

GIVING LIVES BACK

Fall 2023



West Park patient Jen Schuringa prepares to pedal the Camino de Santiago
See page 6

In this issue:

Q & A with Anne-Marie Malek
Improving balance with COPD treatment
Putting the finishing touches on new hospital
Innovative new procedure changes amputee's life
The magic of rehabilitation
Foundation events



West Park
FOUNDATION

Get your life back.



Creating the World's Leading Rehabilitation Centre:

Q & A with Anne-Marie Malek

In July, the Boards of Directors of West Park Healthcare Centre and University Health Network (UHN) endorsed a process to explore a merger between the two institutions, with the intention of developing a best-in-the-world, specialized rehabilitation centre that sets the gold standard for patient care.

We sat down with Anne-Marie Malek, President and CEO of West Park, to learn more.

Q: Why is West Park exploring a merger with UHN?

The potential merger of West Park and UHN reflects a shared belief that collaboration between leading organizations is essential to delivering exceptional patient care.

Together, we envision an opportunity to create the world's leading specialized academic, clinical and research rehabilitation centre that will allow both organizations to optimize operational, clinical and educational expertise, and leverage resources. West Park will preserve and expand its specialty clinical expertise, and continue to deliver the exceptional care and quality experience patients have come to expect.

We believe that, ultimately, an integration will strengthen the continuum of patient care and the delivery of healthcare services, helping to ensure that patients are able to access the care they need, when they need it, in a healthcare setting best suited to providing it.

Q: What are the benefits for patients?

An integration with UHN will allow us to expand the scope and range of services to support some of Canada's most complex patients and further strengthen patient experiences throughout their care continuum. We will be able to train even more of the best-educated healthcare providers of the future, leverage emerging technologies that allow a greater number of patients to receive care earlier and where they want to be supported, and drive the translation of research into clinical practice better than ever before.

This potential collaboration is for and about patients, to help them reclaim their lives and realize their maximum potential for functionality and independence that is humanly possible.

Q: What does this mean for West Park's redevelopment?

A merger with UHN will optimize our new campus and new hospital infrastructure, providing a seamless flow of patients across the continuum of care.

Our redevelopment continues apace. We are busy preparing to move into our new hospital building, which is at the centre of a campus-wide transformation that will continue through to 2025 as we create outdoor therapeutic environments and put the 'park' back in West Park.

I'm looking forward to early next year when we welcome patients and their families into our stunning new facility.

Q: What is the status of your discussions with UHN?

This summer, a Joint Hospital Steering Committee was established to guide the merger exploration process. A key step is the legal process of due diligence to gain a deeper understanding of one another's organizations. The Committee, which is co-chaired by the Board Chairs of West Park and UHN, will be a forum for discussion and review going forward.

Q: If I donate to West Park, will my money still go to West Park?

Yes, absolutely. All donations to West Park Foundation will continue to benefit West Park patients, programs and campus redevelopment.

Our colleagues in the Foundation are continuing to reach out to our generous donor community to help support the completion of our new hospital building and the construction of our outdoor therapy spaces over the next two years.

Every gift is important, and helps West Park deliver the best care for our patients.

Improving balance with COPD treatment can help prevent fall-related injuries

A West Park led research study in five countries is working to change clinical guidelines to prevent falls

By Doug Earle, CEO

According to the Public Health Agency of Canada, falls are the leading cause of injury-related hospitalizations and injury deaths among people aged 65 or older.

It is estimated that **66%** of all emergency visits, and **72%** of all hospitalizations, from unintentional injuries are related to falls.

Injuries from falls reduce older adults' quality of life, increase caregiver demands, and precipitate admissions into long-term care. In addition to the personal impact, falls cost Canadians **\$10.3 billion** annually from both direct and indirect health care costs.

That's a big problem for the health system ... especially as our society is aging. Linked to the high incidence of fall-related injuries is any respiratory disease such as Chronic Obstructive Pulmonary Disease (COPD), a common lung condition causing restricted airflow and breathing problems.

