WINTER 2021 Non the second se



PROGRESS REPORT: THE NEW EMERGENCY DEPARTMENT

The Emergency Department is the beating heart of our community

ady Minto Hospital is a small, community hospital with round-the-clock available Emergency care. It's where we go when we're facing anything from a broken bone to a life-threatening health challenge. It's our lifeline.

However, Salt Spring Island's population today is many times what it was when the existing Emergency Room opened, and now the space is too cramped —to protect your privacy when you're a patient there, or for the staff and modern equipment needed in an emergency. With the COVID-19 pandemic, we see the need heightened for infection control and containment of infectious diseases.

The Emergency Department is the beating heart of our community, and its ability to meet the highest standards of care upon which you rely is vital to the future wellness of every island resident. The time has come to build a new Emergency Department.

In this edition of Minto Messenger, you'll learn more about the Capital Regional Hospital District's major funding commitment to the project, get a first peek at the design and gain some insight into the thinking that went into designing it.

Read on....

BY DAVE TAYLOR



CAPITAL REGIONAL HOSPITAL DISTRICT STEPS UP

CRHD COMMITS \$3 MILLION TO SALT SPRING'S NEW EMERGENCY DEPARTMENT

BY DAVE TAYLOR

he Lady Minto Hospital Foundation is delighted to announce that the Capital Regional Hospital District ("CRHD") will fund 30 percent of the capital cost of the hospital's new Emergency Department, up to a cap of \$3,000,000.

This milestone marks a significant step forward for the new Emergency Department. Foundation Chair, Derek Fry, said, "It's a vital piece of the project. The new Emergency Department will cost \$10 million to build, and that's a big chunk of money. The Foundation has \$4 million of that in hand. Having the government via the CRHD commit \$3 million to the project is very powerful symbolically. Hopefully it will encourage others to contribute as well.."

Salt Spring Island CRD Director, Gary Holman is delighted and grateful that the proposal won unanimous approval by the CRD Board. Emergency Department for CRHD support. "I think they pushed the rules a little," Holman said. "Typically, the Hospital District doesn't contribute unless Island Health is also a funding partner."

Holman contends, however, that it's a cost-sharing partnership that make sense. "Is the Lady Minto Hospital Foundation a reliable partner? We answered yes and obviously they agreed," said Holman.

Holman also noted that Salt Spring Islanders collectively contribute, on average, just a shade under \$900 thousand a year to regional health care, so this is a commitment Salt Spring deserves. "Like any regional function, it's a social contract. Everyone contributes to the regional hospital funding part because health facilities are a priority, and Salt Spring Islanders do use, as needed, major facilities in Greater Victoria. But yes, one does and should expect a return on that when a significant health facility on Salt Spring is needed. This is



"I can't think of a more important service for this community than a health emergency facility that not only deals with emergencies but, provides health care for those who don't have doctors or have situations that occur outside of office hours. The Emergency Department is used every day and there's just nothing more important in terms of community infrastructure."

Although Island Health has committed to fully funding the operating costs of the new Lady Minto Emergency Department, the health authority is not contributing to the cost of building it. CRHD has a long history of cost-sharing with Island Health on hospital and health care capital projects in the

how regional service is supposed to work."

Before construction begins, Fry anticipates the next six months will be devoted to getting the design details completed and finding a contractor to build the new Emergency Department. "It's good to see government step up to the plate," he said. "I'm hoping the Capital Campaign we're launching delivers the last piece of this —the other \$3 million." ■



A MESSAGE FROM CAROL BIELY

These are both challenging and exciting times for the Lady Minto Hospital team.

As we move forward with plans for our new Emergency Department, the Foundation Board and Staff are in full planning mode for a capital campaign to raise \$3,000,000. A team is in place, and every aspect of a campaign is being explored. We know that we will have to work closely with the whole community to make this vital project a reality.

Please watch the next Minto Messenger for details. We will make sure that everyone who lives on Salt Spring or loves to visit will have an opportunity to support our wonderful hospital and its staff.

I am proud and excited to be working with an amazing team of people on such an important project during these challenging times.

Stay tuned!

