was instrumental in mentoring colleagues as they prepare for their journey to managerial positions. Paula values professional development; she has obtained her is a Certified Health Executive designation from the Canadian College of Health Leaders and also the EXTRA Fellowship.

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Mentorship Award

Selection Committee

Donna Towers, CHE (Chair)
President
Donna L. Towers Consulting Inc.

Joseph M. Byrne
Director, School of Health Administration
Dalhousie University

S. Kevin Empey, CHE
President & CEO
Lakeridge Health

Mark Kierstead (Ex-officio)
Strategic Account Manager, Central Ontario
Roche Canada

Nancy M. Lefebre, FCCHL
Chief Clinical Executive and, Senior Vice-President, Knowledge & Practice
Saint Elizabeth Health Care

Joseph Mapa, FCCHL
President and CEO
Mount Sinai Hospital

Ron Noble, FCCHL, FACHE (Excused)
Vice President Corporate Planning
Performance & Construction
The Credit Valley Hospital

Harry G. Parslow, CHE
Managing Partner
The Caldwell Partners International

Tina Smith
Director, MHSc Health Administration Program
Department of Health Policy Management and Evaluation
University of Toronto

Wendy Winslow, FCCHL
Nursing Policy Consultant
College of Registered Nurses of British Columbia

Robert G. Zed, CHE
Chair
Compass Group Canada Healthcare
Nursing Leadership Award

The Nursing Leadership Award builds on the themes of patient-centred care and nursing leadership, and whose recipient demonstrates an ongoing commitment to excellence in these areas.

Sponsored by:

Baxter
Award Recipient

Theresa Fillatre, CHE

Theresa Fillatre is a registered nurse who has made lasting leadership contributions to Canadian healthcare over 40 years.

Theresa is known and respected for her engaging energetic leadership, consistent application of customer-centred ethical values and principles, systems knowledge, and relationship–building skills. She has broadly influenced sustained nursing practice and organizational quality improvements and patient outcomes within and beyond Atlantic Canada. Theresa’s accomplishments include the following: the development of nursing and inter-disciplinary professional practice frameworks and structures; the maximization of scopes of practice and roles; quality, patient safety, staff safety and healthy workplace capacity-building; the strategic pursuit of relationship developments to strengthen shared learning and collaborative strategy and evaluation; engagement and support of 100% Atlantic health organizations and 250 patient safety quality improvement teams in SHN, and other CPSI products and services over the past six years.

Theresa provided leadership to shape the successful design and implementation of the interprovincial Atlantic Health Quality and Patient Safety Collaborative, a one-of-a-kind Canadian structure, that links the quality and patient safety agendas of the four Atlantic provinces, addresses common quality and patient safety capacity-building needs, accountable to the Atlantic deputy ministers of health.

Theresa has been a College member since 1995 and a Certified Health Executive since 1996. In addition, Theresa is a seasoned national and international Accreditation Canada surveyor.

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Sheryl Bernard, CHE

Recognized for her strong nursing foundation and proven history of leadership, Sheryl Bernard has consistently demonstrated a commitment to excellence in patient centred care and health services management. Her unwavering focus on improving systems and processes that facilitate and optimize client-centred care for the most vulnerable and disenfranchised patient population has captured the attention of senior policy makers and planners.

She has a proven track record in removing barriers between providers and building systems of quality patient care. For example, she championed expansion of the traditional catchment area for specialized mental health services resulting in enhanced access to care and a higher volume of patients being served. She has gained a reputation as a dynamic and caring mentor and is credited by those she mentors for helping them advanced and thrive in their chosen career path.

Her vision for clinical quality and evidence-based practice is exhibited by her success in introducing the clinical nurse specialist role into her practice setting and in increasing the staffing level in a psychogeriatric in-patient unit. Through her service to professional associations including four yours as RNAO’s Member at Large for Nursing Practice and as a director for the TAIBU Community Health Centre, she has had a broad and lasting impact. She is known for her courage in accepting challenging assignments and has gained the respect and trust of those she works with inside her organization and beyond. A life-long learner, she has earned her CHE designation and begins doctoral studies in September 2012.

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Dr. Vanessa Burkoski

As the Vice President of Professional Practice and Chief Nursing Executive at the London Health Sciences Centre (LHSC), Dr. Vanessa Burkoski is accountable for the overall leadership, strategic direction and management of professional practice.

