## A Day Away Podcast with Jory Pritchard-Kerr and Dr. Michael Lisi

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Jory Pritchard-Kerr: Welcome to *A Day Away*, where we chat about planning, building, and funding South Georgian Bay's Hospital of Tomorrow. My name is Jory Pritchard-Kerr. I've been the president and CEO of the CGMH Foundation for almost 36 years now. During that time, I've seen a lot of changes in the way we deliver health care and the way in which individuals consume information. I have to say that I'm relatively new to podcasts, and I am going to tell you, that this is the very first time I have hosted a podcast. So, I hope our time together will be interesting and informative.

> A Day Away explores topics centered around CGMH's innovation, collaborative spirit, and the importance of rural medicine. Our hope is that we can inform our community on the impact of your support and how you play such a vital role in the future of healthcare. Today, I'll be speaking with Dr. Michael Lisi about innovations in rural healthcare and what we can look forward to in the development of the new hospital.

CGMH is an 84-bed hospital located in Collingwood, Ontario. We're in the heart of the South Georgian Bay region where we serve more than 73,000 permanent residents and 3.5 million annual visitors to the communities of Wasaga Beach, Collingwood, Clearview, The Blue Mountains, and parts of Grey Highlands.

Dr. Lisi has been a general surgeon at CGMH since 2008 and has served the hospital for more than 10 years as Chief of Staff. In addition to being a skilled and innovative surgeon, Dr. Lisi holds multiple leadership roles with the Royal College of Physicians and Surgeons of Canada, the Ontario Hospital Association, and the College of Physicians and Surgeons of Ontario. He also holds teaching positions at McMaster

University, Queen's University, and the University of Toronto. He is one busy guy. Thank you for joining us today, Dr. Lisi. Dr. Michael Lisi: Thank you so much, Jory. Jory Pritchard-Kerr: So, I'd like to get started by asking you, how possibly, with everything that you do provincially and nationally, you came to Collingwood to practice medicine, and you have stayed here for, you know, over a decade. What is that like knowing that you reach out into the world all the time? Dr. Michael Lisi: Well, you know, this is a great place to live and to bring up your family and your children and have your loved ones here. Community living is such a unique thing that you can go to the grocery store and many people will either cover their faces if they recognize you or come up to say hello to you depending on how comfortable they feel. And it's such a nice feeling to be a part of a community, when you feel ingrained in it, and you feel that you're contributing back. So that's really the reason why I came to a small community. Jory Pritchard-Kerr: That's great. So CGMH is a medium-sized hospital delivering care in a rural environment. What kinds of challenges does that present to you as a general surgeon and as the Chief of Staff? Dr. Michael Lisi: Well, if you look at medicine in rural and smaller communities, the biggest challenge that they face is geography, and the number of services that are provided in centers that are smaller than larger centers where they have the population to support specific services. When we talk about services, we talk about a sub-specialty of services that require a certain amount of population to support them in a local

setting. And so that's why we have regional centers. Centers such as a cancer center or sub-specialty services such as certain surgical services like Neurosurgery, for example. These types of services require a certain population to support them and so they have feeder communities that provide patients to that center to create enough numbers to support a program. One of the challenges of community hospitals, is that you have to be able to deal with what comes in the door, even though you don't have that specific service in your institution. You have to be able to handle the acute emergencies, be able to triage those individuals, and then be able to manage them acutely and get them to where they need to be if that service isn't particularly offered in the institution that you're working in. That's one of the main challenges of community medicine. In addition, depending on its location, the rurality of it and how far they are to some of these centers can also pose a challenge in the dead of winter or in a horrific storm.

Sometimes transferring someone to a facility where they need certain specific acute care aspects can be challenging. You can't take a helicopter during certain storms, and you can't drive an ambulance down the largest winter event that would prohibit roads from being open, etc. So sometimes that poses big challenges. Having said that, there are relationships that we build with these centers, and we are a cog in a wheel of the overall care of patients when they come through our center.

