

ANNUAL REPORT 2018/2019
Espanola Regional Hospital & Health Centre

Achieving Excellence



Message from the Leadership Team

It has truly been an exceptional year at the Espanola Regional Hospital and Health Centre (ERHHC). The theme of this year's report has stemmed from the outstanding contributions of our staff, physicians, volunteers, patients, families and partners. It is due to their commitment that ERHHC achieved excellence, leading by example with our "Patients First" philosophy. We are all partners in health. We are people taking care of people. We expect the very best healthcare that is offered and we deliver on that.

On behalf of the Board of Directors, we are exceptionally proud of the outstanding results of our Accreditation Canada survey which was held last October. The onsite survey was quite rigorous, as we were measured by our peers who utilized 1673 quality criteria standards in their assessment of our health care campus. Scoring 99.9% is an accomplishment few health organizations have achieved. We attribute this truly exceptional achievement to the amazing dedicated teams of individuals who live our mission "to provide excellent health care programs and services to all we serve". This success required tremendous team work and dedication in striving for continuous quality improvement with integrity and compassionate care.

The Accreditation Canada survey results and feedback provided validation of the exceptional care and services that we strive to deliver. It provided an opportunity for celebration and acknowledgement of the things we often simply take for granted, not realizing just how exceptional we are. We would like to thank you in advance for taking the time to read this report, to celebrate and reflect on all of the accomplishments which we are most proud of.

Our integrated Quality Improvement Plan (QIP) is our roadmap, leading us throughout the year. It measures what we do, identifies gaps in the system in partnership with all stakeholders, including primary care, home and community care, mental health to name just a few. We are active partners in the Community of Care Planning Network which provides a venue for partnership, collaboration and networking to support development of solutions for the gaps in the system. The goal is to break down the silos of care which unfortunately continue to exist; to find ways to bridge the lack of services and resources; to find care for those we serve collectively. It is important to measure the local health care system. To be effective, we need our partners as we are not able to do it alone. We truly value these partnerships and continue to build upon them.

We are very proud to report that as a result of our strong partnerships with other health system providers we were able to create new programs and services which are needed in the community. One of these very successful programs is the Rapid Access to Addictions Medicine (RAAM) clinic which opened last November. We are pleased to report that patients are receiving care and are now transitioning back to their primary care provider. There are many patient success stories.

We are very appreciative of our patients, families and volunteers who commit their time to help us deliver exceptional care. Their contributions are evident throughout the campus. We are very fortunate to have a dedicated Patient Advisory Council who participates on many committees throughout the continuum of care and were instrumental in achieving the outstanding accreditation results. Volunteers

are at the heart of our health care system, providing leadership, fundraising, care, entertainment, all of which improve the quality of life of our residents and patients. We are very pleased to report that construction of the Therapeutic Park is underway thanks to the leadership and dedication of the Hospital Foundation. The Hospital Auxiliary continued to tirelessly raise funds for the new ultrasound equipment. Without the dedication and commitment of our volunteers we would not be as successful as we are. We would like to acknowledge and truly thank each and every one of you.

We continue to invest and explore collaborative opportunities with First Nations partners. Successful collaborative protocols and partnerships in service delivery have been realized, in particular with the Sagamok and Noojmowin Teg service providers. Process improvements have been made facilitating Aboriginal identification at point of registration and utilizing information to promote and improve care pathways and discharge planning. These relationships are very important to us and are truly valued.

For many years Espanola was plagued with physician shortages; people living in the community could not find a local family doctor. We are very pleased to report that we have a full complement of dedicated physicians who provide outstanding care throughout the health complex and community. Due to the visionary leadership and dedication of our physician group we have realized over a 100% increase in medical learners coming to our community. The physician team provides excellent learning opportunities, resulting in a positive academic environment and providing real life experiences for all learners. Through dedicated mentorship, coaching and support, learners are benefiting and so is our community. We have our physicians to thank for this.

Health care funding and changing politics have been on the top of the horizon over the past year. As the provincial government introduces Ontario Health Teams, our health campus submitted a self-assessment and we meet all of the criteria. Our Rural Health Hub pilot project enabled us to make further investments and improvements in care by advancing our partnerships and collaboration with community and health system stakeholders. We embrace the changes in the health system environment and welcome it.

We are very pleased to report that we have remained in a positive financial position despite the inadequate funding for the Nursing Home and out-patient laboratory services. Even with these economic challenges, we have managed to end 2018/19 with an overall surplus while adding services and investments. We are very proud of this accomplishment.