Vanessa is a highly motivated leader who is committed to the advancement of the nursing profession and quality care delivery to the population. Using the best available evidence, and in consultation with internal and external stakeholders, Vanessa has effectively provided strategic direction and formulated innovative policy and programmatic initiative aimed at maximizing the safe and quality delivery care. Her innovative and evidence-based approach has fostered stability of the nursing workforce, created an enriching and satisfying work environment, and stimulated a culture of scholarly practice at LHSC.

Vanessa possess sound leadership practices and skills such as, analytical thinking, problem solving, and change management, which enables her to respond effectively to a wide-range of diverse, issues such as new and expanded roles of nurses. Her strong ability to communicate openly and effectively, establish priorities and goals for both the short and long term, and form and maintain strong partnership have enabled her to establish a shared vision for nursing at LHSC and proficiently manage a broad range of critical nursing issues.

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Mariëlle Heuvelmans, H.B.Sc.N, GNC(C)

Mariëlle Heuvelmans, a recognized and respected nursing leader, has had a remarkable health services career. With her solid nursing knowledge and experience in community and hospital sectors as a frontline clinician, professional leader, manager and senior administrator, she has been instrumental in building systems of quality care for patients. She is widely known as a visionary nursing leader whose action and results oriented approach has advanced nursing practice through tangible leading edge improvements at all levels of nursing.

In her position as Vice President of Clinical Programs and Chief Nursing Executive at the Hawkesbury & District General Hospital since 2004 and previously at the Community Care Access Centre, she is seen as an example and role model for excellence in health care delivery with a true commitment to patient focussed care. She is playing a key role in the transformation of a rural community hospital on the path to becoming a major regional health care hub. Building bridges with professionals at all levels she has a capacity to mobilize multidisciplinary teams to pursue innovation and demonstrate impressive results. Her solidarity with frontline nurses is inspirational, as is her concern for the well-being of the community served and for access to care closer to home. Her impact extends well beyond the walls of the institution, as a champion for evidence based best practices provincially and a broader systems thinker and collaborative team player regionally in forging partnerships and spearheading new initiatives to improve health care.

Mariëlle is a testament to nursing leadership in action.

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Carol Nafziger

Carol Nafziger began her career at the MD Anderson Hospital in Texas as a surgical nurse in the head and neck oncology unit. She returned to Canada in 1987 to apply her clinical acumen at St. Mary’s Hospital in Kitchener, where, over a twelve-year period, she led diverse protocol-development and education initiatives for her colleagues and led key initiatives as a member of the nursing advisory council.

In 1999, Carol extended her acute care and interpersonal leadership expertise to make a significant—and, to this day, sustaining—impact in the homecare sector. Between 2002 and 2004, Carol rose from a local clinical supervisor to the National Director of Clinical Programs at Comcare Health Services. Her achievements over the next 18 months are remarkable:

- Establishing national standards of community nursing care for intravenous certification throughout nursing operations in eight provinces
- Leading the restructuring and launch of a national influenza program
- Designing, coordinating, and launching the first national wound-care program for nurses, therapists, and personal support workers
- Leading the clinical assessment of tele-homecare technologies with US and Canadian vendors to improve care delivery in remote communities
- Establishing a consolidated set of clinical indicators for the organization’s first performance-measurement framework
- Leading all clinical and quality improvement facets for national accreditation

She continues to distinguish herself as a leader at Revera Home Health who builds strategic relations among diverse stakeholders, advances the quality of clinical care, exemplifies high standards of professional and clinical practice, and maintains an approachable and responsive demeanor to everyone. As a role model to hundreds of community nurses across Canada, Carol has made a profound contribution to communities from New Westminster to Joliette and St John’s.

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Debbie Schwab

Debbie Schwab has exemplified excellence in Nursing Leadership in the area of Dementia care. Her strength in knowledge of the physiological processes along with the ability to coach her teams to practical application of knowledge results in excellence in quality of care for our residents.

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Jocelyn Vine, CHE

Jocelyn Vine, Vice President of Patient Care at the IWK Health Centre, is an accomplished and talented leader and a huge asset to healthcare provision in the Atlantic Provinces. She is a valued member of the Executive Leadership Team at the IWK.

