

Monday Message: August 1, 2022

Connection. I spoke about this during my June 8th Grand Rounds. The need for human connection is wired into our DNA and is essential to counter the effects of stress and anxiety. Dr Alessandro Brunelli's ESTS presidential address talked about the importance of connection with patients. Alex talked about facilitating communication within a safe environment by accepting the patient as a person (without prejudice), allowing the patient to tell their own story. In my grand rounds I talked about allowing the surgeon to tell their story. "The word communicate comes from the Latin for " make common". You only connect when the common understanding goes deeper" than the facts and considers the emotions and values of the other person. ( Davey, L. *The Good Fight*). Whether we are trying to communicate with patients or colleagues, it is important to stop talking and listen, to allow the other person to tell their story. Only then will we truly connect.

Monday Message: August 8, 2022

It was suggested that I might include “news” in my Monday messages.

I think that it is a good suggestion but I don’t think it should replace my usual type of message

As I am on vacation I thought I would send my first “ news” message.

1, Periop Network: Funding was approved for centralized referral, triage and OR booking. Details are being worked out. Please send me your thoughts on this process. Also please contact Cindy Connolly ( [cindy.connolly@nshealth.ca](mailto:cindy.connolly@nshealth.ca)) and Greg Hirsch ( [greg.hirsch@nshealth.ca](mailto:greg.hirsch@nshealth.ca)) directly . If we don’t engage with this process, something will be imposed upon us so it is better to inform the periop network of our views on this and work with them.

2. Our new VP operations Eileen McGibbon is very engaged in our issues. Let me know your concerns. I meet with her regularly.

3. DOS deliverables website: Government wants to know they are getting value for money. We need documentation. I recognize that completing documentation on the DOS deliverables website is time consuming for you and your assistants. I am working with the DOS office staff to get the data and enter it for you. More to come on this in September.

4. Surgical oncology program: with the blessing of Dr Helmut Hollenhurst and co-lead Margaret-Ann Morrison, I am putting together an inclusive group of surgeons representing all zones and all specialties so that surgery has representation at the Provincial Oncology table. Terms of reference are in draft form. Please contact Charlene Keats to ensure we have your name on our list. Dr Carmen Giacomantonio will be the interim head. We will have a competitive process for the head of this group once we get fully organized.

5. I have appointed Dr Mark Walsh as my deputy head.

6. Our first DOS grand rounds will be led by me and will include brief presentations on some new surgical innovations, a list of DOS accomplishments of the past year including promotions and an outline of work for the coming year.

7. We will be developing a robust task force led by Dr Sean Christie—which I am calling Greening of the OR ( at least for now), which will focus on reducing our footprint on the environment

8. I will be asking each division to develop ERAS protocols for common procedures. Our goals with this are to reduce LOS, improve patient outcomes and satisfaction. This will be linked with the periop process in #1.

9. Our career planning and code of conduct task forces will be reporting to DOS executive in September so more news to follow.

10. I will not be sending out Covid updates on this email message

Thanks everyone for your support over my first 7 months

Monday Message: September 6, 2022

September. Labour Day. End of summer. Back to work. We have some good news. We are back to 97% of our 2019 volumes of surgery. Even better news: On September 10th we have been able to add a day for elective cancer surgeries thanks to volunteers from our OR nursing staff and our anesthesia colleagues.

We are hopeful that we will be able to add more days going forward to help us address the backlog. We are still cleaning up wait lists but to date almost 3000 patients have been removed from the wait lists because they no longer need surgery, they have had surgery by another surgeon, they have decided not to have surgery or they are not ready for surgery. We also are in the process of verifying our cancer wait list with the goal of trying to get patients to surgery within recommended wait times. We have a lot of work to do.

We still have staff shortages and covid is still around but executive leadership has committed to helping us. For the first time since I arrived in January I feel that surgery is supported. It is a good feeling.

Monday Message: September 12, 2022

You have heard me write and speak about psychological safety. What do this really mean?