In Canada, COPD is the third leading cause of death for Canadians. Four million Canadians are living with COPD and half do not know it. COPD has a higher hospitalization rate and re-admission rate than heart failure, angina, and other serious chronic diseases.

Clinicians at West Park Healthcare Centre observed that our patients with COPD were falling often. Research found that the incidence of falls in people with COPD has been estimated to range between 25–46%

Although exercise training is considered the cornerstone of pulmonary rehabilitation (PR), balance training has not been included in most PR programs and, to date, no research has been conducted to examine the importance of balance as a determinant in fall likelihood in a population at higher risk.

Enter West Park's Dr. Dina Brooks, Dr. Roger Goldstein, Cindy Ellerton and the respiratory research team who are currently leading a nine-centre in five-country study which will examine, for the first time, the effects of interventions to improve balance for people with



living with COPD. The goal is to change treatment guidelines in the world, with the results of the study expected in 2024.

By including a simple screening balance assessment test when assessing patients with COPD, the treating team has a chance to integrate a balance training program for those who show vulnerability to falling, in addition to the usual exercise respiratory rehabilitation program.

Global impact

Thanks to our donor support, this is an excellent example of how West Park is strategically integrating patient-care delivery, education and research to deliver tangible benefits for patients, and how its clinical programs inform research that can have a global impact.

It is an approach that further enhances West Park's international reputation as one of the top three pulmonary rehabilitation research centres in the world.

When our new hospital building opens early next year, we will benefit from expanded research facilities that will bring clinicians and researchers together, to promote a spirit of enquiry and implement the latest advances.



Putting the Finishing Touches on the New West Park

The outside of West Park's new hospital, with just roadwork and landscaping remaining.

Photo by Matias Kunzle

West Park's new hospital building will open to patients in early 2024 and when it does, it will have an immediate impact on health care in Ontario. With 314 inpatient beds and double our current outpatient capacity, it will improve access to vital post-acute care services, while its innovative design will enhance patient care and help people get their lives back.

