

# Canada's Virtual Forum on Patient Safety and Quality Improvement

## Ask. Listen. Talk.

October 31 to November 4, 2011

### PROGRAM

PST Pacific Standard Time	MST Mountain Standard Time	CST Central Standard Time	EST Eastern Standard Time	AST Atlantic Standard Time	NST Newfoundland Standard Time
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Forum Moderators:

*Chris Hayes, Medical Director, Quality & Patient Safety, St. Michael's Hospital*  
*Kaaren Neufeld, Chief Quality Officer, Winnipeg Regional Health Authority*

### MONDAY, OCTOBER 31, 2011

#### Patient Safety: What does it mean? What does it take?

0900 PST	1000 MST	1100 CST	1200 EST	1300 AST	1330 NST
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#### Opening remarks

*Micheline Ste-Marie, Board Member, Canadian Patient Safety Institute, Associate Director of Professional Services, Montreal Children's Hospital of the McGill University Health Centre*

*Hugh MacLeod, Chief Executive Officer, Canadian Patient Safety Institute*

0920 PST	1020 MST	1120 CST	1220 EST	1320 AST	1350 NST
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#### The patient's narrative

*Maryann Murray, Patients for Patient Safety Canada*

In these interviews, we have invited members of Patients for Patient Safety Canada to join us to share their personal experiences with Canada. By hearing their stories, we hope to learn from their interactions with the healthcare system, and be reminded that the priority in all initiatives must come back to the Patient.

0930 PST	1030 MST	1130 CST	1230 EST	1330 AST	1400 NST
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#### What is patient safety really? (It's not what it used to be)

*Martin Hatlie, President, Partnership for Patient Safety*

In this presentation, Martin Hatlie will review the history of the patient safety movement with the objectives of defining what patient safety is and describing a useful, overarching model for how it works. We define patient safety as a discipline in the healthcare professions that applies safety science and quality improvement methods toward the goal of achieving a trustworthy system of healthcare delivery. Our model identifies four domains of patient safety (recipients of care, providers, therapeutics, and methods) and the elements that fall within the domains. Eleven of these elements are described in this session.

Monday, October 31, 2011 continued

1020 PST	1120 MST	1220 CST	1320 EST	1420 AST	1450 NST
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### **Patient Safety Classification**

*Erin Pollock, Project Manager, Canadian Patient Safety Institute*

1030 PST	1130 MST	1230 CST	1330 EST	1430 AST	1500 NST
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### **Senior Executive Leadership: What does it take?**

*Chris Power, President and Chief Executive Officer, Capital District Health Authority*

*Vickie Kaminski, President and Chief Executive Officer, Eastern Health*

*Robert Howard, President and Chief Executive Officer, St. Michael's Hospital*

*Rbeta Fanizza, Senior Vice President, Saint Elizabeth Health Care*

In this session, senior leaders from across Canada will discuss their patient safety experiences and journeys, and the challenges they have faced in their organizations.

They will be asked to answer the following three questions:

1. If you had a magic wand – what is one thing you would do to improve patient safety?
2. What is the biggest hurdle in patient safety?
3. What is your most significant learning in patient safety?

1200 PST	1300 MST	1400 CST	1500 EST	1600 AST	1630 NST
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### **CPSI demo: Patient Safety Education Program**

*Kate Wilkinson, Director, Quality and Patient Safety, Bridgepoint Health*

1210 PST	1310 MST	1410 CST	1510 EST	1610 AST	1640 NST
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### **Patient safety culture and governance (en français)**

*Micheline Ste-Marie, Associate Director of Professional Services Montreal Children's Hospital of the McGill University Health Centre*

Micheline Ste-Marie will speak to the strategies for governance to support an organization's patient safety culture. By outlining the factors involved, and the tools for success, she will look at how the best partnerships can be formed to promote patient safety within an organization.

1300 PST	1400 MST	1500 CST	1600 EST	1700 AST	1730 NST
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### **Close of day**

## TUESDAY, NOVEMBER 1, 2011

### Engagement: Patients, families and the public

0900 PST	1000 MST	1100 CST	1200 EST	1300 AST	1330 NST
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#### The patient's narrative

*Donna Davis, Patients for Patient Safety Canada*

In these interviews, we have invited members of Patients for Patient Safety Canada to join us, to share their personal experiences with Canada. By hearing their stories, we hope to learn from their interactions with the healthcare system, and be reminded that the priority in all initiatives must come back to the Patient.