It means that you feel safe to speak up especially when you disagree with the views of other. It has been described as “speaking truth to power”. It is important as a leader that you know what people think. This brings me to the anonymous letter last week. The writer disagreed with a decision I had made. It will come as no surprise that I am not perfect. I will make mistakes. I am counting on all of you to call me out on these. The writer expressed a point of view that perhaps many of you share and felt an obligation to inform me. For this I am grateful. I am sorry they did not feel comfortable or safe to tell me in person or sign their name, but I take their perspective seriously.

Going forward, I ask for you to speak up. I need you to be honest with me.

Monday Message: September 19, 2022

Last week was the Canadian Surgical Forum. It is primarily a meeting of general surgeons but the Canadian Association of Thoracic Surgeons also participates.

It was so great to see old friends, to meet the future of our specialty and learn about all the terrific work taking place across the country. We had two invited speakers who addressed nonmedical topics. Professor Nouman Ashraf of the Rotman School of Management at University of Toronto and Dr Mark Dockstator, of Trent University, Cheney Wenjack School of Indigenous studies. Dr Dockstator spoke about our relationship with Indigenous populations. He provided a different perspective on our history including the meaning of several of the original treaties which speak to the concept of we all share the land and what that really means. Professor Ashraf pointed out that in Ojibway and Cree, leadership doesn't mean power, it means caring. This aligns with the model of the servant leader. It is very different from the autocratic leadership model with which we are more familiar.

We can all be leaders: to have courage, capacity, curiosity and commitment to work with, learn from, and give voice to others

Monday Message: September 26, 2022

I was asked to write a commentary on Mr Alex Brunelli's Presidential address at ESTS 2022. I watched the video of his speech and his message resonated just as much as when I heard it in person. He challenged us to have the courage to be imperfect, to be vulnerable, to be authentic and in so doing to connect with our patients. He challenged us to demonstrate compassion and empathy.

The title of his address was "Sawubona" a greeting, which means: I see you, I acknowledge you, I accept you. The message of Sawubona resonates. It is the essence of an authentic interaction between two human beings whether doctor and patient, doctor and allied health professional or family members. Mr Brunelli asks us to be present, to listen and be sensitive to patient cues.

We talk about empathy and compassion but do we really understand what these really mean? Mr Brunelli explained these concepts and why they are so important to the doctor patient relationship. They are the foundation of trust. Trust is essential to the relationship between a surgeon and their patient. When a patient consents to an operation, they are putting their trust in us to look after them, to do our best, far beyond the words on the form or a list of potential complications.

Empathy is active. It means we see the perspective of the other person, we don't judge, we understand and share the feelings of the other person. Compassion is not possible without empathy but takes it further. Compassion motivates people to help, to relieve suffering.

In his challenge to us, to accept ourselves as imperfect, to be vulnerable, Mr Brunelli also asked us to be kind to ourselves first, to have compassion to ourselves. Without self compassion, we wear an impenetrable armour and cannot connect with the patient.

Monday Message: October 5, 2022

Apologies for a delayed Monday message, I was trying to find the right words.

The juxtaposition of Sept 30<sup>th</sup>- Truth and Reconciliation Day and Oct 10<sup>th</sup> Thanksgiving Day is poignant in so many ways.

In the beginning, the Indigenous populations helped the first European settlers in the US and at least according to folklore—they celebrated together that first Thanksgiving.

I acknowledge my ignorance in thinking residential schools were something from the distant past, not the 20<sup>th</sup> century. The recognition of the suffering of our Indigenous peoples and bringing the truth to light will help us all. Without truth, there can be no reconciliation, no healing. This is true whether on an individual or national scale. When bad things happen between people, the first reaction is anger, and defensive behaviours. We deny, we obfuscate, we hide. But in order to move forward, we need to acknowledge to ourselves and to others our role in the situation. September 30<sup>th</sup> is about our Indigenous peoples but the lesson of reconciliation through truth applies much more broadly. Our indigenous peoples have a lot of wisdom, I am grateful that they continue to teach us.