- Jory Pritchard-Kerr: I don't think I'd call you a cog in the wheel. You know what I hear from patients, especially that come into our Emergency Department and are sometimes transferred to other larger hospitals and come back here, they see a difference in the care that we provide here. Is that part of the rural environment?
- Dr. Michael Lisi: Yeah, I think when I say cog in the wheel, I mean the Ontario health system is striving to be a system-wide approach to delivering care and so we are not everything to everyone.

	We do what we do very well, and in that circumstance, that is helping facilitate the movement of an individual to a certain center or a certain care that they require. At the same time, we also provide excellent care in what we do, and we focus on that, so that we can really put our resources and efforts into the high level of quality of care that we provide. Not only that, but many patients that I speak to, and many community members will come up to me and say, you know, it's just that community feel. It's that volunteer that offers that extra blanket. It's that care of a nurse whose parents were nurses, whose parents' parents were nurses. It's that generational aspect that we just add to someone's overall feeling of warmth when they enter our facility.
Jory Pritchard-Kerr:	So, it's kind of like the secret sauce.
Dr. Michael Lisi	Exactly.
Jory Pritchard-Kerr	That you might not find in a larger institution.
Dr. Michael Lisi	Yeah. I'd call it that homemade pie or brownie instead of secret sauce. Maybe that cranberry jelly?
Jory Pritchard-Kerr:	CGMH has been an important part of the teaching of medical learners back to, I think, 1988 was the beginning of the program. You do that on a daily basis. You work a lot with medical learners along with a lot of your colleagues. How does that benefit the patients that we see here at CGMH?
Dr. Michael Lisi:	You know, having learners in an environment is extremely useful for many reasons. First of all, just going back to what was established here. You mentioned the Rural Ontario Medical Program, which was established by one of our local physicians, Dr. Peter Wells. He was able

to establish a program that would facilitate and distribute medical education throughout smaller communities.

We have residents which are trainees that come up to become family physicians. They actually work in our setting because these individuals who learn here are more likely going to work here afterwards and they're exposed to the medicine that's provided in community settings which is different than the medicine that's provided in larger cities.

There's a unique skill set that individuals have to have to be able to practice in these areas, to be able to deliver the care that's required. Not only do the individuals gain value from being here, but the nurses, the physicians, all the interprofessional players that work with them, gain value from them. They bring new ideas. They ask questions. They pose challenges that will then prompt individuals to better themselves and to stay on top of cutting-edge care, so that we can teach the learners but also provide excellent service to our community.

- Jory Pritchard-Kerr: Do you see, just anecdotally, learners that you have come through or other possible family physicians, do you see a lot of those returning to small communities or even coming back here to Collingwood to practice?
- Dr. Michael Lisi: Yes, the Rural Ontario Medical Program is very successful in terms of recruitment for Collingwood General and Marine Hospital. Many of the individuals that have gone through the Rural Ontario Medical Program have decided to practice here. They stay here. They love how medicine is done. They love the people. They love the community. And as a result, they hang their shingle and they are working in the Emergency Department, they've opened up a family practice, they have worked as surgical specialists. They have become ingrained in the community because they came here to learn here, and they just loved it so much they decided to stay.

- Jory Pritchard-Kerr: One thing I know about you, Dr. Lisi, is that when you talk about innovations in medicine, your eyes light up and that sparkle can be seen across the room. We often say that CGMH 'punches above its weight' when it comes to the delivery of care. I know that you have been responsible for bringing a lot of those innovations to CGMH, you know, first of its kind in the province or in Canada. Can you give us some specific examples of some of the innovative programs that we have here?
- Dr. Michael Lisi: Well, we've got a lot of great things happening across all of our institutions, not just in the physician sphere, but also in some of the other spheres.

Most recently, we progressed to the MRAM 6, which is kudos to our teams for implementing some of the electronic medical record standards. Again, less than 12 hospitals in Canada have achieved that certification and it does bring fruit in terms of providing and demonstrating how we utilize technology to enhance the quality of care. So that's one great example that's just very recent.

