

Issue no. 4 | Summer 2022

GiveHealth **NB**

INSIDE THE REHAB UNIT

The doctors devoted to
physical medicine

NURSES AT THE FOREFRONT

Making a difference in
health care today

IMPROVING CARE
through the
power of play

GiveHealthNB

A publication of the Saint John Regional Hospital Foundation

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Dr. Amelia Barry, left, and Dr. Patricia Forgeron share a passion for physical medicine and rehabilitation. See story page 19.



Message from the President & CEO

Hello friends,

We are pleased to present the fourth edition of GiveHealthNB, a magazine that we hope continues to provide you insight into the advancement of innovation in health care in our province.

All the features and stories that you will read in this edition are inspired by the support of our donor community, which spans the entire province. For their continued generosity, we are grateful.

In our last edition, you read about Lions' Den, the Saint John Regional Hospital Foundation's flagship competition for innovation in health care. I'm delighted to report that our donor community was so moved by the film that, for the first time in the event's history, an additional \$748,628 was raised since the competition wrapped in September 2021, funding all three medical pitches, and reaching thousands of patients across our province.

The overwhelming generosity of our community has made this happen - together, we are bringing new technologies to advance health care right here.

In this edition of GiveHealthNB, you will read about more amazing projects that have been funded thanks to donor support, such as a new technology to help chemotherapy patients, which marks a first for Atlantic Canada. You will meet those who answer the call as we take a deeper look at the amazing work nurses do every day - and celebrate them with a grant for a Horizon-wide nursing conference for professional development and continued learning.

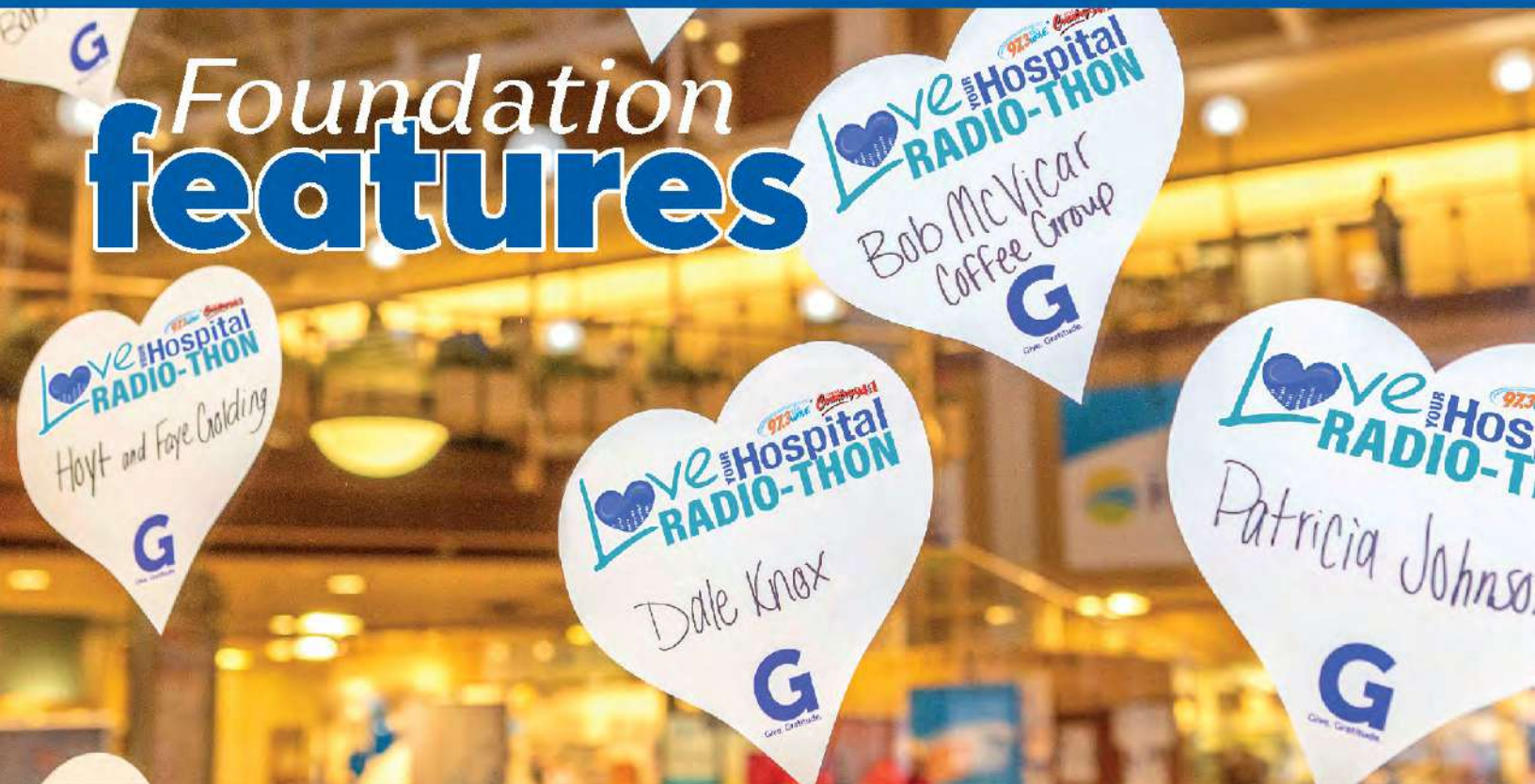
With all that, I will leave you to immerse yourself in the stories. I hope that through reading them, you will be as inspired as we are by the tenacity, innovation and resilience we see every day in health care right here at home.