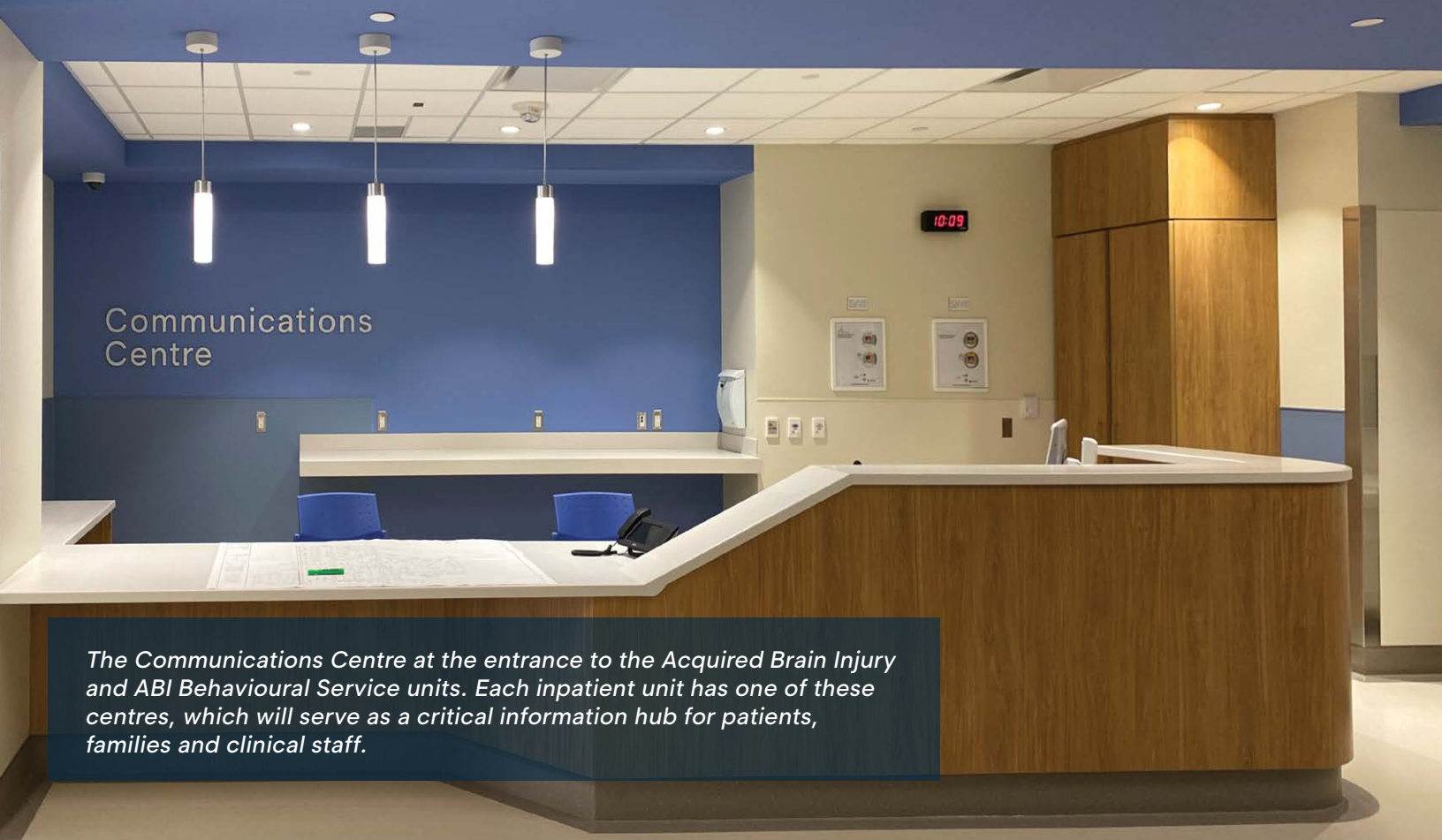
Once the building has opened, the existing hospital and Ruddy buildings will be demolished to make way for outdoor therapeutic environments, including therapy spaces, walking trails, quiet gardens and gathering spaces that will better support patients on their recovery journey. Our full campus transformation will continue through to mid-2025.

Here is a glimpse of how our new hospital looks!



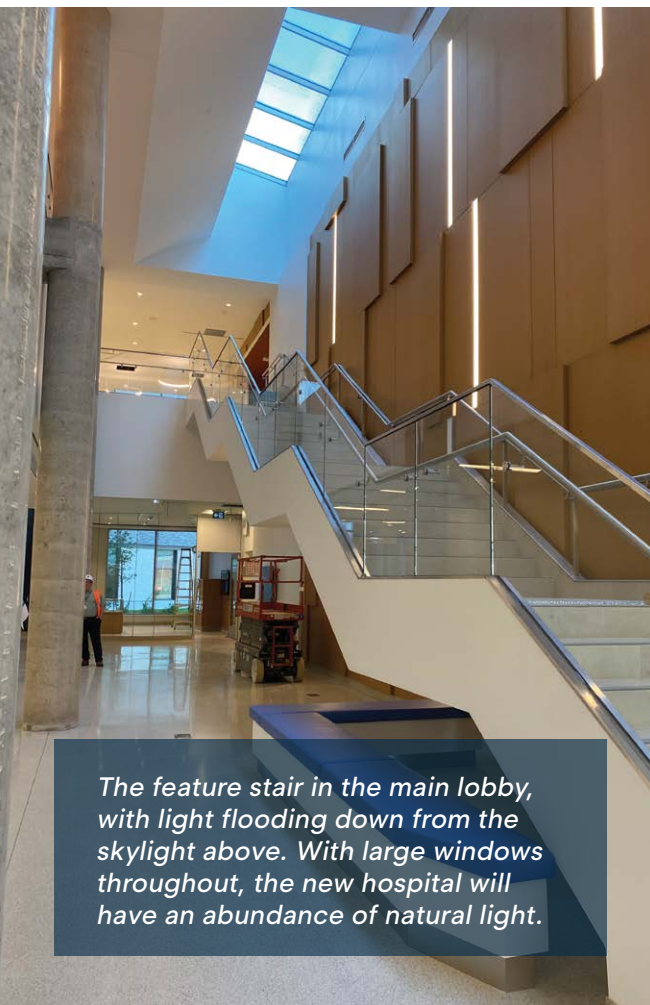
A patient room, just waiting for furniture. The large, low window will provide a view outdoors, while the integrated bedside terminal will allow patients to access their care team, schedule, educational resources, entertainment and room controls for temperature, lighting and blinds.