0910 PST	1010 MST	1110 CST	1210 EST	1310 AST	1340 NST
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#### Truth talk: We have a duty to the patient

*Michael L. Millenson, President, Health Quality Advisors LLC*

Michael L. Millenson will review the history of patient safety movement and the rise of patient empowerment, based on an in-depth review of the medical literature and contemporaneous documents, and will speak to the responsibility that clinicians owe to patients. In doing so, he will speak to the reality of patient vulnerability that still accompanies empowerment and bring us back to truth: it is the healthcare community that bears the responsibility for safe care, not the patient.

1000 PST	1100 MST	1200 CST	1300 EST	1400 AST	1430 NST
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#### Disclosure: What's working, what's not.

Facilitator: *Rick Singleton, Professor, Pastoral Studies, Queen's College, Memorial University of Newfoundland; Director, Pastoral Care and Ethics, Eastern Health*

We've worked on various aspects of disclosure in the last ten years, but where have we come? This panel will provide their thoughts on disclosure in the last 10 years, with a focus on the expectations that we have created, why organizations are still not disclosing, and whether it should be disclosure at all costs in all situations.

*Dale Nixon, Member of Patients for Patient Safety Canada, Quality and Clinical Safety Leader, Eastern Health, Newfoundland and Labrador*

*Bruce MacLeod, Medical Lead Safety South, Alberta Health Services*

*Carolyn Philip, Quality Improvement/Patient Safety Consultant, Fraser Health Authority*

*Catherine Gaulton, Vice President, Performance Excellence and General Counsel, Capital District Health Authority*

1130 PST	1230 MST	1330 CST	1430 EST	1530 AST	1600 NST
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#### Manitoba Institute for Patient Safety Self-Advocacy for Everyone (SAFE) Toolkit

*Laurie Thompson, Executive Director, Manitoba Institute for Patient Safety*

*Dawn White, Consultant, Manitoba Institute for Patient Safety*

Would you know how to help patients, families and the public become more involved in their own healthcare? Would you be able to direct people to resources that tell them about such topics as their patient rights, how to choose a patient advocate, and how to talk with their doctor? The SAFE (Self-Advocacy For Everyone) Toolkit contains basic information, tips, tools and resources on a variety of patient safety topics. This session will examine this web-based resource and how it can be used either by individual patients and families, or in group settings based on the kit's comprehensive Leader's Guide.

*Tuesday, November 1, 2011 continued*

1200 PST	1300 MST	1400 CST	1500 EST	1600 AST	1630 NST
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**CPSI demo: Disclosure guidelines**

*Diane Aubin, Project Manager, Canadian Patient Safety Institute*

1210 PST	1310 MST	1410 CST	1510 EST	1610 AST	1640 NST
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**Quality Indicators on the Web – Measurement, accountability and transparency to improvement patient safety (en français)**

*Markirit Armutlu, Quality Program Coordinator, Jewish General Hospital*

Patients have the right to know about the performance of the hospital in which they place their trust. This information is needed especially now that patients are taking a more active role in the course of prevention, testing, treatment and care. For this reason, the Jewish General Hospital (Montreal, Canada) has embarked on a program – the first of its kind in Quebec – to give public exposure to information about the quality and safety of the hospital's activities in certain areas. These data, providing timely, clear and understandable information, are known as Quality Indicators, and are being posted on the JGH website. In this way, healthcare consumers will have a better understanding of how much is being done on their behalf by clinical teams to improve safety and quality of care at the JGH.

1300 PST	1400 MST	1500 CST	1600 EST	1700 AST	1730 NST
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**Close of day**

## WEDNESDAY, NOVEMBER 2, 2011

### Engaging hearts and minds in medication safety

0900 PST	1000 MST	1100 CST	1200 EST	1300 AST	1330 NST
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#### The patient's narrative

*Theresa Sabo, Patients for Patient Safety Canada*

In these interviews, we have invited members of Patients for Patient Safety Canada to join us to share their personal experiences with Canada. By hearing their stories, we hope to learn from their interactions with the healthcare system, and be reminded that the priority in all initiatives must come back to the Patient.