Carol Biely Chair, Campaign Committee Lady Minto Hospital Foundation Board of Directors

Capital Regional District, so Holman added

that the CRD staff recommending the new



BY DEREK FRY



s 2020 draws to a close, I would like to thank the Foundation Directors for another successful year of fundraising and supporting the hospital in such an extraordinary time.

We have all been reminded by the arrival of the COVID pandemic that our health services and all of the doctors, nurses, and staff working day to day are vital to our community. Everything and anything we can do to help is needed and greatly appreciated.

We have a full complement of ten Directors this year, but next September at the AGM, four will retire from the board and we are working in the months ahead to identify replacements. There is a lot for us to do and it's an exciting time to be involved.

The new Emergency Department

progressed well this year although it was delayed for several months by the impact of COVID on Island Health's project activities as resources were understandably switched to pandemic preparedness. The project's Schematic Design is complete and has been updated to conform to COVID best practices. We hope to restart the remaining two design stages in early 2021 and be ready to go out for construction bids in mid-summer.

Once design and construction phases are completed, the new Emergency Department will be fully outfitted and will cover 4500 square feet. The total project will cost \$10 million. The Foundation will soon launch a capital campaign to raise the \$3 million we need to complete the funding for the project. Provided we can reach that major milestone, we could see the doors open on the new space by the end of 2022 or early 2023. ■



HospitalFoundation

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MAKING IT BETTER

DESIGNING THE NEW EMERGENCY DEPARTMENT FOR BETTER PATIENT CARE AND COMFORT

BY DAVE TAYLOR

efore construction can begin, any new health care project must go through a three-step design process. Step one, Schematic Design. The Lady Minto Hospital Foundation ("LMHF") and Island Health is pleased that this phase is now complete. Because it produces a building's design in all but the final details, this is the most important stage of the project.

"Schematic Design is fundamental to the success of the project," explains Richard Brown, Island Health project manager on the new Emergency Department. "The Schematic Design process is where we have numerous meetings with the architects, the clinicians, and everyone involved, and we develop a very detailed design of the building. We position all the rooms, the doorways, the windows, we know where the waiting area is, the corridors, everything. We look at the

One of the challenges involved in designing the new Emergency Department was proximity. Brown explains, "Lady Minto is a very small hospital, and the doctors and nurses are used to working in all departments. A clinician working in the acute wing of Lady Minto will also assist in Emergency. That's a function of proximity. If you look at the existing Emergency Room, it's very cramped, but it's right next door to the acute care unit. When you build a new Emergency Department as essentially a new wing of the hospital, those connections inevitably become more difficult, and the doctor who was only a few feet away from the Emergency Room is now 30, 40, 50 metres away. That's an issue, if not done right, because although the staff are going to be somewhat separated, they're still going to share functions."

Dr. Kesh Smith, the physicians' represen-

"It took us months to get the building to the right size and scale for Lady Minto, and determine the proximity and location of the building on the hospital site. We eventually ended up with the new Emergency Department on the front and, taking a second run at Schematic Design with the architects, we were able to get the building down to the correct size and meet the Foundation budget of a total project cost of \$10 million."

appearance of the building, the materials; we also look at the civil engineering aspect with regard to access routes for staff and patients, parking, ambulances, and other emergency vehicles. All those things come together in the Schematic Design report."

Brown insists that it's crucial to take the time to get Schematic Design right. Making changes later in the design-build process will delay the project and send the price tag skyrocketing. It's at this stage that Brown says the project gets a price tag. "And at that point, the job is set." tative on the project's Joint Working Group, notes that some of his colleagues have worked in rural Emergency Departments where the renewal or expansion wasn't done right.

"Those people were encouraging everyone involved in our project to realize that there could be real challenges, particularly around workflow and safety for patients and staff," Smith recalls. "I think that was an alarm bell at the beginning that got a lot of people concerned, but also piqued their interest in the project, to get involved and make sure it was done in a way that didn't ignore some of



The new Emergency Department will be a 420 square metre (4500 sq. ft.) extension that will double the number of acute and primary care patients who can be treated at one time. In addition, there will be room for mental health and substance use treatment, a room for mixing, dispensing and storing





medications, a dedicated triage desk, a nursing/team care station with sight lines to all assessment and treatment areas, an ambulance bay, decontamination site, accessible washrooms, and expanded patient and family waiting area.