Photo by Matias Kunzle

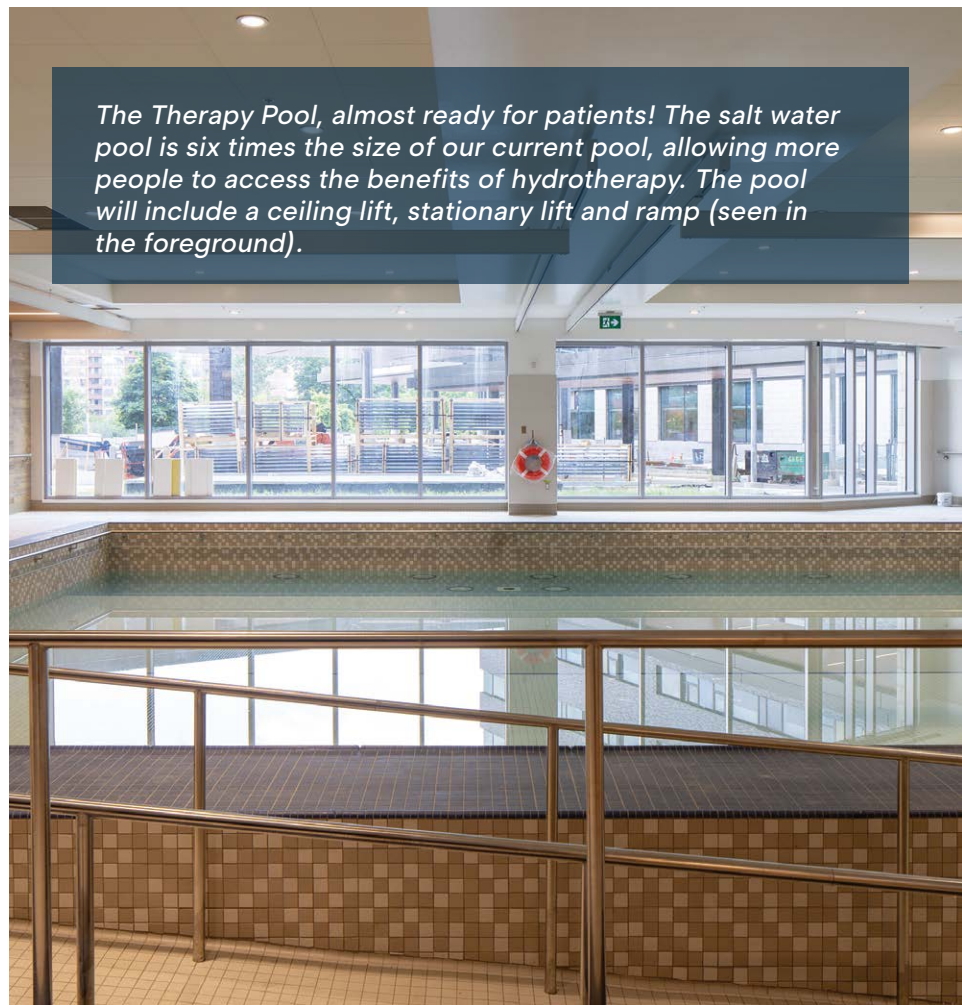


Communications Centre

The Communications Centre at the entrance to the Acquired Brain Injury and ABI Behavioural Service units. Each inpatient unit has one of these centres, which will serve as a critical information hub for patients, families and clinical staff.