Monday Message: October 24, 2022

I attended the American College of Surgeons Meeting last week. I was invited to give the Gibbon Lecture- only the second woman to do so. Previous speakers represented giants in cardiothoracic surgery. Yet only two women made the list. In the USA, women have made great strides in cardiothoracic surgery with the percentage of female trainees rising from 3% to 4% over the past 10 years!

When we reflect on DEI or EDI or IDE or ... We know we are ticking off the boxes on Diversity more or less, but what about Equity or Inclusion?

What is Equity? Equity is the fair treatment of all so that everyone has access to the same opportunities, resources etc. It means eliminating personal, interpersonal, institutional and structural barriers. It doesn't just mean equal opportunity, it means providing support to those who need a leg up to have the opportunity that others have. An easy example is the ramp for a wheelchair.

Inclusion means that everyone is welcomed, respected, supported and has a voice at the table. Inclusion empowers participation. It is not good enough to have a woman on the committee, her voice must be listened to and respected.

Much as we strive for diversity, and equity, I think inclusion is most important. My goal is that all voices are welcome, respected and heard.

*Equity in the Center: Awake to Woke to Work; Annie E. Casey Foundation: Embracing Equity: 7 Steps to Advance and Embed Race Equity and Inclusion Within Your Organization*



Monday Message: October 31, 2022

What a glorious weekend! I hope everyone had a chance to enjoy at least some of the warm sunshine and blue skies. We had friends visiting us from Toronto and they were blown away with our new life.

I feel very fortunate to be here in Halifax. I spoke about gratitude recently. Of course nothing is perfect, there is no perfect job, no perfect location, but on balance ? We are fortunate to be living and working here in Halifax. No question our health care system has problems. No question we are tired and frustrated just trying to do our jobs. But we have electricity, and water and medicines and we are able to treat patients to a top level of standard of care albeit delayed care.

Try to remember that the work you do is valuable and important. Remember that you can only treat one patient at a time- that is the best that you can do and you do it every day.

Monday Message: November 7, 2022

Another glorious weekend! This followed on our fun Department of Surgery Celebrating Our People event on November 3rd. I can honestly say that everyone who attended had a good time. COVID has isolated us from each other. Humans are social beings, connecting with others is good for us. It is restorative. Social events are important. They are not frivolous. They bring us together outside of our work environment for the sole purpose of strengthening our human connection. When we are isolated it is easy to have negative thoughts about others especially as we compete with each other over beds and OR time. Of course not everyone can attend every event but it is my hope that we have more opportunities to get together, to remember what we share, our values and our purpose.

Monday Message: November 14, 2022

November. It is the month I associate with gray skies, long periods of darkness and bone chilling rain.

It is the month we remember those who fought in war on behalf of our country. We are lucky. These wars were fought on foreign soil. Very few of us have actually experienced the horrors of war. We first saw real time images of war in the 60s with the Vietnam war- before most of you were born. Now images of war fill our news daily yet I can't really imagine what it is like to live through it, whether as a soldier or a civilian. In wars long ago, the leaders were on the front line. Now they sit in comfortable chairs in front of computer screens playing video games except with real people safe from the violence. Are there any legitimate reasons for starting wars in the modern era? I don't think so.

We are supposed to be civilized. A civilized people solve differences through communication not bombs.

Monday Message: November 21, 2022

A few months ago, one of our members asked for more updates .

Early in the year, I struck 2 taskforces. The first is a Code of Conduct taskforce with a mandate to develop appropriate outcomes for breaches of code of conduct. The document has been completed and was reviewed by the Executive last week. I hope to share it with all of you in the next few weeks.

The second task force was entitled Career Planning. The initial focus was on end of career transitions but included aspects related to onboarding and start of career. This document is still under review but I anticipate we will be able to share it soon.