0910 PST	1010 MST	1110 CST	1210 EST	1310 AST	1340 NST
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#### A national commitment to medication safety

*Marg Colquhoun, Project Leader and Medication Reconciliation Co-lead Canada, Institute for Safe Medication Practices Canada*

*Marie Owen, Medication Reconciliation Co-lead Canada, Canadian Patient Safety Institute*

In this session, Marg Colquhoun and Marie Owen will outline the latest updates in Medication Reconciliation in Canada to open the day.

0930 PST	1030 MST	1130 CST	1230 EST	1330 AST	1400 NST
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#### The patient's narrative

*Raeline McGrath, Patients for Patient Safety Canada*

0940 PST	1040 MST	1140 CST	1240 EST	1340 AST	1410 NST
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#### Canadian Medication Incident Reporting and Prevention System: Working together to prevent harmful medication incidents

*Bonnie Salsman, Project Lead, SafeMedicationUse.ca, Institute for Safe Medication Practices, Canada*

*Margaret Zimmerman, Manager, Patient Safety, Health Canada*

This presentation will provide information on the Canadian Medication Incident Reporting and Prevention System (also referred to as CMIRPS), a collaborative program to reduce and prevent harmful medication incidents in Canada. Using a faux scenario, the presenters will illustrate how Health Canada, the Canadian Institute for Health Information, the Institute for Safe Medication Practices Canada and the Canadian Patient Safety Institute are working together to enhance the safety of Canada's medication use system. Real life examples of successful CMIRPS initiatives will also illustrate the importance of stakeholder participation in the reporting of events.

1010 PST	1110 MST	1210 CST	1310 EST	1410 AST	1440 NST
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#### Medication safety: The latest in medication reconciliation and pediatrics

CAPHC and ISMP Canada Consensus Guidelines Pediatric Opioid Project

*Elaine Wong, Medication Safety/PICU Pharmacist, Children's Hospital of Eastern Ontario (CHEO)*

This session will introduce National Consensus Guidelines to promote the safe use of opioids in pediatrics. These guidelines are divided into Community and Tertiary Guidelines and encompass a variety of strategies including the choice of drug and concentrations, standardized concentrations for infusions, standard methods of prescribing and preparation, storage and labelling.

Wednesday, November 2, 2011 continued

### Right Rx: A cluster-randomized trial of medication reconciliation at discharge from two academic health centres

*Allen Huang, Associate Professor of Medicine, McGill University*

Medication reconciliation is now a required organizational practice for Canadian and US hospital accreditation. Despite the evidence showing that pieces of the adverse drug events puzzle can be solved by applying this solution it remains unclear that a blanket approach will succeed. Implementation of an enterprise-wide solution applied to all hospitalized patients is exceedingly complex and costly. This presentation will highlight the evidence and challenges surrounding the medication reconciliation process and describe a research trial currently being launched to answer many of these questions.

### Medication reconciliation – keep it simple and safe – success in a small hospital

*Lynn Hall, Vice President Clinical Services/Chief Nursing Officer/ Professional Practice Leader, Winchester District Memorial Hospital*

Lynn Hall will discuss how successful medication reconciliation at a community hospital resulted in improved safety, improved outcomes (decreased readmission rates and length of stay) and improved patient and staff satisfaction. Key ingredients are senior leadership support (strategic priority), external stakeholder engagement, interdisciplinary approach, being creative and keeping it simple. As a result of our efforts and lessons learned, the Winchester District Memorial Hospital takes pride in 100% medication reconciliation compliance.

### Medication safety: The latest in medication reconciliation and paediatrics – leadership perspective

*Deb Gordon, Senior Vice President, Chief Professions Officer, and Chief Nursing Officer, Alberta Health Services*

*Gail Hufty, Vice President, Pharmacy Services, Alberta Health Services*

This presentation will review the development of the medication reconciliation model, formation of a provincial team and coordinating committee and the strategies used to develop a comprehensive plan for medication reconciliation across the province. Challenges and success will also be shared.