When asked what he's anticipating most about the new space, Smith said, "Number one would be patient privacy, because the space will be bigger with better separation between treatment areas. In our current Emergency Room, where doctors have to have sensitive conversations or ask sensitive questions of people, just don't have the room to keep everyone's privacy intact. Second is that it looks to be really functional. It has more dedicated spaces —things like the trauma bay, for example —and it allows us to have fewer spaces that are multi-purpose."

It's estimated that it will take another six months or so to complete the design details, create the blueprints, and find the contractor, with construction of the new Emergency Department slated to begin later this year. Construction will take approximately fifteen months, and Richard Brown will see it through to the official ribbon cutting.

"This is worthwhile work. It changes people's experiences of the difficult times we're going through if it's done well and done properly. There's satisfaction in doing a project that can certainly make a difference to people's lives. No question."



"LOOK FOR THE HELPERS. BECOME A HELPER."

A STORY OF COMMUNITY RESILIENCE IN THE FACE OF THE PANDEMIC

BY DAVE TAYLOR

n her annual report, which this year focuses on the COVID-19 pandemic, Canada's Chief Public Health Officer, Dr. Teresa Tam, wrote, "In a crisis, it is normal to feel stress, fear, and worry. The pressures and uncertainty of the pandemic can be overwhelming. The distress associated with the pandemic can influence mental health. Long-term stress can increase the risk of poor mental health and other medical issues."

We are social beings, and even though the public health measures put in place in an effort to reduce the spread of the virus have massively disrupted the social fabric of our lives, there is still strength in human connections. Making and maintaining those connections is a lot harder than it used to be. But there are ways.

Exhibit A: Echo Valley.

This is a story about community resilience in the face of the pandemic —a story about how a group of neighbours in the McLennan Drive-Beaver Point Road area took their Emergency Pod and turned it into something much more.

Robert Birch of the Echo Valley Emergency Pod said, "A few years ago, a small wildfire in the area galvanized the neighbourhood to focus on emergency preparedness." He stated that this involved fire and earthquake drills, regular meetings, and neighbourhood "podlucks."

Then COVID came along, and that's when a group of the neighbours came up with the gardening initiative. "We knew we needed to expand the definition of 'emergency' to look at potential disruption in the supply chain as well as mental health issues related to the pandemic," Birch went on. In short order, they had created five food security gardens on three properties.

"We have a tremendous amount of privilege as land stewards," Birch explained. "This was a good opportunity to leverage it into action and become more neighbourly. We had a lot of skillsets in the neighbourhood that people could contribute to the project —people who know food security issues, food preparation, emergency response, long-time growers, big project managers —a cross-section of community-minded people concerned enough to want to support one another."

"The Echo Valley neighbours call it 'growing the roots of our relationships," Birch explained, "It very much recognizes that relationships grow on shared activities and shared resources. We're committed to



food sovereignty and sharing food. We're returning to the principles that pulled us here —the barn-raising approach to living together. There are 32 people in the Pod. Seventeen of us are actively gardening on a weekly basis and another seven are supporting the project through the donation of plant material, food, or seed stock. Not everyone can bend over and put a pitchfork in the ground, but everyone from age 40 to 78 can participate in any way that feels comfortable for them. Every day, neighbours talk to neighbours."

COVID-19 forced the cancellation of this year's Salt Spring Island Fall Fair, but Birch said that the Echo Valley gardening

initiative spawned its own fall fair. "A young dad of a 4-year-old girl built a ramp, an old guy at the end of the road grew extra zucchini, we had zucchini races, we had a socially distanced dance...we're learning how to play together," Birch noted. "Our training has often kept us in isolation. Crisis is bringing us in connection. Capacity building is its own form of therapy. Not a lot of people who move to Salt Spring have had the experience of co-creating

community It's more than growing vegetables, although the vegetables are fantastic!"