Jocelyn is a life-long learner, who is a credit to her nursing profession. Through her hard work and expertise, she has garnered respect from all programs, services, and disciplines, and is highly regarded provincially. Earlier in her nursing career, Jocelyn was the Manager of the Neurosurgical Intensive Care Unit at the adult tertiary centre for the Maritimes. She soon moved into Director of Family and Neonatal Health at the IWK Health Centre, and then to Interim Vice President of Women’s and Newborn Health. Her leadership skills in her current role as the Vice President of Patient Care have allowed her to lead the Models of Care Program – saving the healthcare system substantial funds, and providing better care to patients and families. Jocelyn has also taken a lead in the provincial Bed Utilization Mapping Project, (BUMP) – a complex project that is expected to lower length of stays with improved Emergency Room wait times and flow, as well as provide a coordination of care with respect to number, type, and location of beds required across the province. With her commitment, spirit, and incredible talent, Jocelyn has shown a lifelong dedication to nursing and healthcare.

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Nursing Leadership Award

Selection Committee

Anne McGuire, CHE (Chair)
President and Chief Executive Officer
IWK Health Centre

Janet M. Beed
President and Chief Executive Officer
Markham Stouffville Hospital

Maureen Charlebois, CHE
Group Director & Chief Nursing Executive
Canada Health Infoway

Sandra M. Cox, CHE
Chief of Patient Care and Chief Nurse Executive
Hotel Dieu Hospital

Janet Davidson
President & Chief Executive Officer
Trillium Health Centre

Nancy J. Fram, RN, BScN, MEd
Past Vice President, Professional Affairs & Chief Nursing Executive
Hamilton Health Sciences

Michael Hamilton (Ex-officio)
Vice-President
Health Systems and Channel Management
Baxter Corporation (Canada)

Sandra MacDonald-Renz, CHE
Executive Director, Office of Nursing Policy
Health Canada

Beatrice Mudge, CHE
Vice President, Best Practice, Education, Research & Chief Nursing Executive
VHA Home Healthcare

Josette Roussel
Nurse Consultant
Canadian Nurses Association

Dr. Lynn Stevenson, FCCHL
Executive Vice President, Human Resources & Chief Nursing Executive
Vancouver Health Authority
President’s Award for Outstanding Corporate Membership in the College

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

In October 2003, the College introduced the Founders’ Circle Program, to assist the College in supporting and promoting professional leadership activities related to our profession, educational programs across the country and leading edge research. Although the College’s multi-year agreements with our founders: Compass Group Canada at the chairman’s level and ARAMARK Healthcare at the president’s level have now concluded, these funds continue to support the LEADS in a Caring Environment Framework and related program delivery. The College sincerely thanks Compass Group Canada Healthcare and ARAMARK Healthcare for supporting the Founder’s Circle Program and, most importantly, for all of the professional development and sponsorship efforts the fund investments have enabled. The College is pleased this year, to be recognizing these two outstanding corporate members for their valuable contributions to the College.
Award Recipients

**Compass Group Canada Healthcare**
Joining the College as a corporate member in 2005, Compass group Canada Healthcare (Compass) has continuously demonstrated outstanding commitment through its support of College initiatives. Sponsor of the Robert Zed Young Health Leader Award, Compass continues to demonstrate its dedication to supporting emerging talent in Canada’s healthcare system. Through its continued support of the National Awards gala, as title sponsor, Compass and the College are able to showcase leading practices and celebrate outstanding achievements in healthcare on a national stage.

Compass has a strong track record of supporting professional development for College members, through its sponsorship of the National Health Leadership Conference, the College sessions at Ontario Health Achieve, and HPRS™ sessions. Compass representatives have contributed their time and expertise to serve on various College committees, including the Corporate Advisory Council and the National Health Leadership Conference’s Project Advisory Committee.

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**ARAMARK Healthcare**
ARAMARK Healthcare, one of our longest standing corporate members, joined the College in 1994. For almost two decades, ARAMARK Healthcare has shown outstanding commitment to furthering the College’s vision and mission. ARAMARK Healthcare has been a long-standing supporter of the National Health Leadership Conference; in addition has supported many HPRS™ sessions over its tenure as a College member.