On behalf of the Foundation, thank you for taking the time to share in our excitement.

Jamie Gallagher



Foundation features



A decade of Love Your Hospital Radio-thon

The Foundation's 10th annual Love Your Hospital Radio-thon was an exceptional one. The Foundation had its best fundraising year, thanks in part to the generosity of our gift matching partner, The Beaverbrook Canadian Foundation, which matched gifts, dollar for dollar, up to a total of \$100,000. The Foundation also could not realize the success that Radio-thon has become without its incredible partnership with Acadia Broadcasting, which year after year provides the vehicle that drives our Radio-thon forward, broadcasting its message of innovating health care across our community.

10 YEARS OF RADIO-THON, BY THE NUMBERS



Record-breaking
\$350,610
total raised this year



4,785
acts of generosity
over 10 years



+\$1.81 mil
donated over 10 years

OUR 10-YEAR HEROES

A shout-out to our 10-year heroes who have supported Radio-thon for the past eight, nine and 10 years.

Barb Murphy
Bruce Dowd
Steve Titus
Carol Ann Branscombe
Cathryn Cameron
Elaine MacDonald
Elizabeth Maloney
Georgette Godin
Harold Keith
Joseph Stack
Kathleen Morris
Margot J. Burnell
Michael McDermott
Patricia Rogers
The John E. Irving Family



Exceptional care inspired gratitude

Throughout his life, Lloyd Muir visited Horizon's Saint John Regional Hospital several times for different health-related concerns, from heart issues to surgeries.

Two major events brought the Belleisle man to the hospital: he lost his arm in 2001 and received bypass surgery at the New Brunswick Heart Centre in 2005.

However, nothing prepared his wife, Irene, and their family for the terminal cancer diagnosis he received in late 2016.

Tammy Urquhart still remembers the day she was sitting with her father in the doctor's office. The doctor had grim news: Lloyd had terminal cancer.

"I remember sitting in the office and Dad asking, 'How long?' and the doctor tells him it's usually about 18 months without chemotherapy."

The following months were dominated by trips to the Regional for treatment. What struck Tammy most was the incredible care that her father received.

"Everyone was so supportive and positive when we came for appointments. Dad always had a good sense of humour and was always joking around," she remembers. "Everybody was always happy to see him."

On one of the trips, Lloyd asked Tammy to come in and see where he was receiving his treatment.

"One time I got to go in with Dad because he wanted me to see the ceiling. It was what looked like a fall scene, lying in the grass looking up at a colourful maple tree. To me, that is going the extra mile in making patients comfortable while they're in a stressful situation. It was just so calming for patients like Dad."

Fast-forward to February of 2022, when Tammy was inspired to give back after hearing the Love Your Hospital Radio-thon, hosted annually by the Saint John Regional Hospital Foundation. It made her think of her dad, who passed away in 2018 at the age of 79.

"I was at home, puttering around in the kitchen and I had the radio on. I remember hearing them talk about the hospital. I was inspired to give back to the Foundation because of the great care Dad received and to support the people that supported him."

Tammy hopes she inspires others to give as well, as her family saw the true benefits of great care.

"It is important for people to give what they can to the Hospital Foundation," she says, noting that it helps fund the equipment and technology that doctors, nurses and other staff use to save lives every day.



Irene Muir, left, and her daughter Tammy remember the incredible care Lloyd Muir received at the Saint John Regional Hospital.

“They saved dad's life several times over, during his lifetime. Our family is very grateful for the care, knowledge and support he received there. And that is priceless.

– Tammy Urquhart

Foundation features



Generosity brings first-of-its-kind technology to Atlantic Canada

When it comes to supporting our hospitals in a time of need, there is never a shortage of community organizations prepared to step up and answer the call. That is exactly what happened after the Foundation received a proposal for a piece of technology that was inspired by a humbling story from two physicians, Dr. Ashley O'Brien and Dr. Mari O'Brien.

The couple had seen first-hand the benefits of the Paxman scalp-cooling system because Mari herself had used one. Paxman helps to reduce or prevent chemotherapy-induced hair loss. Mari was diagnosed with breast cancer in 2020, so the couple set out to acquire a Paxman so that Mari could hopefully keep her hair while undergoing her chemotherapy treatment.

The technology was a success: Mari lost some hair but was able to hide it with a ponytail and comfortably make trips for groceries and to their children's sporting events.

The story was compelling, and the technology would benefit many. That was enough for both the Saint John Canadian Lebanon Association and the Knights of Columbus Father Eugene O'Leary Council #6595 to step up and support a program here in Saint John.

“Having friends who have been diagnosed with cancer, and seeing them go through the various treatments and stages of the disease, it is wonderful to be able to support the scalp cooling system, which will alleviate at least one of the many side effects.”

– Mona Crowley, Treasurer of the Saint John Canadian Lebanon Association

For the Saint John Canadian Lebanon Association, funding this type of technology had a personal connection.