Is this just all co-incidence? The happy by-product of a few neighbors deciding it would be a good idea to grow food for the entire Emergency Pod? Not at all. Birch freely admitted that he entered into this from a political framework. "We were four gay men who entered into this as survivors of the AIDS pandemic, and so we know the lifelong consequences of surviving a pandemic —the intensity and the life-changing quality of surviving a pandemic. My agenda, which is not so hidden —and this is why we did it as a research project, that's available to other neighbourhoods —is so that the Pod system on Salt Spring might grows through the process of neighbours finding their own intrinsic model of what connects them."

Children's entertainer Fred Rogers once advised that when something catastrophic happens, one should "always look for the helpers." Robert Birch takes it one-step further: "When you're in crisis, look for the helpers. Become a helper."

To find out more about the Echo Valley Emergency Pod, their gardening initiative and everything that has —if you'll pardon the play on words — "grown" out of that, check out their website: echovalley.ca ■



FACILITIES MANAGEMENT OPERATION

THE UNSUNG HEROES

BY SARAH BRAGG



he COVID-19 pandemic has presented many trials for hospitals large and small, and Lady Minto Hospital continues to face logistical issues because of it. As a result, changes to workspaces and workflow continue to happen rapidly.

Lady Minto is fortunate to have a dedicated team working behind the scenes in Facilities Management Operation. They have worked tirelessly to keep patients and staff safe through

these uncertain times. The team of five continues to respond to the rapid changes and overwhelming number of requests, providing safety solutions to every department in the hospital.

The primary role of Facilities Management is to support a highly functional hospital and promote a safe environment for staff and patients alike. This support includes repair, maintenance, and building improvement and, equally importantly, providing emergency action planning and preparedness.

The Lady Minto team includes electricians, engineers, carpenters, plumbers and all-around problem solvers. They have been charged with change management around the protection of staff and patients as Lady Minto adapts to ever-changing health guidelines. In a conversation several months ago about the early days of COVID, then-Manager Damon Mair said, "We rolled along with the changes and would handle unusual requests on a case by case approach".

"One of the biggest challenges for the department was to ensure there was enough material on hand, to provide a timely solution to staff concerns and to help reduce the overall stress level for everyone in the building by being a calming presence. The greatest contribution we can provide other than keeping all building systems running smoothly, is to be a reliable, trustworthy entity that staff can count on when the uncommon issues pop up and a timely response is needed," Mair continued.

"COVID has caused us to rethink a few of our regular duties, with an eye to our own health and the health of others more now than ever. We have to prioritize certain requests to "most-pressing-need status" that we would otherwise pre-COVID try to handle on a first-come basis. There is also the issue of our supply chain -- we are concerned with either running out of items or whether they are taking a very long time to procure. We have had to find creative stopgap solutions, to get us through until a better plan could be implemented". "From our perspective," said Mair, "all we asked was that the staff be patient with us and understand that everyone in the department truly cares about Lady Minto. This is an excellent team with a strong support group out of Victoria General Hospital and they want to help in the best way they know how."

Since our original interview, Damon Mair has moved to another hospital within Island Health, but his words still ring true. Recently Martin Casey returned to Lady Minto to assume the management role of the Facilities Management Operation. Martin rejoins Rodney Flowers, Matthew Byron, Dion Hackett and David Milutinovic at a time when the hospital faces new challenges due to the winter influenza season. The work is demanding, but the team approaches every request with a caring attitude and a smile.

We want to say thank you to Martin and this group of great people, for their continuous effort to make Lady Minto hospital a safe place for staff and patients. They provide a reliable foundation for the hospital during unusual and trying times. ■



ABOVE Left to right: Martin Casey, David Milutinovic, Matthew Byron, Rodney Flowers & Dion Hackett



Working in a Different Way for a Different Time

BY SARA GOGO, RURAL SITE DIRECTOR, LADY MINTO HOSPITAL



his last year has been like no other. In order to meet the many challenges the pandemic has presented, we here at Lady Minto Hospital ("LMH") have adjusted the ways in which we provide healthcare for the community. Many of you who have visited LMH in the last many months will have experienced some of these changes. We have created new patient pathways and developed processes to ensure our hospital remains a safe place to give and receive care.