ARAMARK Healthcare has further demonstrated their dedication to advancing professional development opportunities for College members through their support of the Sweden Study Tour’s Emerging Health Leader Scholarship, which makes it possible for one emerging health leader to join their more senior counterparts on a tour of the Swedish healthcare system. In addition, ARAMARK Healthcare representatives have contributed their time and expertise to serve on various College committees, including the National Awards Advisory Committee.

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Quality of Life Award

This award honours those who work to improve their patients’ lives through their desire, creativity and dedication. It is a celebration of the human spirit.

Sponsored by:

Zed Group
Award Recipient

Providence Health Care
Vancouver Inner City Youth Mental Health Program

The Inner City Youth Mental Health (ICYMH) Program delivers psychiatric services to at-risk youth living on the streets of Vancouver. Most of the estimated 700 homeless street youth in Vancouver struggle with addiction, while approximately 50 percent are dealing with emerging mental health issues. Their transient lifestyles make it difficult for them to connect with appropriate services.

ICYMH, led by a team of seven St. Paul’s Hospital psychiatrists and two social workers, works in partnership with several community organizations such as Covenant House Vancouver, Broadway Youth Resource Centre and Coast Mental Health. This ability, to collaborate with non-traditional health partners, is strength of the program. ICYMH takes specialized medical knowledge and psychiatric services directly to the street, focusing on mental health, attachment, housing and substance use. The primary goal of the program is to assertively intervene as early as possible, offering integrated supports to help youth make positive progress in all aspects of their lives.

Now entering its fifth year of operation, over 360 youth have been assessed, with over 3000 annual psychiatric appointments, in over 7 locations. ICYMH also supports over 40 mental health housing units in three buildings and administers housing subsidies, in essence creating Vancouver’s first youth mental health housing continuum. ICYMH has supported dozens of youth to get off the streets and regain their lives by helping them regain their mental health and transition to adulthood. In so doing, the ICYMH has raised the profile of transition-aged youth and their need for specialty services.

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Central Community Care Access Centre

Community Home First Team

The Central CCAC Hospital/Community Home First Team makes it possible for Alternative Level of Care (ALC) clients, most of whom would have previously waited in hospital for long-term care, to transition safely back to the community after a hospital stay. The goal of this program is restorative care to improve the quality of life. Home First clients receive intensive case management services to monitor their progress and adjust services as needed, and ensure the client and family are prepared to transition off of the program within 90 days. Enhanced use of CCAC health services with a focus on self and caregiver care management and greater use of community resources are part of Home First.

Research shows, people who receive care in their homes are generally happier, more comfortable in a familiar setting and tend to heal more quickly. The Home First Program clearly improves client experiences, reduces the risk of hospital acquired infections and, most importantly, allows the client to recover and optimize functioning and independence prior to making any permanent decisions whether living in the community is viable. Home First also means that clients and caregivers have the time to consider other options such as long-term care from the comfort of their home. The Central CCAC Home First program has served 868 clients since its implementation in September 2010. On average, 68% of Home First clients remain in the community after Home First and 90% of clients (or their caregivers) rate the Home First services as good or excellent.

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The Paediatric Critical Care Unit (PCCU) team at London Health Sciences Centre has cared for a young child named Maya for most of her life. Admitted from the NICU at 3 months of age to the PCCU Maya has continued to grow and develop, achieving important milestones in her life from within the walls of the Critical Care Unit. Maya’s parents are busy professionals who balance care and normalcy for their son (Maya’s twin) at home and their daughter who has a tracheotomy and depends on a ventilator to sustain her life. During her time in the PCCU the Inter Professional team has worked with her family and other departments in the hospital to collaborate in an effort to achieve a more normalized and stimulating environment to improve both Maya and her family’s quality of life. As a result of this Maya has had an opportunity to experience unobstructed views of nature including her window side bird feeder, Birthday Parties and a holistic approach to her care that extends far beyond her acute medical needs. She has developed and achieved some important milestones within the walls of the PCCU and is learning to understand and sign in English and Russian as her parents are bilingual. This has been achieved by a commitment from the team, the hospital, her family to engage in a creative, collaborative family – centered care approach with the goal to improve Maya’s quality of Life.

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Équilibre, Groupe d’action sur le poids

Since 2003, EquiLibre has disseminated the Healthy Mind, Healthy Body program (HMHB) to high schools and youth organizations across Quebec. HMHB presents a unique, preventative approach regarding two problems on the rise in our society: obesity and excessive preoccupation with weight. There are currently over 550 schools and organizations (in 17 of the 18 administrative regions of Quebec) that have a HMHB intervention kit.