The feature stair in the main lobby, with light flooding down from the skylight above. With large windows throughout, the new hospital will have an abundance of natural light.



The Therapy Pool, almost ready for patients! The salt water pool is six times the size of our current pool, allowing more people to access the benefits of hydrotherapy. The pool will include a ceiling lift, stationary lift and ramp (seen in the foreground).



Jen training on her recumbent bike.

For traumatic brain injury survivor, Camino de Santiago trek puts hope in motion

When Jen Schuringa starts pedalling her recumbent bicycle along the Camino de Santiago in northern Spain this September, her route will become part of a 10-year journey of perseverance.

On May 19, 2013, the Sunday of Victoria Day weekend, she was driving in cottage country near Peterborough. The car lost control, and she hit a tree head on. Ever since, she has lived with a traumatic brain injury.

While her family says that her memory and processing remain intact, Jen is unable to speak or move at will and communicates via blinks. Yet she and what's dubbed J's Crew – a team of family members and other supporters – are preparing for a trip that not long ago seemed an impossibility.

"I'm in awe," says Dr. Farooq Ismail, a physiatrist who treats neurological patients at West Park and sees Jen every three months. "The sheer will of her and her family to even get to the start line is amazing."

Due to her injury, Jen has a debilitating neurological condition called spasticity. That's an involuntary and often extreme tightening of muscles. Spasticity is treated with many modalities, including injections of botulinum toxin type A. That works by blocking the chemical signals between the nerves and muscles that cause muscles to contract.

Those treatments at West Park have been an essential "enabler" for Jen, says her family. With her muscles more under control, she can continue her rehabilitation with various therapies – and achieve her dream of partaking in the Camino de Santiago.

A long-awaited journey

For centuries, the Camino de Santiago has been a major pilgrimage route, crossing parts of Spain, France and Portugal. It's on the UNESCO World Heritage List, attracting several hundred thousand visitors each year. Perhaps none are quite like Jen.

At age 24, she was working in marketing and public relations, just getting started in her career. Her father, Harold, describes her as very outgoing. The car crash changed everything.

Jen was airlifted to St. Michael's Hospital in Toronto, where she spent three months, mostly in intensive care. That was followed by a year and a half at the Bickle Centre for Complex Continuing Care in Toronto, and three months at Hamilton Health Sciences.

When she returned to her parents' Oakville home in 2015, her family began to arrange a home care-based and custom-designed rehabilitation program. Along the way, she was referred to Dr. Ismail.

He runs West Park's Comprehensive Adult Spasticity Management Program, in conjunction with Dr. Chris Boulias. Depending on the patient, the program aims to relieve the signs and symptoms of spasticity, improve activities of daily living, ease care, and improve voluntary active motor function wherever possible. Treatments can include physiotherapy and occupational therapy, splinting, pharmacotherapy and neuromuscular blockade.

While patient needs and abilities vary greatly, the common goal is to make the most of what you have, says Dr. Ismail. He describes his field of medicine as one that doesn't add years to life but life to years. "She has exemplified that," he says of Jen.

Slow but notable progress

Each week at home, Jen's current rehabilitation regime includes two sessions of physiotherapy, three with a personal trainer, two with a massage therapist and four with a speech therapist.