During the day, an Ambassador is now on duty at the main entrance of the hospital who is tasked with conducting initial patient screening. If you are coming for regular lab tests, you might see the Ambassador frequently. Health regulations require that the Ambassador must go over the COVID-19 screening questions each time someone enters the hospital. LMH would like to remind everyone to listen carefully and answer each question every time. Because case numbers are climbing in British Columbia, it is important to remember that our community is not immune to this virus. Your thoughtful patience in listening to each question and answering truthfully is necessary for everyone's safety. Up until now, the Ambassador has been working outdoors in a tent, but LMH's facilities maintenance team has now put the finishing touches on an

office that is comfortably located indoors at the main entrance to the hospital where the Ambassador will greet you.

LMH is pleased to let the community know that we are running two emergency departments. In addition to the regular emergency room, we have set up a second emergency department within a sectioned-off area of the current acute care ward. Staff assigned to this section will focus on patients who may have symptoms of COVID-19. While we recognize that the possible symptoms for the virus are many and that we are in cold and flu season, it is with an abundance of caution that we set up this special area to best serve anyone who may be infected. Due to rigorous cleaning protocols, patients being seen here will not be put at higher risk. We feel confident that this separation will ensure also that emergency patients will still receive the urgent care they need without risk of potentially being infected with COVID-19. In other words, no one in need of care should hesitate to come to the hospital.

In addition, LMH now has triage

nurse protocols. After initial screening at the entrance, patients will then see nurses who will conduct health assessments to determine their care needs. They will send patients along the most appropriate pathway to get the care they need. Additionally, we have a new triage area within the emergency room waiting area where patients can discuss the personal details of their visit with a nurse. This room was created to provide a level of privacy that had not previously been possible.

LMH has a Covid-19 testing centre where we are providing tests to community members who have appointments prebooked through the booking line. This centre has been operating in the upper parking lot for several months. By the end of December, we will have two metal buildings erected in the lower parking lot, where a covered, drive-through testing centre will replace our current set up. The public is asked to call1-844-901-8442 to book an appointment. An Island Health representative will call back within hours to schedule a test. Everyone is reminded to have a personal health number (or a child's) available when booking a test and when arriving at the collection site.

As rural site director, I truly cannot say enough about how well and efficiently the staff in every single department at Lady Minto Hospital has risen to the challenges presented by this health crisis. All of us at LMH so appreciate the kindnesses of so many, along with the encouragement we hear from the community. We have some distance to go yet, but we will do so with the continued support, patience, and thoughtful words from the community we serve. ■



[INTERVIEW]

COVID: WHAT WE NOW KNOW

WE'VE LEARNED A LOT THE PANDEMIC BEGAN -INCLUDING PLENTY ABOUT HUMAN NATURE

Q&A WITH DR DEE HOYANO BY DAVE TAYLOR

Dr Dee Hoyano is a public health physician and medical health officer with Island Health. Her main area of work is communicable disease control, which includes outbreak response and control, and immunization. She's also interested in disease prevention efforts. She trained in medicine at the University of Alberta and the University of Calgary before moving to Vancouver Island in 2010.

What are the most important things we now understand about the COVID-19 virus that we didn't know at the beginning of the first wave?

One of the things we didn't understand was how transmissible this virus could be, and the main modes of transmission respiratory spread, and the conditions in which it's more likely to spread —indoor, crowded conditions, places like inside a home.

What we're certainly learning about are effective measures for decreasing spread. There's no one single solution. We need to be taking a multi-sector approach to decreasing transmission washing your hands thoroughly, leaving enough space between you and the next person, wearing a mask in indoor public spaces or outdoors if you can't maintain space, plus certainly staying home when you feel ill. It's also clear that it needs to be an all-of-society response. I absolutely worry when I see these antimasker protests. This isn't an easy time for anyone in decisionmaking power because we do recognize that there's a balance between disease prevention and people's mental health, the education of kids, and so on.

Tremendous strides seem to have been made in record time on vaccine development. Are you excited, cautiously optimistic, or do you have trepidations?

We're really hoping we'll soon have an effective vaccine that we'll be able to use for the general population. In Canada, we have a vigorous licensing process for vaccines, so my concern is not so much about safety but what's involved in a vaccination program of this scale. It will take time for a global supply chain to manufacture enough doses, get it out, and have the human resources to actually administer it to masses of people. We have to be patient and understand it won't be out tomorrow. So, at least for Canada, there will be a process of prioritization so the people who need it most will get it first.

