

A newsletter for Bridgepoint staff, physicians and volunteers – January 7, 2013

100 days
until we move.



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Recreation therapy uncovers patient's artistic talent

Individual therapy intervention brings hope to patient – who now offers it to others

Andrea Walker was a healthy and active young woman, when she was diagnosed with Dermatomyositis in the fall of 2011. The rare autoimmune condition that causes muscle weakness had Andrea bedridden by the time she came to Bridgepoint in June 2012. "I couldn't even lift my head," she explains.

As part of her care plan, she met with Recreation Therapist Melissa Byers who interviewed her about possible recreation interests and Andrea mentioned painting.

"Therapeutic Recreation is a very important component of an individual's treatment plan," says Recreation Therapist Melissa Byers. "It provides them with opportunities to continue to participate in meaningful recreation and leisure activities as a means to work on their therapy goals and promote the health and well-being of the whole individual."

Painting was not something Andrea had done before, but it was something she wanted to try. "I wanted to do something creative that would also allow me to strengthen and move the muscles in my arms," she recalls.

Andrea began painting regularly and her work started to draw attention. When the 7 West team was looking for some artwork for their gym walls, they commissioned Andrea to create some pieces for them.

"I wanted to paint something inspirational, that would instil the positive



Patient Andrea Walker has discovered a talent for painting since her arrival at Bridgepoint in summer 2012.



A sample of some of Andrea's inspirational work.

energy and encouragement for patients during their therapy," explains Andrea – who has also now created paintings for the 7 East gym.

Andrea continues to paint and is excited about the prospect of being discharged soon. She is grateful that recreation therapy is part of her care, as it offers her a positive outlet. "It draws out all my negative thoughts. I focus on the artwork and stop thinking about what I'm going through."

Is kicking butts among your New Year's resolutions?

As Bridgepoint prepares to go smoke-free, we can help staff and patients access quit-smoking resources

Every new year, one of the top 10 resolutions Canadians make is to quit smoking. This year, staff and patients at Bridgepoint may have an added incentive to stick to this resolution: when we move to our new building on April 14, we'll be adopting a new Smoke-Free Policy that includes a smoking ban anywhere on Bridgepoint grounds.

According to the Ontario Ministry of Health and Long-Term Care, smoking is the number one cause of death and disease in our province. It directly kills 13,000 people each year, and there's no safe level of exposure to second-hand smoke.

"Last fall, we introduced an inpatient smoking cessation program to help patients with a nicotine addiction. Our smoke-free policy will further protect patients, visitors and staff from exposure to second-hand smoke, as well as create an environment that supports efforts to quit," says Susan Himel, Strategy Lead for our LiveWell initiative.

"While not all of our patients may be ready to quit, evidence shows that offering them non-judgmental advice and support during hospitalization increases the likelihood they will make a quit attempt in the future. Our smoke-free policy will be one more way we actively help our patients manage their complex health conditions."

In addition to our inpatient smoking cessation program

– which is based on the best-practice Ottawa Model for Smoking Cessation – supports are also available to our staff and their families through our employee benefits. As of January 1, our benefits provider has reinstated a \$300-per-year allowance for nicotine replacement therapy.

There are also plenty of resources available through the Sun Life Financial Health Information Centre (room 104) and



"Our smoke-free policy will be one more way we actively help our patients manage their complex health conditions."

– Susan Himel, Strategy Lead, LiveWell

publicly funded programs, such as Live Tobacco-Free Toronto (toronto.ca/health/smokefree) or Smoke-Free Ontario (mhp.gov.on.ca/en/smoke-free).

You can expect more details about our Smoke-Free Bridgepoint Policy and smoking cessation supports during National Non-Smoking Week, January 20-26 – including a 'Weedless Wednesday' lunch and learn with Toronto Public Health on January 23.

Know an excellent clinical teacher?

Nominations are open for our 2012 Awards for Academic Excellence

Know a great educator who deserves more than just the standard apple? Here's your chance, as nominations are open for the Awards for Academic Excellence. Run by the Interprofessional Education Council, the awards recognize an individual or team who has excelled in teaching students in the clinical setting.

"Staff who work with students make a huge commitment of time and passion as they grow the next generation of clinicians," says Elizabeth Hanna,

IPE Specialist. "Recognizing their tremendous work through these awards and at the education celebration is a way to thank everyone at Bridgepoint who supports students."

Three different ways to recognize academic excellence

There are three categories to nominate your colleagues:

- Distinguished Educator Awards are given to individuals who excel in the field of clinical education;
- Collaboration in Education Award is given to a team that excels in its

support of students; and,

- Leadership in Education Award is given to an individual who provides exceptional education leadership.

Award recipients will be honoured at the Education Celebration on February 26.

Nomination forms should be completed by January 25 and sent to Alexi Sparaggis, Academic Affairs Coordinator, at asparaggis@bridgepointhealth.ca or by interoffice mail to room 227. For easy reference, the nomination forms are available on the Portal and website.

We're Ready.

100 days to go!