Between November 2008 and August 2011, EquiLibre led a project to increase the dissemination of the HMHB program and to promote an optimal program implementation model for schools and organizations. To do this, different dissemination models were experimented and different implementation models were observed. Additionally, new measures were put in place in order to support the milieus and their respective HMHB program leaders with program implementation.

Raising awareness about the issues of body image among school, health and community service professionals contributed to the increased number of settings who wished to implement the program. The project also enabled EquiLibre to reach out to more underprivileged schools and organizations.

The measures of support offered helped increase program appropriation, increased the number of activities held, and helped sustain the program in the longer term. The activities, mainly animated in class or in groups, appear to have been appreciated by the majority of students who attended them.

The HMHB program diffusion project in high schools and youth organizations was funded by Quebec en Forme and by the Public Health Agency of Canada.

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Providence Health Care: Mental Health Program

Person and Family Centered Care: 8C Team Patients, Families and Staff

Person and family centered care is an approach to the planning, delivery and evaluation of health care that is grounded in mutually beneficial partnerships among the people we serve, families and health care providers. It is grounded on the understanding that people and their identified “family” play a vital role in their health and determine how they participate in their care and decision making. This project, piloted on one unit of the units in the Mental Health Program, Providence Health Care, demonstrated an improved care experience for inpatient psychiatric patients, their families and the staff.

The program leaders were instrumental in mentoring the staff, primarily novice nurses, in terms of their clinical and professional development and providing support for interdisciplinary team building and sustainability. Most importantly, people with mental illness and their families were integral to the initial and ongoing education of staff as well as the co-evolution of person and family centered care on the unit.

At one year, staff show increased confidence, skill and knowledge in their relational practice and work with families. Family feedback on “family focused care” is positive and comments are used to evaluate care and policy changes. The Gallup Q 12 survey on employee engagement indicated an overall satisfaction score of 75% compared to the overall satisfaction score of 25% organization-wide. The BC Provincial Mental Health and Substance Use Patient Satisfaction survey results showed a score of 97 % for quality of care and services received compared to the provincial subsector score of 87%.

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Rideau Community Health Services
Better Health Project

In January 2011, the under-serviced area of Smiths Falls suddenly lost two more doctors, leaving over 5,000 people “unattached”. Rideau Community Health Services received one-time funding from the SE LHIN in support of the proposed response, the Better Health Project (BHP). The BHP Clinic is led by a nurse practitioner and implemented by an inter-disciplinary team including: medical secretary, nurses, pharmacists, social worker and consulting physicians. Priority clients are those individuals struggling with one or more chronic conditions and those who are hospitalized and / or frequent users of Emergency. Two unique features of the BHP is the service delivery model of Group Medical Visits (GMV) and the orientation of clients to self-management with the intent to promote levels of self efficacy related to his/her chronic condition.

Accomplishments and Outcomes to date:
- 23 Groups and over 350 hundred clients served
- 97% of registered clients complete BHP
- 92% reduction in ER visits (primary health care type) (July 30, 2011)
- Impact of pharmacists
- 89/100 clients had a Drug Related Problem (DRP)
- Average of 2.6 DRP per client
  - i.e. 43% clients required a drug and was not receiving it
- Strong community partnerships: Perth and Smiths Falls District Hospital, CCAC, HCC, Community Primary Health Care
- 4.73 / 5 was the average response to „Overall – How would you rate the care you received at the GMV? „ (Scale of 1-5 ranges from strongly disagree / strongly agree)

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Shannon Tyrrell

The selfless desire to help others is a quality paramount in Shannon Tyrrell. As an emergency department nurse and clinical educator at The Credit Valley Hospital as well as a Lieutenant Nursing Officer and Military Reservist with the Canadian Forces, Shannon’s compassion, commitment and dedication to helping others is outstanding.

Utilizing the skills of intelligence support in operations, planning and decision-making learned in the Armed Forces greatly assisted Shannon in her ability to lead two humanitarian relief efforts to one of the most dangerous disaster zones in the world. In September 2010, Shannon led a team of 21 health care providers, one of the largest medical missions from one facility to earthquake-stricken Haiti. During the two week period, Shannon and her team provided the only critical care and trauma services available in Haiti. In the fall of 2011, she led another group of back-to-back one-week missions to the same area.