This might be a tricky one for you to tackle. What have we learned about human nature in a pandemic?

That's a very good question. I think about that a lot.

I don't think this is new, necessarily, but I think recognizing the diversity of people's reactions in crisis time —from people who are very anxious and people who are very willing to follow the rules and make sacrifices for others, to other people who need more support to do that. Dr Bonnie Henry's message of being kind has been a really important message. We need to think about this as a societal effort.

We have to be flexible. What works for some doesn't work for others, and it changes over time. What people were receptive to in the very beginning has changed over the months, and we have to adapt to that as well. Part of it is kind of like the serenity prayer —identify the things you can control in your own life and take steps to do that. But don't expend too much of your mental energy on things you can't control.

What do we still need to know, learn, and do?

Well, I think some of the basic hygiene messages are things we need to continue doing because they'll always be important to stay healthy. Wash hands, stay home when sick, give people space. And take this opportunity to think more about our own priorities in life, how to stay healthy, how to live a balanced life. It's interesting to watch how people have adapted.

One of the things that's been highlighted for me is the importance of community health services in this pandemic, and how much help is needed. The issue of food security for families with school-aged children was really highlighted when the schools were closed, for instance. I think it's shone a light on the inequities that exist.



Local Artist Brings Life to Lady Minto Hospital Birthing Room



ast February, local artist Tessa Ruttan volunteered her talents to add life to the walls of the birthing room at Lady Minto Hospital. The mural project began with an aim to improve the in-hospital birthing experience for local perinatal families.

Art has the potential to transform spaces and contribute to more positive birth experiences, for those who may be reluctant to labour in a hospital setting. The mural was inspired initially by a vision from Erin Price, our local midwife. It continued to evolve while Tessa and local nurse and birth advocate, Laura Harvey hiked amongst local cedar and arbutus trees.

Her work, inspired by the island's arbutus trees, is reminiscent of

The tree interweaves themes of DNA and spirituality

a 'tree of life' present in many aspects of birth. The tree interweaves themes of DNA and spirituality into a beautiful mural that embraces the space above and around the birthing tub.

Lady Minto Hospital Foundation was happy to support this beautiful work, by providing Tessa with an honorarium as a 'thank you' for making this contribution to the Salt Spring Island birthing community.

The mural remains a source of comfort and inspiration to perinatal families during their birthing experience. Our thanks go to Laurel Harvey the project co-ordinator, Sara Gogo, the Facilities Maintenance team, and most of all Tessa Ruttan for bringing this incredible vision to life.



24TH ANNUAL Phantom Ball

we have a WINNER!

Thank you to everyone who supported Phantom Ball 2020 —a ball we have held for 24 years that nobody has attended.

Your support has helped us fund the purchase of necessary equipment, the Acute and Extended Care Units and vital health related programs. We are also very proud to support continuing education opportunities for the team at Lady Minto through your generosity.

On November 16th Ann & Bruce McPhee winners of Phantom Ball 2019, met at the front of the hospital with Foundation Board members to draw the winner of Phantom Ball 2020.

WE ARE HAPPY TO CONGRATULATE **REGAN HUNT** OUR 2020 PHANTOM BALL WINNER!

We hope Regan will discover the perfect balance of relaxation and adventure, and create memories of a lifetime at Whistler's landmark ski-in ski-out hotel and BC golf resort, Fairmont Chateau Whistler.

Regan, congratulations from everyone at Lady Minto Hospital Foundation and we wish you a wonderful Whistler vacation! \blacksquare

MIDDLE Left to right: Carol Biely, Sara Gogo, Ann McPhee, Bruce McPhee, Karen Davies, Dave Taylor & Humberto Martinho

BOTTOM Regan Hunt

24TH ANNUAL PHANTOM BALL







A NEW MANAGER JOINS COMMUNITY HEALTH SERVICES AND EXTENDED CARE UNIT

BY SARAH BRAGG



his past July, **Matt Martin** joined the Lady Minto Hospital team to manage the Extended Care Unit and Community Health Services. Matt and his family moved to Salt Spring from Mt. Waddington, BC, where he spent 5 years working in Community Home Care. Matt and his wife Lani have just welcomed their third child Neve Noelle to the world, and are excited to put down roots on Salt Spring..