“Having friends who have been diagnosed with cancer, and seeing them go through the various treatments and stages of the disease, it is wonderful to be able to support the scalp cooling system, which will alleviate at least one of the many side effects,” says Mona Crowley, Treasurer of the Saint John Canadian Lebanon Association.

“We hope it will help patients overcome at least one of the many trials they face, making them more comfortable with their appearance and giving them some mental relief to concentrate on some of the other problems they face.”

The Knights of Columbus was also delighted to be able to support cancer patients with this equipment.

“To have Father Eugene O'Leary Council 6595 Knights of Columbus support a first-of-its-kind piece of technology, supporting innovation in health care our province brings great pride and satisfaction to our council members,” says Kevin McDonald, Financial Secretary for the Council.



“Many of our Knights have families who will benefit from this technology while at the same time supporting all that require it. We know this machine will bring so much comfort to patients on their journey with this dreaded disease.”

The two organizations will support the first scalp-cooling program being offered east of Toronto. Thanks to their support, chemotherapy patients will benefit from this first for Atlantic Canada.

Celebrating 10 years of partnership with Johnson Insurance

The year 2022 marks a decade of partnership with Johnson Insurance, which has given more than \$89,000 over the last 10 years to support various initiatives within health care.

“Helping people is something we have in common with our partners at the Saint John Regional Hospital Foundation. Which is why Johnson couldn't be prouder to help the Foundation to support innovation in health care, right here in our community,” says Trish Harkin, Senior Consultant, Affinity Client Relations for Johnson Insurance.

From supporting the employee lottery program to various projects as recently as the Clinic 1 campaign and now robotic-assisted surgery, Johnson Insurance has been there.

As we enter our 10th year, Johnson Insurance continues to be an incredible partner of the Foundation. Their support over the last decade has supported staff with their lottery winnings, helped employees get through difficult times, and helped build a healthier future for New Brunswick patients.



IMPROVING CARE

through the
power of play

The 'fun lady' helps kids cope with their hospital stays

Every four weeks, nine-year-old Paul McShane leaves his home in St. Stephen for a day at Horizon's Saint John Regional Hospital to receive an infusion.

After nearly three years, these monthly trips to Saint John have become part of the family's household routine. And while Paul stoically accepts the necessity of the treatments, his mother says they are not painless.

"The biggest thing he doesn't like is the IVs," Patricia McShane says. "He does not enjoy those."

What he does look forward to is seeing Beth MacNutt, the Regional's resident Child Life Coordinator.

For Paul and the many other children she works with, Ms. MacNutt channels the therapeutic power of play to make their time at the hospital more positive.

"My job is to help children cope with their hospital experience," she says.

Along with helping distract him during the IV insertion, Ms. MacNutt keeps him entertained with games and toys during the five or six hours it takes to receive the infusion of Remicade, a medicine used to treat relapsing polychondritis, a chronic disease that attacks the cartilage. Paul was diagnosed with it when he was six.

For 26 years, Ms. MacNutt has held this role at the hospital. Her name is practically synonymous with the program, where she's a one-person tour de force for family-centred care.

"It's such a privilege and an honour to work with these children and their families at a time when they are often in crisis or a difficult place," she says. "I do it for the patients and their families."



Beth MacNutt,
Child Life Coordinator

Ms. MacNutt says it's the best job in the hospital.

"I'm the fun lady," she says. "Who else gets to play every day?"

The idea that play is beneficial for children in hospitals has been around for decades. In 1974, the former Saint John General Hospital launched its first child life program. A group of so-called "play ladies" would do what their informal title suggests: play with pediatric patients in the department's playroom.

Those early play ladies were volunteers, but in the 1970s and 1980s, as child life programs expanded across North America, the field grew into a profession. Ms. MacNutt, who has a background in child growth and development, was the Regional's first certified child life specialist.

Today, she says, a child life program is an indicator of excellence in pediatric care and part of the standard of care across Canada and beyond.

"Child life has really evolved over time," she says. "Play is still the program's foundation because play is how children learn and grow. But we use what I call 'play with a purpose.'"

Her toolkit includes medical play, which might involve having young patients rehearse for a procedure to take away the unknowns, so they know what to expect. She uses play to teach coping skills and reframe challenging hospital experiences.

Sometimes, if a child is tense or worried, she'll have them blow bubbles or pinwheels to harness the naturally calming power of the breath.

“When you think about kids' emotional and social needs, play has such an important role.”

– Beth MacNutt, Child Life Coordinator

Despite the professionalization of her field and its grounding in extensive research, Ms. MacNutt says many people still don't fully understand or appreciate the value of play. Along with well-documented contributions to learning and development, it has numerous therapeutic benefits.

"When you think about kids' emotional and social needs," she says, "play has such an important role."



Left to right:
Ashley Duchesneau
Patricia McShane
Noah Shepherd
Paul McShane
Ben Duchesneau

Many of the Lego blocks and stuffed animals, poppits and action figures, dolls, puzzles and games that fill Beth MacNutt's toolkit are donated by the community.