The countdown clock in the Parkside Café is down to double digits. January 4 marked 100 days until our patients move into our state-of-the-art new Bridgepoint Hospital building. What better time to pause and look ahead at next three months.

January 2013

- **Take it or toss it:** Health records: Health Records will work directly with units.
- **Packing tips:** HCR, our move company, will host information sessions.
- **Brand launch:** Staff got a sneak peek in December. In January, we'll reveal our new brand to the public.

February 2013

- **Training begins:** Training for unit-based staff kicks off February 4. Your manager or clerk will advise you of your training date.
- **Take it or toss it:** Transitory documents: This time, it's all about documents.
- **Sneak peek:** Mark Sunday, February 24 on your calendar!
- **Celebrate Bridgepoint:** Drop by Thursday, February 28 – and don't miss the return of Bridgepoint's Got Talent.

March 2013

- **We get the keys:** On March 3, PCL officially hands the keys to Bridgepoint.
- **Take it or send it home:** Patients: We'll help patients prepare to pack.
- **Phone and online resource:** Watch for a special phone line and section on our website dedicated to answering questions about our move.
- **Training continues:** Training in our current building continues until March 30, supplemented with targeted hands-on training in our new building.

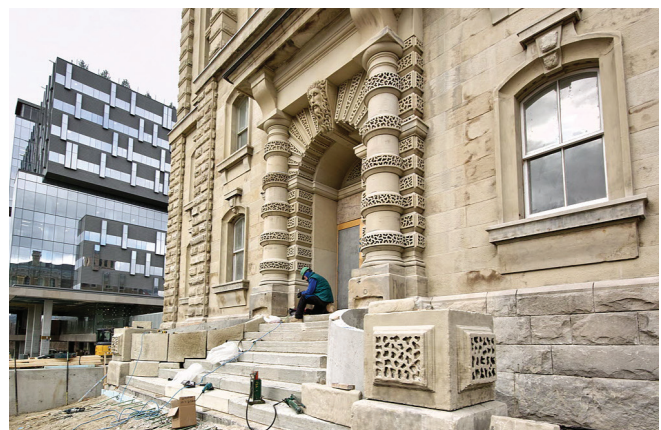
April 2013

- **Move week: Staff:** Staff move to the new hospital and admin building April 6-13.
- **Move day: Patients:** April 14 is the day all of our patients move.

For more updates, visit the We're Ready section of the Portal or email ready@bridgepointhealth.ca.



■ An aerial view of the new Bridgepoint Hospital taken in November 2012.



■ Old meets new as a construction work continues on the steps of the administration building.

Coping with illness as a couple

Research Speaker Series presenter shifts the focus from 'me' to 'we' for couples faced with one partner's illness



Dr. Karen Fergus, our latest Research Speaker Series presenter

In health care, we often think of illness as something each patient deals with individually, and view people in the patient's social network as potential helpers. At Bridgepoint's latest Research Speaker Series, that perception was examined.

Presenter Dr. Karen Fergus – an assistant professor with the Department of Psychology at York University, and a Clinical Psychologist in the Patient and Family Support

Program at Sunnybrook Health Sciences Centre's Odette Cancer Centre – talked about how research is finding that people often cope with serious health challenges as "our" issue, not simply "my" issue. This research could influence our approach to patient care, putting a stronger focus on problem-solving as teamwork, and supporting couples and families to manage illness together.

Dr. Fergus's research focuses on how individuals and couples affected by life-threatening illness – in particular, cancer – cope and adapt. One critical success factor she's observed, while studying how couples in their childbearing prime cope when the female partner is diagnosed with breast cancer, is that there's often no better way to bring couples together than to have a common challenge.

With cancer now increasingly seen as a treatable illness that affects people over the long-term, Dr. Fergus's findings are

being used to develop individual, couple, group and online interventions intended to reduce distress and suffering associated with illness.

Dr. Fergus's presentation at Bridgepoint was a springboard to a lively brainstorm around how her research on couples and cancer could be broadly applied to couples coping with complex health conditions. During the roundtable discussion, several members of our Bridgepoint Collaboratory for Research and Innovation team observed how this specific cancer-related research could influence our approach to care at Bridgepoint.

This broader social approach has been described by researchers as "communal coping" – a cooperative problem-solving approach that's a critical factor in overcoming individual and collective stressors. Both Dr. Fergus and our Collaboratory's own Renée Lyons, Bridgepoint Chair in Complex Chronic Disease Research and TD Scientific Director, have published research on communal coping.

"Spouses often note that care providers don't see them as being impacted by the disease or diagnosis," Renée noted. "If we can encourage families to see treatment and care management as a collective effort – rather than an individual activity – research has shown that this approach can go a long way in encouraging patients, for example, to stick to diet and exercise plans."

For more on this story and tips from Dr. Fergus, visit bridgepointhealth.ca/bridgepointstories



Baked goods bring in record-breaking amount of dough

Thank you to all the 2012 Holiday Bake Sale bakers and buyers, who raised a record-breaking \$1,911.10. for Bridgepoint Health Foundation. The money raised supports the care that Bridgepoint provides for patients and families.