Progress can be slow, but over the past decade Jen has hit several milestones. It took her three years to smile again, and five years to learn to eat. She went from a feeding tube to being able to eat pureed and soft foods. With the help of a personal support worker, she can complete a transfer. She can also move her limbs with somewhat better control. Learning to pedal a bike has taken four years.

"The fact that we can keep doing rehab and it keeps producing new possibilities makes life more exciting," says Harold Schuringa.

For the Camino de Santiago trip, the family is hoping to do 300 kilometres of the route. Jen will pedal her bike and members of J's Crew will help her to steer as needed. On parts of the route, she'll also use an adaptive wheelchair. J's Crew will include a core group of six for the entire trip, with 15 people in all joining for some time along the way. Her website (jenschuringa.com) details her journey, plans for the trip and opportunities to get involved through donations or sponsorships.

For anyone undergoing rehabilitation, abilities and objectives can evolve over time, says Ayako Sasaki, an occupational therapist in West Park's spasticity program. She assists with assessments and treatments, and educates patients on realistic goals. With Jen, she says, increasing her comfort has been instrumental.

"When you're comfortable you're able to tolerate more activity and maximize your rehabilitation potential."

Sasaki is thrilled that Jen has been able to take up cycling. "It's huge. It means she's able to participate more in activities that are meaningful to her."

Future challenges remain. Jen is dealing with a lifelong injury. But for now, Camino de Santiago beckons and symbolizes what's possible. "This trip is the culmination of 10 years of work," says Janette Schuringa. "It's a celebration of how far we've come."



Jen with members of her 'crew'.

Innovative new procedure changes the life of a decades-long amputee

It's a warm sunny summer morning at West Park and amputee patient John Cairns is undergoing an outpatient physiotherapy session. John's joking and chatting with his physiotherapist, Janet Campbell, other staff members and patients throughout the room.

But it isn't just John's outgoing demeanor that makes him stand out. When he removes his prosthetic leg, a metal bar can be seen sticking directly out from his leg, just below his hip.

John recently underwent a surgical procedure known as osseointegration.

In this revolutionary procedure, a metal implant is inserted into the bone of a residual limb, which then attaches directly to a prosthesis. Osseointegration has been used for decades in dental implants and joint replacements, but its use with prosthetics is more recent.

John has been a double amputee, using standard prosthetics for more than 30 years, after a train accident cost him his right arm and leg.

Despite the many advantages of wearing a prosthetic, prostheses can still be uncomfortable for the wearer; with residual pain, irritation and other skin issues, general fatigue, nerve pain, discomfort with the socket, and back pain among the discomforts amputees may face.

John never let these challenges get in the way of living a full life. He climbed Mount Kilimanjaro, Mount Everest Base Camp, rode the Highway of Heroes Bike Ride and swam the Bay of Quinte, all while running a successful real estate business. He was also named an Honorary Colonel of the Canadian Air Force and is a recipient of Canada's Walk of Fame UnSung Hero Award.



John had been coming to West Park for over 15 years. The home of the largest amputee rehabilitation service in Canada and a global leader in research in improving care for amputees, John speaks glowingly of the service and care he's received at West Park. "West Park is a hospital, but it's the people who make the difference. It's not only the mechanics of rehab, but a team of people who believed in me. They're Canada's unsung heroes."

In 2018, John's West Park prosthetist, Winfried Heim, suggested him as a candidate for osseointegration, in which an artificial implant is surgically anchored and integrated into bone, which then grows into the implant.

"John had a lot of trouble with socket fit, skin chafing etc. especially because he has always been very active and his residual limb was not easy to fit," Heim says, about why he felt John would benefit from osseointegration.

Over the next few years, John had a number of evaluations to ensure he was a suitable candidate and that the surgery would be beneficial for him.

In October 2022, he underwent the procedure at Montreal General Hospital, and spent three months in post-acute care. He returned to West Park in March 2023 for regular outpatient appointments, and has already made leaps and bounds in progress.