The Saint John Harley Owners Group has been a long-time supporter of the Child Life Program. Its annual Lana Sherwood Memorial Toy Run, which celebrated its 26th year in 2021, has collected thousands of toys in that time. And every year, they make a donation – typically ranging from \$1,500 to \$2,000.

For kids like Paul McShane, these toys make their hospital experiences a lot easier.

"It's the most pleasant part of the treatment," Ms. McShane says. "It really does brighten up his day and gives him a little something extra that he can enjoy while he's there."

Ms. McShane marvels at how personalized the Child Life Program is and heaps praise on Ms. MacNutt.

"She remembers everything about him, she knows everything Paul likes," she says, including Pokémon, Roblox and Minecraft. "If she sees something that will make his stay at the hospital better, she saves it just for him. And he loves it. It just really makes his day."



Paul McShane

The Regional's Child Life Program supports children of all ages, from infancy to 18, when most patients age out of pediatrics. Some, like Paul McShane, Ms. MacNutt gets to know over the years. Others are admitted for the short-term, for acute care.

While their ages, medical conditions and treatments vary widely, what unites her patients and their families is often fear of the unknown. And fear and pain are closely linked.

"If you can minimize the fear and uncertainty, the kids recover more quickly," she says.

The first goal of the program is to support a successful medical procedure, whether that's drawing a blood sample, inserting an IV, running a diagnostic test, or other interventions, with the least trauma and negative impact on the child and their family.

Beyond a more positive and pleasant hospital experience, Ms. MacNutt aims for a more empowering one. Her play techniques can help patients reframe their experiences.

Instead of being passive recipients of health care, the Child Life Program makes the children actively involved and engaged in their care, which helps them now, and in the future.

"We're implementing all the strategies that research shows are best to support that child in coping and resiliency down the road," she says. "As children learn these skills, they'll hopefully transfer to other challenging life events."

Along with pediatric patients, she also occasionally works with children with sick loved ones in the hospital, helping to prepare them for visits and making the sterile setting more inviting, such as by putting a hand-crafted quilt over the standard hospital linens.

With a focus on family-centred care, she also supports parents and caregivers, sharing techniques, such as comfort holds, that they can use to help soothe their child during a challenging procedure. And she sometimes uses some of the same role-playing games and other techniques with adult caregivers.

"Parents don't always know what to expect," she says. "Being able to support the parents so they're better able to support their child is a better experience all around."

She says she sees the difference her program makes every day, "with her own eyes."

The proof is in the smiles on the faces of young patients when she walks into the room. She sees it in her colleagues, too.

"My health-care team recognizes the value of play," she says. "They know that if they go into a child's room to do an assessment and that child is in the fetal position, bawling, they need the support of child life."

"If she sees something that will make his stay at the hospital better, she saves it just for him. And he loves it. It just really makes his day."
– Patricia McShane

Brenda Kinney,
Vice-President
and Chief
Nursing Officer
at Horizon
Health Network

Nurses

at the
forefront

With nurses working to keep people healthy, safe and comfortable, the impacts are of their care and compassion are felt across the community.

Inspired by her mother's caring example and two aunts who were nurses, Catherine Little knew nursing was the path for her.

"I was moved by these three women," she says, "to pursue a career that would allow me to show kindness and empathy towards others."

Ms. Little has worked as a nurse for more than two decades – the entire time at Horizon's Saint John Regional Hospital, and for most of that time in the ER, providing front-line care to thousands of New Brunswickers and their families.

"I love my job. I love the patients. I love the different situations I encounter every day and the different opportunities I have," she says.

"I have the opportunity to care for patients when they come into the world and when they leave the world," she says. "You see all aspects of their journey."

With nurses working to keep people healthy, safe and comfortable both in the hospital and far beyond its walls, the impacts are of their care and compassion are felt across the community.

"Nurses are everywhere," Ms. Little says. "Within our families, social circles, neighbourhoods, schools and businesses. We have the privilege of being educators, mentors, confidants, coordinators, and life-saving caregivers to every single patient we meet."

The public has never been more aware than they are now of the contributions nurses make and the challenges nurses face.

Horizon Health Network's Vice-President and Chief Nursing Officer, Brenda Kinney, sees a once-in-a-lifetime opportunity to transform and rebuild nursing for the better.

"Everybody from government officials to the regional health authorities are really invested in improving our nursing workforce," says Ms. Kinney, "so it's a time of incredible opportunity and openness for ideas and innovation."

Ms. Kinney's job is itself an indication of the unprecedented attention nurses are receiving. While the position has existed for years, it used to be part of another job. This year, for the first time, it became a stand-alone role.

With more than four decades of nursing experience behind her, Ms. Kinney assumed the post last January.

Ms. Kinney is a problem solver by nature. "I just love the ability to make a difference," she says. "I like outcomes. I like things that I can see."

Ms. Kinney gravitated to surgical nursing right out of nursing school. After a year in general surgery, she landed a job in the surgical intensive care unit.

She got her first taste of leadership as a nurse supervisor fairly early in her career, at the urging of a mentor, and found it a great fit.

Ms. Kinney spent nearly 20 years as a manager in the New Brunswick Extra-Mural Program, during which time she got her bachelor's and master's degrees in nursing. In 2009, she joined Horizon as a director, moving on to an executive director role and then to her current position as Chief Nursing Officer.