1200 PST	1300 MST	1400 CST	1500 EST	1600 AST	1630 NST
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### CPSI demo: Improving Care Search Centre / Global Patient Safety Alerts

*Cecilia Bloxom, Director of Communications, Canadian Patient Safety Institute*

*Erin Pollock, Project Manager, Canadian Patient Safety Institute*

1210 PST	1310 MST	1410 CST	1510 EST	1610 AST	1640 NST
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### Bringing a health region on board with medication reconciliation (en français)

*Marco Blanchet, coordonnateur à la direction générale adjointe et à la sécurité civile, Mission santé, Agence de la santé et des services sociaux des Laurentides*

*Myriam Dion, Chargée de projet régional – Campagne EAPSSS (volet BCM-SLD); Agence de la santé et des services sociaux des Laurentides*

In this session, Marco Blanchet and Myriam Dion will provide an overview of the work done in the Laurentian region in Quebec in the implementation of the medication reconciliation in long term care. They will, among other things, outline the tools created and highlight the partnership between the healthcare establishments and the Quebec Campaign: *Together, let's improve healthcare safety!* that generated such a success across the region.

1300 PST	1400 MST	1500 CST	1600 EST	1700 AST	1730 NST
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### Close of day

## THURSDAY, NOVEMBER 3, 2011

### The culture and environment of work and care

0900 PST	1000 MST	1100 CST	1200 EST	1300 AST	1330 NST
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#### The patient's narrative

*Sabina Robin, Patients for Patient Safety Canada*

In these interviews, we have invited members of Patients for Patient Safety Canada to join us to share their personal experiences with Canada. By hearing their stories, we hope to learn from their interactions with the healthcare system, and be reminded that the priority in all initiatives must come back to the Patient.

0910 PST	1010 MST	1110 CST	1210 EST	1310 AST	1340 NST
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#### Super bugs – super heroes

*Michael Gardam, Clinical Studies Resource Centre Member, University Health Network*

Michael Gardam will introduce a complexity science approach to patient safety. He will show and discuss the results from a CPSI-funded study of using positive deviance to decrease healthcare associated infections.

#### Changing the mindset on infection control

*Martin Wale, Executive Medical Director, Vancouver Island Health Authority*

Up until 2010, Vancouver Island Health Authority experienced a series of long, intractable outbreaks both of Clostridium Difficile and Vancomycin Resistant Enterococci. We broke this cycle by changing from a rules-based approach to infection prevention to a risk-based approach. This strategic approach, which has been operating for well over a year now, has achieved:

- Sustainable 60% reduction in patients on isolation precautions
- Infection prevention-derived improvements in access and patient flow
- A corresponding (but difficult to measure) major enhancement in patient safety
- Sustainable savings in excess of \$6.5 million per annum across the Health Authority

The presentation will outline the improvement processes we used to achieve this.

#### Valued employees value patients

*Mark Wells, Senior Communications Advisor, Alberta Union of Provincial Employees*

As part of AUPE's ongoing effort to engage and educate union members and the public about key issues, the union released an online documentary titled "Superbugs" in July 2011. "Superbugs" follows AUPE member Shirley as she does her rounds cleaning isolation rooms at the Calgary Foothills Hospital, and uses real life examples of patients dealing with "superbugs" to explain the terrible impact that nosocomial infections have on the healthcare system. Mark Wells will present a few short clips from the video to help illustrate the importance of having dedicated in-house cleaning staff engaged in infection prevention and control work at hospitals and discuss how employee stability and engagement translate into better patient outcomes.

1010 PST	1110 MST	1210 CST	1310 EST	1410 AST	1440 NST
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#### Creating a just and trusting culture

*Mark Fleming, Associate Professor, Department of Psychology, Saint Mary's University*

In this session, Mark Fleming will look at Patient Safety Culture, to review the aspects that will promote success in an organization and what is required to bring healthcare teams on board.