Our grounds and facilities are beautiful, visitors often comment that they cannot believe that our facility is over 30 years old. When they enter the parking lot and building they are greeted with a clean, state of the art, warm and friendly environment. People feel welcome. We have many system partners to thank for the investments made in keeping our complex beautiful. The Ministry of Health and Long Term Care and the North East Local Integration Network have been very supportive in funding. With these investments many improvements have been made this past year including the back-up generator, medical air and gas replacement projects. These systems were original to the building and created a tremendous risk of failure. Energy efficient programs such as exchanging all of the lighting to LED has resulted in brighter illumination for our patients and residents who are visually impaired, as well as a reduction in energy costs mitigating rising costs in other areas.

As we move into the future, many investments in information systems and technological tools are required. We have committed to the "ONE" regional initiative with the vision of "One person, One record, One system". Significant investments have been made and will be ongoing as we move forward. Protecting patient health information is of utmost importance. We continue to invest in cyber security systems and clinical informatics advancements to provide the tools for our clinicians while ensuring information is safe and patient privacy is protected.

As we approach the end of our 2014-19 Strategic Plan we are preparing for the future. Considerable time and resources have gone into planning the next strategic roadmap to lead us through the next five years. We are very excited about the possibilities as we move forward and value the tremendous input that we have received from our staff, physicians, volunteers, patients, families and community partners. We will continue to build upon the foundation of our Ontario Health Team model, expanding our one stop shop to care and services and find ways to bridge the silos in care to increase services with innovative partnerships.

Thank you for taking the time to read this report, to celebrate our successes and help us plan for the future. We are very thankful to each and every one of you.

Respectfully



David Pope, Board Chair



Dr. Andre Michon, Chief of Staff



Nicole Haley, CEO

Board of Directors

EXECUTIVE COMMITTEE

Dave Pope, Chair person
Clive Fitzjohn 1st Vice Chair
Yves Carriere, 2nd Vice Chair
Cynthia Townsend Treasurer
Nicole Haley, Secretary

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Patricia Trudeau
Karen Lalonde
Jeremiah Steele Ron
MacKenzie Maureen
VanAlstine Angela
Vuorensyrja

Our Board of Directors volunteer 100% of their time and do not receive an honorarium or stipend for attendance at Board meetings or functions. Board members are required to review a vast amount of information (i.e. study documents and publications), to gain knowledge of new directions in health care transformations, etc. as it impacts on their decision making in establishing hospital policy, funding allocations and communication. To further their education, Board members attend numerous training events, webcasts & information meetings, so they can be prepared to make informed decisions. We are very fortunate that our Board has in-depth skills and knowledge to ensure our community has access to the best healthcare possible.



Mission

Vision

Values

Vision

A Leader in Health Care and Gateway to Services

Mission

To Provide Excellent Health Care Programs and Services to all we Serve

Values

**Patients First * Integrity * Respect & Dignity *
Caring/Compassion * Contributions of All
*Continuous Quality Improvement
*Culture of Effective Communications**

Strategic Priorities

**Promoting the Value of our People
Broadening our Excellent Health Care
Sustaining our resources**

Administration

SENIOR MANAGEMENT

Nicole Haley, Chief Executive Officer
Kim Roy, Chief Financial Officer
Jane Battistelli, Director of Clinical Services
Tammy Tallon, Executive Assistant

MANAGEMENT TEAM

Janis Bond, Laboratory
Jon Brunetti, Primary Care
Marlo Desjardins, Human Resources
Monique Gallant, Physiotherapy
Kristy Desjardins, Food Services
Jodie Graham, Materials Mgmt/Housekeeping
Paula Mitroff, Patient Safety & Quality
Terri Noble, Public Relations/Foundation
Phyllis Paradis, Queensway Place/Social Work
Al Renaud, Maintenance
Paul Ainslie, I.T/Clinical Informatics
Tammy Small, Acute Care/Emergency/Pharmacy
Phil Smith, Diagnostic Imaging
Liisa Tallon, Health Records/Privacy Officer
Lee Turley, Long Term Care



Senior Management Team

Our managers are actually “working” managers in that they also perform front line (direct and indirect) patient care in addition to managing their departments. This is not unusual in small hospitals, where managers often take on front line functions due to lack of critical mass/economies of scale. While that can add its challenges it also offers a greater degree of fulfillment and satisfaction as they can experience the direct impact of their teams’ efforts on patients and families.