"It's a wonderful honour," she says. "And it's a wonderful challenge because nursing is very much at the forefront at the moment."

These days, it's especially clear: nurses are essential to the well-being and recovery of patients.

"Everybody has realized the significant impact on the health-care system when you don't have enough nurses," Ms. Kinney says. "Nurses are on the frontline of COVID. Nurses are the ones who are with patients 24-7. It just raises the awareness of how critical nurses are to good patient care and good outcomes."

She points to a seminal Canadian study, "Nurse Staffing Models as Predictors of Patient Outcomes." Published in 2003, it examined how nurse staffing models affect patients - including their functional health, pain control and satisfaction.

In the study, conducted in 19 teaching hospitals, the researchers found a positive connection between the number of nurses on a unit and how well patients did when discharged from the hospital.

Working alongside stakeholders in government, academia and other health authorities, Ms. Kinney is out to find ways to bolster nurse staffing. She says there's more collaboration now than ever around the issue.

"A big part of my role is to make sure that we're engaging with all of the stakeholders and working together as opposed to in silos," she says. "It's really positive."

Along with a big focus on recruitment, especially to attract more internationally educated nurses, there's also a push to increase the number of seats in New Brunswick nursing schools. Beyond that, Ms. Kinney says the time is ripe to reconsider the roles and responsibilities of nurses.

"It's also about finding more efficient ways to maximize their specialized skill sets," she says. Some tasks that nurses currently perform may be better handled by other team members. "The bottom line is that we need our nurses where their essential skills are most important."

One of the most important ways to support nurses is by providing quality professional development opportunities.

The Saint John Regional Hospital hosted an annual conference for its nursing staff for several years before the pandemic. In 2021, there were plans to host a larger event for nurses from across Horizon Health. That expanded event, delayed due to COVID, has been rescheduled for 2023, with a focus on nurses rebuilding and recharging.

For more than two years, all training or professional development for nurses has been virtual. The chance to gather live will make the event extra special, Ms. Kinney says.

"I think it will be a wonderful opportunity for nurses across Horizon to get together again, to benefit from networking and personal communication and connection."

The event is being funded by the Saint John Regional Hospital Foundation, which also supported the conference in the past. The Foundation recognizes the essential work of nurses and has plans to direct more resources to support them, through professional development and other initiatives.

Ms. Kinney says the support is "absolutely awesome."

"The Saint John Regional Hospital Foundation sees the value in supporting our nurses," she says. "It sees the value in education and the importance of that for the growth and development of our nursing staff for the betterment of patient care."

“As a nurse, you're in the trenches doing a lot of things that many people could never see themselves doing. In that way, it's a noble profession.”
– Nurse Liam Siphema

She appreciates the Foundation's multi-faceted approach to improving health care by funding different "pillars," including innovative technologies, research, specific department or unit upgrades, and investments in attracting and, crucially, retaining health-care workers.

"You want engaged staff. You want staff that are up-to-date and current," she says, "so investing in our team is critically important as we move forward."

As New Brunswick's largest tertiary care hospital, and home to a number of provincial programs, the Regional "depends on having not just top-notch physicians," Ms. Kinney says, "but also really top-notch, engaged nursing staff and other professionals."

The public may not fully understand just how educated nurses are or how complex and advanced nursing is today, Ms. Kinney says. While a warm bedside manner is important and caring is, as ever, at the heart of the job, nursing is a highly skilled profession that's grounded in science and research and constantly evolving.

The old image of nurses as angelic bedside handmaidens is outdated, she says.

"It is a really good thing that the profession is being recognized for its value and its worth," she says. "Nurses aren't just there to sit and hold your hand or give you a bed bath. Nursing is much, much more complex than that."

“I really enjoyed the ability to help nurses, to make things better. I like to jump in and solve problems. I've been blessed to have had a phenomenal career.”
– Brenda Kinney

"I really enjoyed the ability to help nurses, to make things better," she says. "I like to jump in and solve problems. I've been blessed to have had a phenomenal career."



Left to right:
Sarah Messer
Pam Parsons
Brenda Kinney
Catherine Little
Shauna Gray

Since assuming the role of Chief Nursing Officer for Horizon, Ms. Kinney has spent a lot of time talking to nurses across the health authority.

One of the things nurses, particularly ones early in their career, are asking for is more structured mentorship.

"We haven't had a good mentorship program for years, and with new staff coming in, they have different needs," Ms. Kinney says. "They have different support requirements, so we're going to be initiating a regional nursing mentorship program."

Ms. Kinney knows first-hand the crucial role a great mentor can play. It was her own mentor, fairly early in her career, who first encouraged her to pursue leadership opportunities, and to go after a nurse supervisor role, which led, ultimately, to her current leadership role.

Ms. Kinney says there will also be a mentorship program tailored to support the unique needs of the increasing number of internationally trained nurses that are being recruited.

And, as always, nursing offers incredible diversity.

"Nursing provides opportunities like no other profession," Ms. Kinney says. "You can be an educator, you can be a researcher, you can be a manager or a leader. You can work directly with specific patient populations. There's almost no other profession in the world that you can go into, and come out with so many options as you progress through your career."

"The opportunities are endless."