I am sure you are all aware that we will begin negotiations with government soon. We have begun to assemble our requests and hope that they will be received favourably. I will endeavour to keep you updated on these important negotiations.

There has been a lot of information about burnout and wellness. It seems everyone has it on their meeting agendas. This past week, my dear friend and Dalhousie General Surgery graduate, killed himself. I was at the Memorial in Calgary on Saturday. None of us saw this coming. Not his friends, not his family. How was this possible? How could someone not have reached out? But he didn't let us in, we didn't know. We have to take care of ourselves and each other. We have to be vulnerable to those closest to us and allow ourselves to reach out and let our loved ones know we are hurting. There is always another option. Sometimes we can't see it but someone else can shine the light on it.

Take care of yourselves

Monday Message: November 28, 2022

On Saturday Nov 26<sup>th</sup>, we held the inaugural meeting of the Surgical Oncology Network.

The meeting was very productive and I am grateful to all who were able to attend.

Dr David Wilson will be the Head of the Network and will represent us at the Provincial Oncology Table.

Our executive includes ( at this point) Drs Mark Walsh, Greg Knapp, Katarina Keiser, Daniel Kagedon, Sean Christie, Marty Corsten, Danny French, Katerina Neumann, John Stein , Lucy Helyer.

We will be reaching out to urology for a representative as well as to neurosurgery for someone to represent CNS tumours. We also want to have representatives from all zones.

Up to 90% of patients with solid tumours see a surgeon at some point in their journey whether for diagnosis, staging or treatment regardless of patient age. Surgeons are also very efficient at getting patients evaluated and staged.

We bring a lot of value to the cancer system. Research indicates that referral to a surgeon saves money and reduces unnecessary or redundant testing.

The new single entry referral system which is planned to start in March 2023 should make it easier for primary care providers to get their patients to us. This will reduce wait 1. Hopefully this will reduce the need for repeat testing and expedite treatment decisions.

For anyone who was not able to attend the meeting but is interested, don't worry ! We will keep you in the loop .

More to come on this important initiative!

Monday Message: December 12, 2022

Even though the worst of COVID seems to have past, we are still dealing with the fallout. Our emergency rooms are overflowing with people who need admission to hospital. Our staff are trying their best to look after patients although they are overwhelmed and tired. We are trying to avoid cancelling surgery but some days we simply don't have enough beds. We are asked weekly how we are doing on the backlog. This seems a ridiculous question when every week we cancel scheduled surgeries. It is frustrating. It is demoralizing. But think of how it feels to be a patient with a problem. Waiting. Not knowing when they will be seen by a surgeon or when their surgery will be scheduled. Think of their primary care provider who knows their patient has a problem but perhaps isn't sure what to do or how to navigate the system.

We can help. By contacting the patient and PCP promptly when the referral is received to confirm receipt. By giving the patient and PCP the date of their appointment. I would also suggest that the surgeon consider seeing the patient as early as possible to allay their anxiety and outline next steps. I know you will need more tests before rendering a final decision on treatment. I know this may mean that you have to see the patient one more time than absolutely necessary. I know it is less efficient for you. But the patient will know that you care, their PCP will be relieved, and it may help you to triage patients more effectively.

Single Entry referral will start in March 2023. The system will do a lot of this for you and your admins but it can't replicate the message you send when you see the patient promptly

Monday Message: December 19, 2022

I arrived at my house in Toronto yesterday. There was a Christmas tree all decorated and flowers to welcome us thanks to our kids! What a lovely surprise!

We put on a fire and sipped some nice wine and relaxed.

It has been a tough year—covid, bed shortages, nursing shortages. It is increasingly difficult for us to deliver care. This takes a toll on all of us and those around us. We all work hard. We all work long hours. Our patients depend on us. Although it is gratifying to be able to help patients, it wears us down. We need time to restore ourselves. Please take some time to care for yourselves over the holidays. You are so important to your patients, to our health care system and to your families. Wishing you restorative relaxing holidays