To help cover the approximate $1,200 cost per person of the 2011 missions, Shannon organized a Battling Bands for Haiti fundraiser, which sold out and raised close to $10,000, reducing the teams individual’s cost by almost $500. Tyrrell also developed a dedicated website titled www.cvhhaiti.webnode.com specifically for the mission.

Shannon’s military training and applied knowledge as a clinical educator of eight years has helped enhance the lives of many of her colleagues, which has resulted in measurable improvements within the organization. She is known at Credit Valley as “the Educator that is in the Army”. Shannon’s drive and dedication to helping improve the lives of patients and their families across the world speak to her immense passion of providing quality health care.

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Quality of Life Award

Selection Committee

**Susan M. Owen, CHE (Chair)**
Senior Manager, Management Consulting
KPMG LLP

**Kenneth W. Baird, CHE**
Vice President, Person Centered Health Capital District Health Authority

**Beth Brunsdon-Clark**
Vice-President, Programs and Patient Services and Chief Nursing Officer
Victoria General Hospital

**Geri Geldart**
Vice-President, Community Health & Nursing Affairs
Horizon Health Network

**Cheryl L. Harrison, CHE**
Vice President & Chief Nursing Officer
Orillia Soldier’s Memorial Hospital

**Tracy MacDonald, CHE**
Health Services Administrator
Interior Health – Kelowna General Hospital

**Cynthia Majewski**
Executive Director
Quality Healthcare Network

**Kelli A. O’Brien**
Chief Operating Officer
Long Term Care and Rural Health Western Health

**Janice M. Skot, MHSc, CHE**
President & CEO
The Royal Victoria Hospital

**Moyra Vande Vooren, CHE**
Robert Wood Johnson Awards

Established in 1956, the Robert Wood Johnson Awards are presented to one student from six Canadian universities offering a Master’s of Health Administration. Recipients are selected by their respective faculty for their individual achievements and promising contributions to health services management.
Kirk D. T. Owen  
Dalhousie University  

In 2010, Kirk completed his Bachelor of Business Administration program at Trent University, with a focus on statistical economics and corporate social responsibility. His work in the area of corporate social responsibility reignited Kirk’s passions for an earlier interest in the health sciences. He followed through on his passions by merging his interests in the Master of Health Administration program at Dalhousie University.

While at Dalhousie, Kirk became involved in school politics. He served as the Co-president of the association representing students enrolled in the MHA programs. Kirk completed his administrative residency at The Hospital for Sick Children (Sickkids), in Toronto. At Sickkids, Kirk assisted with projects in Decision Support Services and the Office of Strategy Management. He is passionate about developing informed government and organizational policies that reflect evidence based opportunities for growth and efficiency.

Kirk has accepted a position at William Osler Health System where he will work as a Decision Support Consultant.

Mary Formby  
University of Alberta  

Mary completed two bachelor degrees at Simon Fraser University in the fields of economics and health sciences. It was while working on her second degree that she discovered her passion for improving and sustaining healthcare in Canada. In the fall of 2010, she decided to pursue a Masters of Public Health at the University of Alberta, specializing in Health Policy and Management.

While at the University of Alberta, Mary served as the student representative for Health Policy and Management, as well as the School of Public Health representative for the Canadian College of Health Leaders. During her time in Alberta, Mary worked for Alberta Health Services in Survey and Evaluation. She currently holds a position as a Decision Support Advisor with Vancouver Coastal Health in British Columbia. In this role, Mary works with decision makers in the health authority to generate performance metrics and to provide guidance and insight to interpret health data.

Jennifer Lyle  
University of British Columbia  

Jennifer graduated in 2008 from Simon Fraser University with a Bachelor of Science in kinesiology and a minor in gerontology. Upon entering the workforce post-graduation, she discovered a passion for exploring the role healthcare service structure and delivery plays in enhancing patient care.
Jennifer is currently the Operations and Quality Assurance Coordinator for a large multidisciplinary clinic in Burnaby, and is completing her second year at the University of British Columbia in the Masters of Health Administration program.

Jennifer is also a past collaborator on several research initiatives with the Simon Fraser University gerontology department exploring the impact of the care environment on elderly patients. She is a strong advocate of a holistic approach to healthcare, and believes that innovative collaboration is key to the success and sustainability of our healthcare system.