At the upper levels of the profession, there's a recognition that nurse managers and other leaders are spending too much time trying to find resources to fill shifts.

Ms. Kinney says they are looking at creating new support positions to help ease the strain, so these senior leaders can focus more on supporting front-line nurses.

As Ms. Kinney and her colleagues and collaborators work to address the challenges and reimagine nursing in New Brunswick, she feels optimistic about her profession's future.

"It's a wonderful career," she says. "Yes, it's hard work. But it's so rewarding. If helping people is something that you value and have an affinity for, there's no better career than nursing."

For Liam Sipkema, who has been an RN in the Regional's cardiac unit since graduating in 2018, nursing blended his interest in science and medicine with the human touch.

"The human body is just an amazing thing," he says. "And then you have the social aspect of caring for people, which is very fulfilling."

He works with patients before and after heart surgery, educating them and their families on what to expect, running pre-op tests and providing post-op care, which typically lasts five or six days for a bypass patient.

"It's nice because our patients have a problem, and it usually gets fixed," he says. "After a near-death experience, we get to see them get better and go home."

He loves the teamwork on his unit, and the chance to help people when they are at their lowest.

"As a nurse, you're in the trenches doing a lot of things that many people could never see themselves doing," he says. "In that way, it's a noble profession."

Nurse Catherine Little can't imagine doing anything else.

As she goes about her work, she feels her first duty is to be kind, considerate and empathetic to every patient and their family, to show them patience in what is often a stressful or painful time.

"When people come to the hospital, they're very vulnerable. I'm all about kindness. The most important thing we can focus on is being kind to patients and being kind to each other right now," Ms. Little says.

"My goal is to treat my patients with the same respect and dignity that I would want my family to receive if they were in hospital."

“My goal is to treat my patients with the same respect and dignity that I would want my family to receive if they were in hospital.”

– Catherine Little, Nurse

“When patients come to our unit, it's more like a family setting than it is like a typical hospital experience. And that's why it's such a great place to work. We all do our part to get the patient home.”

– Dr. Amelia Barry, Medical Director of the Regional's Rehabilitation Unit



Dr. Patricia Forgeron, left, and Dr. Amelia Barry are physiatrists at Horizon's Saint John Regional Hospital.

INSIDE THE REHAB UNIT

It may not be the stuff of Hollywood medical dramas, but Dr. Amelia Barry of Horizon's Saint John Regional Hospital knows that the physical medicine and rehabilitation department she oversees has more than its share of inspirational stories and happy endings.

Dr. Barry, Medical Director of the Regional's Rehabilitation Unit, is a physiatrist – a physician who treats a wide variety of medical conditions affecting the brain, spinal cord, nerves, bones, joints, ligaments, muscles and tendons.

The patients who end up in the rehab unit have often gone through acute care treatment in surgical, cancer or even the COVID wards. They can be on the unit for weeks, even months, as the staff dedicate themselves to helping patients recover.

"We are like the quarterbacks," Dr. Barry says of her team, including fellow physiatrist Dr. Patricia Forgeron and the unit's physio and occupational therapists and nurses.

"We bring all the different specialties together to get the patient ready to go home. Our goal is to get them back to their best level of function possible."

"It's a very collaborative process. We work a lot with

other physicians, particularly orthopedic surgeons, neurosurgeons and neurologists. But we also work a lot with the families of our patients. When patients come to our unit, it's more like a family setting than it is like a typical hospital experience. And that's why it's such a great place to work. We all do our part to get the patient home."

At the centre of the process, Dr. Barry says, is the patient. Some of the patients can be at the unit for several months, especially if they are recovering from a stroke, spinal cord injury or amputation.

"Patients do have a lot of downtime on the weekends but during the week, their schedule is pretty much filled up," Dr. Barry says. "It's almost like it's their job to get better and do rehab therapy. So from 8 a.m. to 4 p.m., that's their job."

Saint John resident Greg Hayes, a retired Canada Post worker, is one of those rehab patients who took his job of recovery very seriously.

In February of last year, Hayes, now 81, woke up one morning and discovered he had no feeling below the waist and could not move his legs. It was a frightening development that had come out of the blue because earlier that day he had been shopping and moving around normally.



I said to her, 'We've got a problem,'" Hayes recalls. "So that was Feb. 6 and I was taken by ambulance to the hospital. Turns out a disc in my back had disintegrated and it damaged my spinal cord."

Mr. Hayes underwent surgery on Feb 12. Following the surgery, he started to get feeling back in his right foot. He says it was Dr. Barry who decided to move him to the rehab unit, where he arrived near the end of February.

"The hard work was just beginning," he says.

No one was sure whether he would walk again. The road to recovery was both uncertain and difficult. There were weeks of exercises.

If it was a struggle, he never seemed to let on. He was upbeat – a bright light on the unit for a lot of patients, chatting and bringing everybody up.

Over time, his legs became stronger. By April, he knew he was making good progress, but still wasn't ready to walk on his own. He kept at it and by May 21, he was able to go home. He had spent, in total, 105 days in hospital.

"Today I take 2,500 to 3,500 steps a day, most of it without any assistance. So I'm doing very well," Mr. Hayes says.