Thursday, November 3, 2011 continued

1045 PST	1145 MST	1245 CST	1345 EST	1445 AST	1515 NST
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### **CPSI demo: Safer healthcare now!**

*Denise Sorel, Project Manager, Canadian Patient Safety Institute*

1055 PST	1155 MST	1255 CST	1355 EST	1455 AST	1525 NST
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### **Hand hygiene in healthcare: Planned, motivated, and habitual (en français)**

*Denny Laporta, Intensiviste, Directeur médical du Service d'inhalothérapie Hôpital Général Juif, Université McGill*

Denny Laporta will look at the facts about hand hygiene, and the challenges to implement campaigns and make them consistent in healthcare settings. He will then outline recommendations for groups to empower their staff, engage their leadership, measure, and provide feedback regarding these initiatives.

1145 PST	1245 MST	1345 CST	1445 EST	1545 AST	1615 NST
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### **Environment of work and care**

Patient safety in primary care

*Patsy Smith, Family Practice Nurse, Hatchet Lake Medical Centre; Healthcare Consultant, PLS Consulting Inc.*

The Canadian Patient Safety Institute and BC Patient Safety & Quality Council released a document in 2010 on patient safety in Primary Care in Canada. In this report, issues, challenges and strategies specific to the primary care context were presented. This has provided an excellent foundation on which to understand and advance the patient safety agenda. This presentation will further explore safety issues and concerns while considering the unique circumstances of diverse primary care environments. Potential solutions and strategies will be discussed with specific attention to the impact of expanding collaborative teams in primary care.

Fatigue and patient safety

*Lisa Ashley, Nurse Advisor, Canadian Nurses Association*

This presentation will address findings from research conducted and the prevailing norms related to fatigue and patient safety across Canada. While the literature has addressed fatigue in healthcare, largely from a medical resident point of view, a clear consistent definition of healthcare provider fatigue related to patient safety across Canada is lacking. The issue of fatigue must be incorporated into the national patient safety agenda as a critical factor impacting on safe patient care and the strategy of creating cultures of safety include preventing and managing fatigue as a key component. Recommended solutions will assist in bringing resolution to the issue of fatigue which is of crucial importance to Canada's healthcare professionals and to the public expecting and deserving safe, competent care from the health professional team.

QWQHC- Quality Worklife Quality Healthcare: Where to from here?

*Pamela Fralick, Chair, Quality Worklife Quality Healthcare Collaborative, President and Chief Executive Officer, Canadian Healthcare Association*

Over the past six years, the Quality Worklife Quality Healthcare (QWQHC) Collaborative has devoted itself to addressing the challenges of healthy workplaces within our health system. Guided by the mantra "it is unacceptable to work in, receive care in, govern, manage and fund unhealthy healthcare workplaces", QWQHC has created a national strategy for all to use, established a pan-Canadian network of Charter Signatories to the principles of the Strategy, held ever-successful annual Summits, contributed to the development of accreditation standards for healthy workplaces – and much more. The partnership of 12 national bodies is currently planning a living legacy for this initiative, as it prepares to evolve into a next phase. This session will chart the successes of the Collaborative, the continuing need for a focus on healthy health workplaces, and provide a preview of what is to come.

1300 PST	1400 MST	1500 CST	1600 EST	1700 AST	1730 NST
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**Close of day**

**FRIDAY, NOVEMBER 4, 2011**

**Ask. Listen. Talk.**

0900 PST	1000 MST	1100 CST	1200 EST	1300 AST	1330 NST
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### **The patient's narrative**

*Tania Maron, Patients for Patient Safety Canada*

In these interviews, we have invited members of Patients for Patient Safety Canada to join us, to share their personal experiences with Canada. By hearing their stories, we hope to learn from their interactions with the healthcare system, and be reminded that the priority in all initiatives must come back to the Patient.

0910 PST	1010 MST	1110 CST	1210 EST	1310 AST	1340 NST
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### **Patient safety: It's not just acute care**

The Canadian Patient Safety Institute has seen great successes in research, specifically in areas outside of Acute Care. Diane Doran and Chris Perlman will address two of these areas, by outlining the recent studies completed in suicide risk assessment and home care.