Deborah Egan  
University of Toronto

Deborah Egan holds a Bachelor of Arts degree from York University. She entered the MHSc program at the University of Toronto having enjoyed many successful leadership roles in the community sector as the Executive Director of Community Home Assistance to Seniors (CHATS), a multi-service community support service agency and as the founding Director of the Central Community Support Services Network. The Central Community Support Services Network is a new sector-wide collaboration initiative established on behalf of 44 community support service agency members.

Over the past two years Deborah has broadened her experience by working with the Department of Medicine at Women’s College Hospital to plan the start-up of the CACE Complex Care Clinic, a new model for individuals with complex chronic disease and resident education in an inter-disciplinary team, and the Commission to Promote Sustainable Child Welfare.

Throughout her time at the university of Toronto, Deborah has demonstrated a strong commitment to health sector planning efforts. Her work as Steering Committee Chair of the Canadian Research Network for Community Care, and various workgroups and committees within the Central Local Health Integration Network are clear examples of this.

Andréa Rudaz, MD  
Université de Montréal

Dr. Andréa Rudaz obtained her medical degree from the University of Geneva, Switzerland in 2004. Following this, she continued her clinical training program and also obtained her internal medicine specialist diploma.

Andrea then decided to pursue training in health administration. During her years of practicing medicine, she has observed and worked diligently to address the many challenges within the healthcare system that impact patient care. Over the period, she developed a strong desire to actively participate in improving the healthcare system.
2010, she enrolled in the Master program in Health Administration at the university of Montreal. Andrea will complete her program in the summer of 2012.

Andrea will return to Switzerland where, with her dual role of clinician and administrator, she will divide her time between clinical and administrative activities within the University Hospital of Geneva and participate in projects of reorganization of ambulatory care.

Ellen Odai
University of Ottawa

Ellen received a BSc. in Psychology in 1999, and completed her BSc in Occupational Therapy in 2002. She has worked as an occupational therapist on the geriatric Assessment unit of The Ottawa Hospital, and as a consultant to The Ottawa Hospital Interprofessional model of patient care (TOH IPMPC®).

She has presented at regional, national and international conferences, and was a lecturer in the School of Occupational Therapy at the University of Ottawa. An interest in international health and a desire to work towards improving healthcare in her community motivated Ellen to continue her education through the Master of Heath Administration program at the University of Ottawa.

Ellen completed her administrative residency at Accreditation Canada and is currently working as a Quality Improvement Coordinator at the Ottawa Hospital.
Robert Zed Young Health Leader Award

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

Sponsored by:
Award Recipient

Jennifer Duff, CHE

Jennifer was recently named one of Business in Vancouver’s ‘Top 40 Under 40’ and also appointed as Director, Mental Health at Providence Health Care. This position, one of the most senior in the organization, gives her the privilege to advocate for and drive quality care for people living with mental illness and disease in the city of Vancouver.

Previously, Jennifer was the Operations Leader of Maternity Services and, under her leadership, the team was awarded the 2011 Foundress Mission Team Award for Providence Health Care. The annual Mission Awards recognize and honor two individuals and a team throughout Providence Health Care for their contribution to living the organization’s shared mission and values.

In 2011, Jennifer was also awarded the Faye Meuser Memorial Leadership Award at Providence Health Care. This award recognizes a leader who demonstrates exceptional leadership within the mission, vision, and values of Providence Health Care. “She was nominated for being a highly respected, visionary leader with a solid reputation as a mentor, role model, colleague and change agent.” And lastly, but certainly not least, Jennifer was the recipient of the 2011 Emerging Health Leader Scholarship (ARAMARK Healthcare, Emerging Health Leaders and the Canadian College of Health Leaders). She was selected from applicants across the nation as being an emerging leader in health care, under the age of 40, to participate in a health care study tour in Sweden. The tour took place in May 2011 and included 19 senior health care leaders from across Canada.

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Chris Baldwin

Chris Baldwin is from Dartmouth, Nova Scotia, and has continued to live and work in the province. He graduated with a Bachelor of Commerce (co-operative education) from Dalhousie University in 1998 and went on to receive his Certified General Accountant (CGA) designation. He began his career as a Financial Assistant in the Dean's Office, Faculty of Medicine at Dalhousie University.