Once or twice a month he visits West Park, and keeps up a regular at-home exercise regime to help him adjust to his new leg. The process isn't easy, but it's worth it; John says he's "using muscles I haven't used in 30 years. They're there, I just have to wake them up."

With his new prosthesis, John is able to feel the reverberations from the ground as he walks, in the same way that someone who has not had a leg amputation would. He has much better control of his prosthesis, and the prosthesis has a direct connection to his leg muscles. And because there is no socket – the device that joins a residual limb to a prosthetic – John doesn't experience the chafing and irritation he did before the surgery.

He still has some ways to go, but the difference the osseointegration has made in his life has already – not even a year out from the procedure – been outstanding.

"If I did a 2-5k walk, I didn't walk again for three days. But now, I'll do that today and I'll do that tomorrow. If I worked all day and a friend called to go see a movie, I'd say 'I can't.' Now I can." John says. "It used to be that when I woke up, the last thing I would do is put on the prosthesis. Today, it's the first thing I put on."

"It used to be that when I woke up, the last thing I would do is put on the prosthesis. Today, it's the first thing I put on."

– John Cairns

**John Cairns with Janet Campbell, Clinical Resource Leader—
Physiotherapy and Winfried Heim, Manager of Prosthetics & Orthotics.**

HELPING PEOPLE BACK TO ACTIVE LIFE

More than 225,000 Canadians live with limb loss, and that number is expected to climb as our population ages.

West Park is the largest provider of inpatient amputee rehabilitation services in Canada. We are also one of the few facilities that provide amputees with the full continuum of care on site from start to finish – rehabilitation, custom fitting, custom construction, and maintenance and adjustments – enabling people to learn to use their prosthetics as quickly as possible.

The new West Park will include a Prosthetics & Orthotics Centre that is more than double the size of our current space, so we can help more people return to active life following amputation. It will also provide an enhanced patient experience, with the addition of a larger gait assessment area and private consultation rooms.

The expanded centre will support innovative and new technologies that will advance the design and manufacture of prosthetics and orthotics. New equipment will include a robotic carver with the ability to carve any material, for any application, with precision and speed, as well as a 3D printer to build personalized prostheses and orthoses. This 3D printer has been generously supported through a gift from the estate of Helen Allen Stacey.





The Magic of Rehabilitation: Pete Arbour

Carolyn and Pete Arbour enjoying the outdoors.

Picture this as the opening of a romcom. A young single mother is walking her dog. The dog gets loose and starts running down the street. She shouts at a man on a scooter, asking him to help. He accelerates but can't catch the dog.

Eventually, the animal is caught. The woman, who has sworn off dating since her marriage ended, reluctantly gets to know the man. He connects with her three active young boys. A few months later, she realizes that she is in love. "He's just so nice, so non-judgmental," she says. "You couldn't meet a nicer guy than Pete—that's what bowled me right over."

This is the real love story of Pete and Carolyn Arbour, who first met in 1995. Together they raised the three boys, eventually settling in Keswick Ontario.

Pete has Muscular Dystrophy, which causes a slow weakening of the muscles. For years, the couple managed his very gradual decline on their own, with minimal medical support. Eighteen months ago, Pete began to develop breathing problems. "One night I lay down in bed and had a panic attack because I couldn't breathe," he says. "It was very scary." Soon, he was spending nights sitting up in his wheelchair in

the living room, uncomfortable and getting very little sleep. During the day while he was working the phones for the Shopping Channel, he would fall asleep while waiting for customers to get their credit card details. Sleep deprivation was taking a toll on Pete and Carolyn.

Their family doctor referred Pete for a sleep study. "I was over the moon when West Park called to schedule the appointment a few weeks later," says Carolyn.

Minutes after the study started, the technologists realized that Pete needed help and started him on a bilevel positive airway pressure (BIPAP) machine. The BIPAP helped maintain pressure in his lungs, making it easier for him to breathe while lying down.