Dating back to 2013, we were one of 13 in the province to start something called the National Surgical Quality Improvement Program, which is a program that was started first by the American College of Surgery and now has gone province-wide and numerous hospitals are participating in this. This was created to allow surgical groups to track and follow their outcomes and if we track and follow our outcomes, we can improve upon where there are gaps or weaknesses, and it can highlight and intensify the strengths that we provide as well. We were one of 13 in the province to join the NSQIP program.

Most recently, we have been bringing in, on an ongoing basis, technologies like our cutting-edge radiology equipment that's coming, our new MRIs, new CT scans, nuclear medicine equipment, new X-ray devices. In a community our size, we're very fortunate that we have a strong Foundation that helps to be able to provide such excellent technologies you wouldn't find in a community of our size elsewhere. And then most recently, we have brought in cutting-edge endoscopy equipment and are probably one of two hospitals in the province to first have it and use it. We were one of the first to use artificial intelligence devices for detecting certain polyps, which are precursors to colorectal cancer.

We are always on the cutting edge of environmental sustainability. We have some leadership in that area who have a goal of making us one of the more sustainable hospitals in the province. I could go on and on.

Our simulation teaching activities were cutting edge and we're asked to do this throughout the province. We have lots of great physician leadership who steer these activities and supportive administrative team members who take projects on their own as well as support others and are very open to ideas coming forward to them. Our Foundation helps to drive this from a financial perspective as well.

- Jory Pritchard-Kerr: When you think about all that a physician like yourself has to do in a particular day, where do you find the time or the ideas to bring some of these really innovative programs into a hospital, especially one that's fairly small?
- Dr. Michael Lisi: You know, I think if you really love what you do, and most of our healthcare providers do, you can see it in their smiles and faces. You can see it in our satisfaction scores in our institution. Over mid to high 90% of our physicians are proud to work at CGMH. Our interprofessional team players also score highly in their satisfaction and are proud to work at CGMH. When you take pride in your work, you want to do the best that you can. If you have the tools to be able to do that and if you have the resources that can get those things, you want to be the best.

We're all type A individuals and want to have the best of the best. The fruit that comes from that is extremely high-quality care for our patients and for our community.

Jory Pritchard-Kerr: You made note of the role that the Foundation plays through community support in acquiring this equipment. I think it really speaks to the fact that we have a community that is very generous but is also motivated by the forward-thinking and innovative nature of our medical team.

> There are things I remember in the past having to raise money for, certain things I couldn't even explain, but a physician was there to talk about the benefits to the patient and we were able to raise the money for it. I think it's a circular process in that you can demonstrate what this technology is doing and how it's helping patients and people are more motivated to give because 90% of everything that we purchase here at the hospital comes through community support.

Dr. Michael Lisi: Yeah, the community should be very proud of our healthcare team. We are a very dedicated bunch. I see the team members staying, going above and beyond what they do on a day-to-day basis. It's such a remarkable group. I'm very proud of how hard they work and how much creativity and energy they bring into starting new ventures and trying new things.
Working through that PDSA innovation cycle to bring high-quality technologies, methods of working, and how we deal with each other and improve satisfaction for our patients and those that come through the door. All of those things can be captured under that title of innovation. It's not just the latest and greatest gadget, but also how we can improve the quality of lives of our patients, ourselves, and our

Jory Pritchard-Kerr: Now, this is all really exciting stuff and it's happening in an old, cramped, dare I say decrepit building. We're focused on building South

working environments for everyone as well.

Georgian Bay's Hospital of Tomorrow. How do you think the new building is going to affect the way you and your colleagues practice medicine?

Dr. Michael Lisi: I always say the most important thing about a successful engine that we have here at CGMH is the people that run it. It's a good testament that the building is crumbling. There's duct tape holding the floors together. There's no natural light coming in. All of those aspects, they are where they are. We've been managing with that. Even in that setting, we have overcome that and don't even notice. Imagine now if there's light shining in that almost tickles the fancy of the patient and improves the satisfaction as they're sitting there in the room enjoying their meal that's been revolutionized by some of the latest and greatest technologies and menus that we provide here now. Imagine the experience of the family member who can spend time with their loved one in a comfortable setting and be able to provide additional supports and care.

