

Monday Message: February 3, 2025

Last week we had a code silver in the ED. Three staff members were injured one of whom had to go to the OR. Fortunately, that individual is recovering well. The staff in the ED are shaken, traumatized.

The next day there was another event, no one was harmed but staff was threatened. Last year there was the terrible situation of a patient who stabbed himself in the neck and despite surgery ultimately succumbed.

The major effects of these events on our staff are unseen but real.

We had a session last week about mental health in surgeons. Mental illness is common. We are not immune to this. Statistics tell us mental illness affects 1:4 people. Surgeons are resilient, they have grit. They soldier on and do their job. The last thing to be affected when a surgeon is suffering is their job.

We have stressful jobs. We demand a lot of ourselves. Historically we have not paid attention to our own wellness.

So, my message this week is take care of yourselves. Check in on your colleagues. Ask if they are okay. Listen to them. Their tone or body language may tell you more than their words.

gail

Monday Message: February 10, 2025

A bright and cold Monday morning!  
Winter isn't over yet!

#### News from the Department of Surgery

We will be releasing our annual report later this week.

Our DOS exec is reviewing progress on our strategic plan and identifying areas needing attention. I will share our summary with the department once this work is completed.

We have engaged in discussions with our executive leadership team regarding centralized booking. As you know this project rolled out over 2024 starting with urology and the last divisions were brought on board by November. We have used a hybrid model for operationalizing this project. All cases waiting are entered into Novari and we have a centralized waitlist. Patients are grouped according to their urgency and also by their time waiting for surgery. Using the Lucas algorithm (which factors in both of these items), a list of suggested patients for surgery. Surgeons and their admin assistants then review the list and identify which patients to book. A reason for not booking suggested patients is then provided and this goes back to the booking officer. This latter step measures surgeon "compliance" with the Lucas algorithm.

We (and all other zones) report on the number of surgeries completed, the number of patients waiting for surgery, surgeries completed within benchmark wait times (where they exist), and something called the Lucas Gap which is a measure of the number of long waiters as a proportion of all patients waiting.

I am happy to report that we are doing well. Our surgery volumes are up compared to our baseline year (2019) by 15% and increased by 6% over last year. We are meeting benchmark wait times in approximately 60% of cases. Our Lucas gap is 9% (target is 10%).

We have yet to meet our goal of 2500 additional cases, but we have made progress. Achieving this goal required additional funded ORs with nursing and additional support staff, anesthesia and surgeons. There is a Canada wide shortage of anaesthesiologists so this has slowed us down, but Dr Chisholm has been successful in recruiting the needed faculty and we anticipate a full complement of anesthesiologists by the end of the summer. In surgery we were given 11 additional FTE and will have filled these positions by the end of summer. Once we have the needed faculty, we will be able to start working on the 2500 additional case target.

Don't forget to attend the session on Novari- Ocean on Wed at 7 am or 7 pm! We have delayed Grand Rounds until Feb 26<sup>th</sup> so that there is no conflict with this important info session.

Have a great week

gail

Monday Message: February 18, 2025

What a weekend! Starting with the storm on Thursday and the wild weather over Saturday and Sunday leaving us with treacherous walking conditions! We were not alone in our experience of winter- Ontario, Quebec, New Brunswick, PEI and Newfoundland were all in line for the snow. But hey at least we weren't at Minus 30-40C like our prairie friends.

I haven't checked in with our orthopedic colleagues, but I am guessing they may have some waitlists of various fractures!

Myself, I spent the weekend intermittently looking out the window at the weather, reading and flipping a coin with my husband as to who got to walk the dog!

I am sending a number of messages your way and will be collating items from the various meetings I attend on your behalf. Usually, NSH sends out the information in emails, but it is sometimes challenging to pick out the stuff that is most relevant. I will try to do that for you and keep you up to date.

Have a good week

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Monday Message: February 24, 2025

What brought Dr Bernard Burgesson home?

What a terrific story! For any of you who missed it- see below.

As Department Head, I am delighted that Dr Burgesson chose to come home. He could have gone anywhere following his training. He is smart, he is talented, and he is a really nice person. He has great credentials-- medicine at Queen's, ortho residency at Dal and subspecialty training at Harvard. He chose to come home- to Nova Scotia, to Dalhousie. Listen to Dr. Burgesson's own words.

I am struck by his generosity-- his commitment to giving back to his community. He is giving back to his division of orthopedic surgery by bringing back new knowledge and skills. This is so important to keep the division up to date and prevent stagnation. He is giving back to the medical school by being a role model for black students, for young men and also by mentoring them. The value of this cannot be overstated. He is a role model for the greater black community and provides them a voice, an advocate.

Thank you, Dr Burgesson, for coming home! You are a role model for us all.

Have a great week

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