#### **Suicide Risk Assessment**

*Chris Perlman, Associate Director, Homewood Research Institute*

Chris Perlman will introduce the issue of suicide as a key patient safety issue and review the need to incorporate a high quality suicide risk assessment. The presentation will then review the development of a suicide risk assessment resource guide for Canadian healthcare organizations. The initiative to develop this guide was conceived and supported by the Ontario Hospital Association and Canadian Patient Safety Institute. The presentation will review the key processes and principles for suicide risk assessment, provide an overview of risk assessment tools and their use, and discuss a framework for ongoing suicide risk assessment and quality monitoring.

#### **Safety at home – The Pan Canadian Home Care Safety Study**

*Diane Doran, Professor in Patient Safety, Lawrence S. Bloomberg Faculty of Nursing, University of Toronto*

While problems of patient safety are well documented in acute care settings, only limited data exist about patient safety issues among home care (HC) clients. The context in which care is provided is vastly different from the acute care setting, which necessitates unique solutions specific to HC settings. This presentation will discuss what is known about home care safety from the literature and will describe the Pan Canadian Home Care Study that is currently in progress.

1000 PST	1100 MST	1200 CST	1300 EST	1400 AST	1430 NST
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### **CPSI demo: Canadian Patient Safety Week – thank you!**

#### **Canadian hand hygiene video announcement**

*Hugh MacLeod, Chief Executive Officer, Canadian Patient Safety Institute*

1010 PST	1110 MST	1210 CST	1310 EST	1410 AST	1440 NST
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### **Patient safety related research advances and available funding support (en français)**

*Regis Blais, Professeur titulaire, Directeur, Université de Montréal*

Given what we know from past research and studies currently underway, Regis Blais will identify knowledge gaps in patient safety. Key areas and opportunities for future research will be proposed.

Friday, November 4, 2011 continued

1100 PST	1200 MST	1300 CST	1400 EST	1500 AST	1530 NST
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### Health Quality Councils: Funding and research priorities

Facilitator: *David Williams, President & Chief Executive Officer, Southlake Regional Health Centre*

In this session, we will ask leaders of Canadian Health Quality Councils to respond to the following two questions:

1. If you were given funding for one thing, what would be your priority?
2. What should be the next big piece of research in patient safety?

From these responses, we will look at priorities across the country, and where patient safety and quality are moving as we look to 2012 and beyond.

*Doug Cochrane, Chair and Provincial Patient Safety and Quality Officer, British Columbia Patient Safety and Quality Council*

*Stéphane Robichaud, Chief Executive Officer, New Brunswick Health Council*

1240 PST	1340 MST	1440 CST	1540 EST	1640 AST	1710 NST
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### Forum closing and summation

*Chris Hayes, Medical Director, Quality & Patient Safety, St. Michael's Hospital*

*Hugh MacLeod, Chief Executive Officer, Canadian Patient Safety Institute*

1300 PST	1400 MST	1500 CST	1600 EST	1700 AST	1730 NST
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### Close of day

## PROGRAM ADVISORY COMMITTEE

**Hugh MacLeod**

*Chief Executive Officer, Canadian Patient Safety Institute*

**Cecilia Bloxom**

*Director of Communications, Canadian Patient Safety Institute*

**Markirit Armutlu**

*Quality and Risk Management Coordinator, Jewish General Hospital*

**John Cowell**

*Chief Executive Officer, Health Quality Council of Alberta*

**Donna Davis**

*Co-Chair, Patients for Patient Safety Canada*

**Linda Emanuel**

*Director, Buehler Center on Aging, Health & Society*

**Theresa Fillatre**

*Atlantic Node Leader, Safer Healthcare Now!*

**Pamela Fralick**

*President and Chief Executive Officer, Canadian Healthcare Association*

**Norma Freeman**

*Nurse Consultant, Canadian Nurses Association*

**Micheline Mancuso**

*Executive Director, Performance Measurement, New Brunswick Health Council*

**Wendy Nicklin**

*President and Chief Executive Officer, Accreditation Canada*

**Marguerite Rowe**

*Vancouver Island Health Authority*

**Laurie Thompson**

*Executive Director, Manitoba Institute for Patient Safety*

**Todd Watkins**

*Director of the Office of Professional Services, Canadian Medical Association*

**Debra-Jane Wright**

*Director, Quality Improvement, Saskatchewan Health Quality Council*