Matt is a registered nurse who brings a wealth of management experience to Extended Care and Community Home Care. He is already a tremendous resource for both teams as they care for our most at-risk populations.

I spoke with Matt about his role and inevitably, the subject turned to COVID-19 and the affect it has had on both the Extended Care Unit and Home Care area. Both teams work with the island's most at-risk population, which Matt conceded has made everyone's stress levels go up during the pandemic.

He talked about how safety and concerns about isolation remain a high priority and a challenge for the staff. The Extended Care Unit limits each resident to one dedicated visitor who is screened before each visit to ensure the safety of residents and staff. In addition, all regularly scheduled ECU outings are cancelled, so the need for safe activities on the unit becomes even more important. The residents feel shut in and isolated, and safe interaction of some sort is key to their emotional and physical well-being.

In the absence of family and friends, the staff provide a sense of community and companionship for ECU residents. Activity Coordinator Katie Strom said, "We have been keeping busy for sure! The residents really enjoy exercising their grey matter, so we do at least one crossword a week. We have also been playing group Trivial Pursuit, Question Quest, Categories and Jeopardy. Trying to stay well-rounded in the activities, we have Music Mondays, which usually involve a singalong as well as one of our residents playing her keyboard for us." "The residents also have Tai Chi on Mondays led by our rehab assistant, Roy, and he does an exercise class on Wednesdays and Fridays. We've been having Thursday movie matinees with popcorn and Shirley Temples, and we are lucky to have a volunteer come in on the weekends to do Arts and Crafts with the residents."

It has definitely been a challenging time, but the staff and volunteers have been able to maintain an active and fun environment for the ECU residents, all while maintaining their health and safety.

Community Home Care helps people maintain or improve their health status and quality of life in their home, assists clients to maintain their independence as long as possible, supports families coping with care needs, evaluates and assists people after surgery or hospitalization, and provides rehabilitation or palliative care. At a time when family members and friends cannot visit, the team is a trusted source of caring and companionship when it is needed most.

We all know people on island who live alone and now find themselves socially distanced from family and friends. There are things we can do to help people who are isolated and at risk. Check in, call or video chat with your neighbour who is alone. Find out if they need a hand with their groceries or just someone to talk to. Become that person for them. Little gestures can make a huge difference for people in need, especially now.

Before our interview finished, I asked Matt what his key message would be for everyone on Salt Spring. He talked about the difference it would make if we all follow Ministry of Health guidelines. "If we all practise recommended mask wearing, good hand hygiene and social distancing, we can keep the vulnerable people in our community safe this winter. By taking these safeguards seriously, we will ensure the safety of all islanders through COVID-19 and the upcoming influenza season."

Lady Minto and the community are so lucky to have Matt and his amazing teams in Extended Care and Home Care, to keep our loved ones safe and well cared for.



Maureen Gix, Sharon Doobenen, Tracey Cornwall, Jan Hartwig, Emilie Crist



Yes! I would like to make a donation to the Lady Minto Hospital Foundation

You choose how your gift helps the hospital by directing your contribution to one of the following Funds or Endowment... Enclosed is my tax deductible gift of \$_____

□ Annual Fund □ New Emergency Department

MEMORIAL GIFTS are a wonderful way to remember loved ones, and to share gifts that truly make a difference for patients and residents. Please include the memorial name and the name, address and relationship of the person you wish to receive acknowledgement of your gift.

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Name on card:(please print)	
Thank you for helping us to ensure that we continue to have excellent health care on the Island. Tax receipts are issued for all Itisthe policy of the Foundation, should funds bereceived in excess of the cost of specific equipment items, programs items of equipment, programs or capital projects on the Lady Minto Hospital's priority list.	

This form can be mailed to the Lady Minto Hospital Foundation 135 Crofton Road, Salt Spring Island, B.C. V8K 1T1 or faxed to 250-538-4870

Lady Minto Hospital Foundation 135 Crofton Road Salt Spring Island B.C. V8K 1T1