Seeing the transformation in patients like Mr. Hayes – often moving from traumatic injuries or illness to walking out of hospital – is what brings a deep sense of reward for Drs. Barry and Forgeron.

The rehab team helps patients achieve a full recovery, the result of customized physical and wellness therapies to regain strength, balance and flexibility. Each recovery is significant to the team, but it's the memories of patients who get teary eyed after being able to pick up grandchildren or who can once again drive their cars that stick with them.

"There's a lot of focus on acute care and very little on what happens to that person after the high-tech stuff is used to save lives or decrease disability and disease," Dr. Forgeron says.



Physiotherapist Irene Thomson works with patients on their rehabilitation journey.

"There's a whole process that comes after that – the rehab. That's what we get to see, that continuum. If someone is in hospital for three months, the first four weeks or less might be in acute care and then they could be in our unit for two or three months or longer."

Dr. Forgeron says that in recent months, the unit has seen former COVID patients arrive for rehab care. She says patients who have recovered from multi-system failures may have been in bed for months.

"The big journey, after they are medically stabilized, is learning how to walk, dress and slowly build up their endurance."

Thanks to generous donors, the Saint John Regional Hospital Foundation has been able to dedicate thousands of dollars to fund special equipment used on the rehab unit – most recently, a cross-trainer that has been a big hit with patients.

"We all feel really fortunate that we can rely on the Foundation for some of those little things that might make a huge difference in the patient experience," Dr. Barry says. "To our community, that is a big thing."

For both physicians, the big attraction of physical medicine and rehabilitation is the variety of conditions that require their healing attention – everything from broken bones to complex diseases like ALS.

About 15 years ago, Dr. Barry was still a medical student in Ontario when she was paired with Dr. Forgeron to spend a summer at the Regional. She fell in love with rehab medicine, and has never looked back.

"I think the variety of what we do have was a big contributor to my interest in the field," Dr. Barry says. "But I also grew up playing a lot of sports. So it also lets me do some sports medicine and engage in that side of it as well, which I would have been exposed to a lot when I was young. I think those are the main reasons why I ended up in this area."

Her decision to embrace the specialty for her career and to work in her hometown suddenly doubled the number of physiatrists in the region.

For the first time, Dr. Forgeron was no longer on her own to cover a territory from Sussex to St. Stephen, to staff a day hospital that she established, to see patients in her office and to cover rounds at the hospital.

And, recently, Dr. Barry stepped up to take over from her mentor as medical director of the unit.

A member of the well-known Barry clan, she is delighted to be working in Saint John – where she has more than a few relatives in the health-care professions, including her physician father, Dr. Mike Barry.

"To be honest, a big part of why I love what I do is because

of the city and the people and the ability to collaborate so well with all the physicians in the hospital and the therapists," she says.

"I trained in a place that was an independent rehab facility, and that's the case across most of the country. So, typically, there is the acute care hospital, but then you'd have your freestanding building somewhere else for rehab," she says.

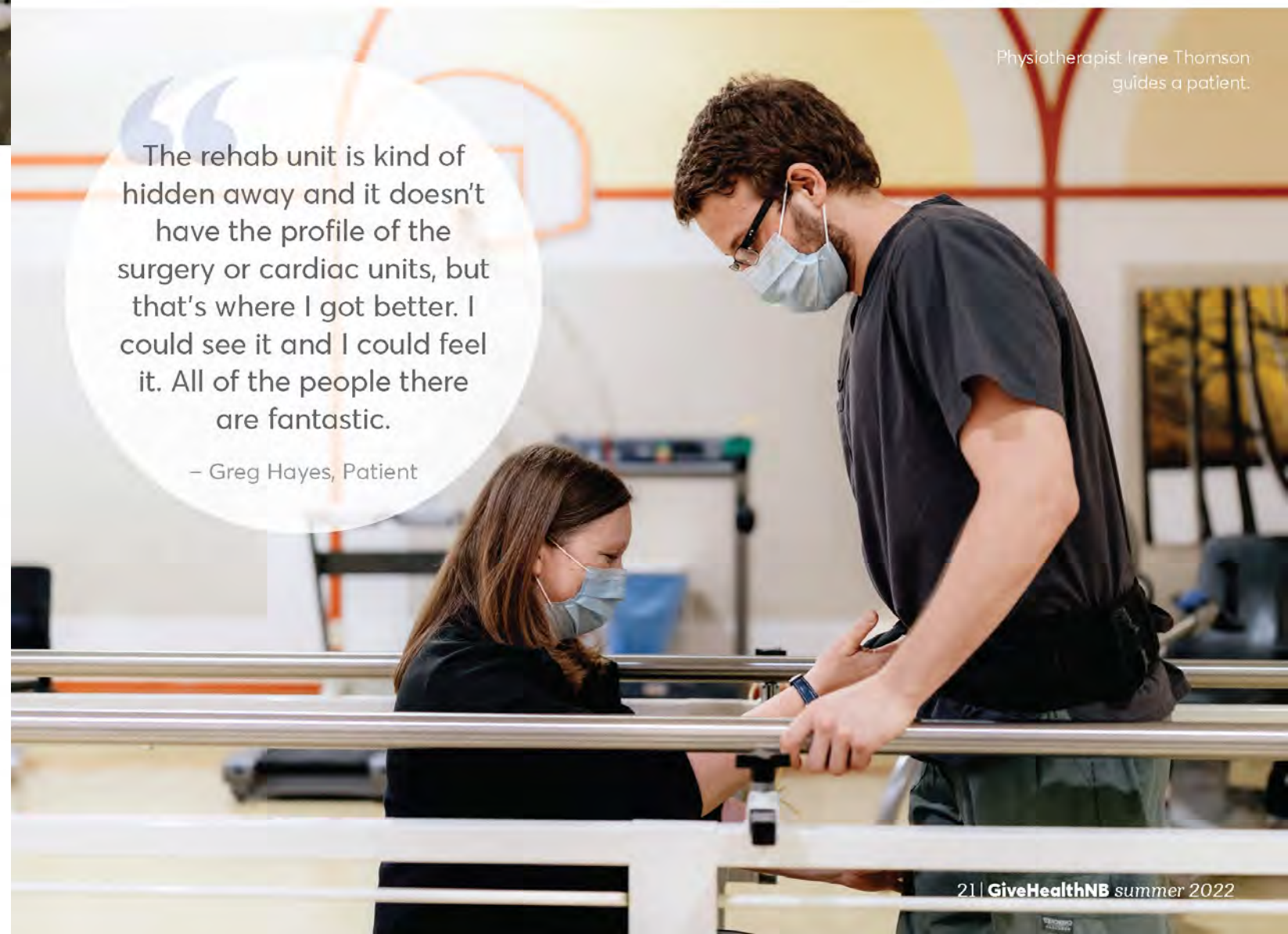
"Since I've been in Saint John, I think one of the beauties here is that our rehab team has been so collaborative with all of the other team members, like the surgeons and the neurologists, and it definitely helps with patient care. I think Saint John is a really special place to work. No matter what specialty you're in, I think it's a great medical community."