Throughout his three years in the Dean’s Office, Chris progressed to Acting Finance and Administrative Manager within a branch of the faculty. In February of 2000, Chris was hired as a Financial Accountant at the IWK Health Centre. Chris' tenacity and work ethic was recognized very early on and his progression at the IWK showcases that. In September of 2000, Chris became Accounting Manager, which transitioned to the position of Manager of Finance and Business Development to encompass some added responsibilities surrounding retail and business opportunities. When the Director position became vacant at the IWK, it was no question that Chris was best suited to fill this position.

Chris was Acting Director of Finance for eight months before obtaining the Director of Finance and Corporate Services position in October 2008. Chris' career is a direct reflection of his apt knowledge of finance and enthusiasm for his work that he brings to the IWK Health Centre every day.

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**Graham Gaylord, CHE**

Graham Gaylord has held various positions at The Ottawa Hospital and currently acts a Program Analyst for Clinical Programs and Support Services. Graham has built a reputation of an engaging and dynamic leader through his involvement on a number of regional projects including facilitating the development of inter-hospital partnership agreements and regional patient flow mapping initiatives. In both cases, these initiatives contributed to the successful completion of significant clinical program transformations in the Eastern Ontario region.

Graham’s commitment to life-long learning is evident looking at his involvement in the College. Graham currently acts as Chair of the Eastern Ontario Chapter, one of the biggest in Canada. He also acts as Co-chair of the College’s National Chapter Advisory Committee.

Graham’s commitment to excellence in healthcare administration has been celebrated twice nationally. Graham was awarded the Robert Wood Johnson Award in 2008 and the Emerging Health Leader Sweden Study Tour Scholarship in 2010.

**Contact:**
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**Amy Porteous**

Amy Porteous has over seven years of experience and knowledge working in healthcare in a senior leadership position in the areas of strategic planning, residential care, project management, communications, policy, governance, partnerships, quality, risk management, research and performance management.

Amy is well known for her skill at working collaboratively with others, providing leadership to staff, seeing projects from initiation to completion, developing cases for action and finding solutions to complex problems. She has worked effectively with board members, all levels of management and staff, partners, community groups, government, associations and the community at large in various capacities. Her most notable accomplishments include facilitating the review and initiation of two strategic plans for Bruyère Continuing Care, developing numerous proposals for service enhancements, including the development of a 227 apartments seniors Village aimed at providing different levels of affordable housing and services for seniors and frail elderly in Ottawa. As well, she was intricately involved in ensuring that Saint-Louis Residence was recognized as a Centre for Learning, Research and Innovation, one of three Homes in Ontario with this designation.

She is passionate to make a difference in the lives of seniors and is one of Ontario’s youngest LTC Home Administrators, with oversight for 2 Homes with 269 residents.

**Contact:**
Mrs. Amy Porteous  
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Heather Wolfe, CHE

Heather Wolfe held management positions with Colchester East Hants Health Authority for eight years before transitioning to her current role October 2011, as Safety Improvement Advisor, Canadian Patient Safety Institute. Heather has demonstrated mastery of progressive leadership skills and competencies in developing strategies, programs and evaluation frameworks that have resulted in effective and sustainable system change. Heather leads with self awareness, always engages others, formulates expected results at the outset with vision, facilitates coalescence around goals, and maintains a patient focus in transformational learning.

Accomplishments include: development and implementation of regional decision support and quality/risk management frameworks and strategies; site leadership for a Community Hospital resulting in development and implementation of a comprehensive Operational Plan; leading the design, implementation and evaluation of an inter-regional evidence-based stroke service; and contributions to the development and implementation of a Sustainability and Spread Framework to support four provinces in addressing quality and patient safety priorities. Residents in northern Nova Scotia now have: improved access to mental health, addictions, short stay, stroke services; and an improved care delivery model; and improved infection control and prevention safeguards, as a result. Heather demonstrates a leadership commitment to continuous learning; achieved CHE designation in 2011; is an active member of the Bluenose Chapter Executive; is advancing her Francophone skills to better serve customers; and purposefully maintains an Emergency Nursing clinical practice to keep her grounded in the whys behind health system performance improvement. Colleagues validate Heather’s leadership skills as an engaging relationship-builder with great potential for advanced leadership roles.

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Robert Zed Young Health Leader Award

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