Imagine the staff worker who comes to their shift and enjoys the environment that they're in when they're speaking with their colleagues and dealing with their patients. All of those things are just going to be enhanced. The base of it all is the foundation of the staff and the people that work here. I think it's going to highlight and enhance the innate natural sense of them wanting to be here and taking pride in their work. I think it's just something else for them to be proud of and that's going to really enhance the outcomes that they do on a day-to-day basis.

Jory Pritchard-Kerr: I note to people who are new to the community, don't let the facade of this building scare you away. There are really exciting and wonderful things happening inside the building. Most of all, there's a deep sense of caring which will carry on into the new building. To me, it's giving the appropriate space to care for patients and to learn and to teach. The sky's the limit as far as what we'll be able to achieve in the new building.

- Dr. Michael Lisi: Yeah, I think the more space we'll be able to really do a lot more. I know that's been one of the main cramping aspects for our patients and for the physicians. If we have an increased footprint, we are really going to be able to provide that extra level of comfort for our patients when they come through.
- Jory Pritchard-Kerr: Comfort, privacy, all of that.
- Dr. Michael Lisi: All of that. Most definitely. For sure. Our quality is there. It's just going to enhance some of those other aspects.
- Jory Pritchard-Kerr: If you could say to the community, tell the community what they can do to help ensure we always have excellent healthcare in South Georgian Bay, what would you tell them?
- Dr. Michael Lisi: I would tell them to get involved. Number one is when there are news articles, when there are radio sessions, when there are podcasts like this, take note, take some time, listen, invest yourself into learning what's happening at your hospital. Then the next step is to get involved. You can get involved by volunteering, you can get involved by calling the Foundation and becoming a volunteer there or with your time or with your funds.

I think those are the things that individuals can do to help contribute to the community that they live in, because at one point most likely someone will require the service of our hospital. They will feel that community sense even stronger if they can get involved earlier for sure.

Jory Pritchard-Kerr: Our podcast is called *A Day Away* because we talk about tomorrow a lot around here. As a Foundation, our work is always future planning and forward thinking to ensure we can provide care for the generations to come. Today, our community benefits from the generosity of those that gave before them. Now, we're embarking on our biggest and boldest mission yet. We are steadfast on a mission to build a new South Georgian Bay Hospital, a Hospital of Tomorrow, and to expand healthcare services for our fast-growing community, improving patient safety and privacy, helping to retain and recruit top healthcare professionals, and build on our strength in rural interprofessional education and training. We know that a bright, beautiful tomorrow is always possible because of the care we give today, and hospitals are predicated on brighter tomorrows.

Dr. Lisi, thank you for sitting down with me to chat today about your work and to tell us a bit more about innovation at CGMH. We'd like to end our session with some closing thoughts of what tomorrow means to you. It doesn't have to relate to CGMH, but more what you see for the health of our community overall and the future of South Georgian Bay.

Dr. Michael Lisi: Yeah, I think that's an exciting future. I think we are in for a real treat, frankly. I think we have a lot that our community is going to be able to provide as the substrate for us to make the building blocks, not only of the physical structure but of the learning institution that will be created, the learners that will come through, that will be touched by this and that will then form the next workforce of tomorrow. To the equipment, the technologies, all of the add-ons that will improve not only quality of care but satisfaction for our patients that come through, and pride that our community will get from having a hospital that's going to service all of us. This is something that I'm most looking forward to, is demonstrating what happens here on a day-to-day basis with our people, but in a structure and a facility that's just going to enhance the great activities that exist already today.

Jory Pritchard-Kerr: Thank you. We hope you enjoyed our conversation today.

We are working to build the new hospital that South Georgian Bay needs and deserves. With your help, our new facility will be ready to support all of us when we need it most, when tomorrow comes [Music]