For Greg Hayes, the team on the unit is near and dear to his heart. To him, they were integral to his recovery.

"The rehab unit is kind of hidden away and it doesn't have the profile of the surgery or cardiac units, but that's where I got better. I could see it and I could feel it. All of the people there are fantastic."

The rehab unit is kind of hidden away and it doesn't have the profile of the surgery or cardiac units, but that's where I got better. I could see it and I could feel it. All of the people there are fantastic.

– Greg Hayes, Patient



Physiotherapist Irene Thomson guides a patient.

IMPROVING TRAUMACARE



Left to right:
Susan Benjamin, RN,
and Dr. Jay Mekwan

When it comes to the management of emergency care, Trauma NB believes that practise makes perfect in delivering services that can make a profound difference in health outcomes.

Trauma NB offers a nationally accredited simulation program for health-care providers that aims to address gaps in care through hands-on training. The program is offered province-wide and across both health authorities.

“When you are looking after a trauma patient, we need to make sure that our delivery of care to that patient is as good as it can get,” says Dr. Jay Mekwan, Clinical Lead for the Mobile Simulation Program. “One of the best ways of

doing that is practise, and it has to be deliberate practise at that.”

Dr. Mekwan says the centre reviews all trauma cases that happen in the province, assessing the quality of care and whether there were gaps in service. He says there could be shortcomings because of equipment, the transfer system for patients, or possibly gaps in knowledge among health-care providers.

“We really tailor each educational session for the providers in their facility,” he says. “It’s a very hands-on course. There is zero chance of someone sitting in the corner and not participating. Everyone participates.”



Left to right:
Susan Benjamin, RN,
Dr. Jay Mekwan
and Ian Watson

The simulation program is distinguished by the fact that it has received accreditation through the Royal College of Physicians and Surgeons of Canada – a lengthy and demanding process that sets the program apart from most others. In fact, the Trauma NB Centre is one of only two such accredited centres in the Maritimes. There are only about 25 across Canada.

“It signifies to participants who want to explore education through simulation that, in choosing our program, you know that it’s accredited and it’s giving you the best there is,” says Dr. Mekwan. “It’s giving you everything that you can possibly want and it’s approved by an organization that has independently reviewed it.”

The programs are multi-disciplinary, so there is a collaborative feel to the simulations to make sure patients are getting the best possible care.

“We deliver the programs to the people providing the care – physicians, nurses, RTs.”

Dr. Mekwan says each module in the simulation program has some reading and a small lecture component, but the rest is practical.

“There’s some reading that clinicians do prior to the session, but the majority is hands-on. There are practical simulation sessions throughout the day. Group learning about equipment. It’s really diverse in terms of what we teach, but it’s all hands-on.”

By visiting health-care facilities across the province, it also offers a more tailored experience for clinicians in each area. In addition to celebrating the recent Royal College accreditation and continuing to build its programs for delivery, Trauma NB is looking forward to its upcoming biennial conference in September.

“It’s a two-and-a-half-day conference and the goal is really to bring like-minded people together and really network, collaborate, and see what other people are doing,” Dr. Mekwan says. “We want to see what we can bring to our own teams, see what we can take from others and show people what else is out there.”

“When you are looking after a trauma patient, we need to make sure that our delivery of care to that patient is as good as it can get. One of the best ways of doing that is practise.

– Dr. Jay Mekwan, Clinical Lead for the Mobile Simulation Program



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