The morning after the study, he met with two exceptional doctors -- Dr. Roger Goldstein, Head of Respiratory Medicine at West Park, and Dr. Hui Zhong Chai, an intensive care specialist from Singapore who was spending time at West Park to sharpen her skills in ventilation support. They realized that Pete's diaphragm had become too weak to breathe without the assistance of gravity. As a result, he couldn't lie down, and his oxygen levels were dangerously low.

"He was on the brink of becoming very ill," Dr. Chai says. "Had he not come in for that appointment, he might have ended up in the ICU of an acute care hospital. We caught it just in time." Dr. Goldstein agrees, adding, "Based on the study, we could see that there was potential for improvement—the challenge was to get a machine and get him started on it quickly."

The team made arrangements to get a BIPAP machine from the Ministry of Health's assistive devices program the next day, and scheduled Pete for a three-day stay to fine tune it. Although nervous about a hospital stay, Pete and Carolyn were impressed by the skillful and compassionate care he received at West Park. "The staff is amazing there," Pete says.

After his first full night on the BIPAP machine, the improvement was immediate and profound. "Pete felt clearer in his head, brighter, and more alert and rested," says Dr. Goldstein. "That's the magic of rehabilitation."

Pete now uses the BIPAP machine every night. "My quality of life is so different now," he says. "I'm sleeping in my bed every night. It's a 100 percent turnaround." Adds Carolyn, "I got my Peter back. He is the man I married again, thanks to West Park."

Which of course makes a perfect happy ending to the movie.



CULINARY SHOWDOWN

Saturday, October 21

Westin Harbour Castle

WWW.THECULINARYSHOWDOWN.COM

The Ultimate Culinary Challenge in Support of West Park

On Saturday, October 21, join us for the **West Park Foundation Culinary Showdown**, a Masterchef-style competition that will bring together 5 Celebrity Chefs in a head-to-head culinary battle.

Renowned Canadian chefs Massimo Capra, Lynn Crawford, Michele Forgione, Alvin Leung and Vikram Vij will take to the stage at the Westin Harbour Castle with their teams of Fundraising Foodies, who are raising critical funds for West Park.

The competitors will be cheered on by attendees of the evening's Gala Dinner, who will enjoy a gourmet meal inspired by our celebrity chefs.

Time is running out to secure your spot at this exciting event. Visit theculinaryshowdown.com to get tickets to the dinner or donate to one of the fundraising competitors!

The Culinary Showdown is the evolution of our popular Uncork Untap Unwind event and the chance to enjoy fabulous food and an exciting culinary competition while supporting our critical mission.



On Monday, August 14, more than 120 golfers gathered on the stunning fairways of Lambton Golf & Country Club for a picture-perfect day of golf in support of West Park.

Congratulations to the Elan Planning & Wealth Management foursome of Stuart Smalley, Jeff Rogers, Stephen Johnstone and Troy Bensley (pictured above), who won with a score of 61.

The event was a sell-out success, raising over \$225,000 towards West Park's critical mission! Thank you to participants, our volunteer event co-chairs Paul Collings and Margaret Mah and committee members David Kaiser and Norm Keith, and our generous sponsors:

Presenting Sponsor:



Platinum Sponsor:



Gold Sponsors:



HARKELOFFICE

Silver Sponsors:



MontgomerySisam



West Park
FOUNDATION

Get your life back.



82 Buttonwood Avenue, Toronto, ON M6M 2J5
foundation@westpark.org
416-243-3698

westparkfoundation.ca

- West Park Healthcare Centre Foundation
- @westparkfdn
- @westparkfoundation
- /company/west-park-foundation

Charitable Business No. 11929 5350 RR0001

Diversity, Equity & Inclusion Statement: At West Park Healthcare Centre Foundation, we are committed to fostering an inclusive, diverse and accessible environment, an important part of living our brand. We are dedicated to building a staff and board that reflects the diversity of our community.