Our physicians must be recognized and commended for their efforts in going above & beyond in providing quality care to the residents of the communities we serve.

We often take it for granted that the doctors are trained to look after every aspect of the healthcare needs of its citizens. In many larger urban communities, doctors have the support of specialists and other medical supports readily and conveniently available within their hospitals. In small rural communities, like Espanola, our physicians develop an enhanced skill set in order to manage higher levels of complexities of care.

Due to isolation of rural communities, physicians often depend on their own experience, skills and judgment to make a determination on a patient’s care plan as they do not have that same access to other medical supports as the urban counterparts. In short, our physicians are amazing!

Medical Leadership

LEADERSHIP

Dr. Andre Michon, Chief of Staff
Dr. Min Ye Ngae, Medical Director - Lab
Dr. Jeff Middaugh, Emergency Department Medical Director
Dr. Hama Salam, Medical Director- Long Term Care

ACTIVE STAFF

Dr. John Knox
Dr. Kim Perlin
Dr. Liane Ainslie

Dr. Alison McMillan
Dr. Lionel Marks de Chabris
Dr. Steven Bignucolo



THE AUXILIARY

ESPANOLA GENERAL HOSPITAL,
825 MCKINNON DRIVE, ESPANOLA, ONTARIO P5E 1R4

Annual Report 2018-2019

We have had another busy year enabling the auxiliary to present a total of \$30,000.00 to the hospital board towards the purchase of hospital equipment. This will be going towards the new ultra-sound equipment already in use in the diagnostic department of the hospital.

Our Nevada tickets are selling well and this past year we are also selling "Chase the Ace" tickets in partnership with the Little Current Lion's Club. This is going very well indeed as the tickets sell themselves and quite often we run out of them and need to ask for more. We receive a percentage of the sales so therefore the more we sell the more we get.

The Pumpkin Pancake Breakfast last October continues to be well attended by Espanolians who really enjoy this yearly breakfast. It is a lot of work but well worth it. We shall continue this tradition with the help of many volunteers and students from both high schools.

The auxiliary donates a \$500.00 bursary to each high school to a student continuing his or her education in the medical field.

Our Christmas Tea and Bazaar was well attended and a very successful fund raiser. We did hold it on a Saturday for something different than last Christmas.

Our mother's day raffle is called "Spring Fever" this year. The draw will be made in early June. It is becoming increasingly more difficult to get donations from the community businesses but we keep trying as this event is popular and a good profit for the auxiliary.

In Memoriam Balls sold at Christmas and put on the tree in the lobby are a good seller and many people return each year to do this. These ornaments are then taken home just before Christmas and put on the tree in their home.

The Bridge Club is still popular and supports us with a generous donation. We thank them by hosting a Tea Party of sandwiches and desserts on their last tournament evening of the season. This was held on April 30th.

Our soup and sandwich luncheons and bake sales are in much demand and appreciated by the hospital staff and the seniors living in the adjoining apartments and others.

Our membership has increased slightly in the past year and it is great seeing new faces.

We have elected a new president, Carol Pickard, in April. I wish her great success with her new position.

There were a few changes made to our constitution to better benefit the auxiliary.

We are no longer part of HAAO as it dissolved last fall. The Northern Conference of Auxiliaries is being held May 4, 5, and 6 and will decide where we stand and how we go forward as an auxiliary.

We look forward to another profitable year ahead of us and continue in our endeavours to support the Espanola Regional Hospital & Health Centre to the best of our ability.

Sincerely on behalf of all volunteers

Diane Rand

Diane Rand, Out Going President



ERHHC Foundation

A review of pursuits, challenges and accomplishments of the ERHHC Foundation for the past year.

We continued fundraising through the past year for the Therapeutic Park development, making it a two year campaign. Financial support was received through donations, memorial tributes, partnership projects, legacy pledges, contributions through the Diamond Club membership, and our annual Road Toll.

Ground breaking for the park was scheduled for May 2019. At the presentation of this review there is confidence that construction will be advancing to take advantage of the early summer weather.

This past year the annual Moose FM Radiothon was deliberately focused to highlight other Foundation projects. Through this partnership we were able to raise the funds needed to replace a treatment table for Physiotherapy and two automatic IV pumps for Acute Care and Emergency Departments.

We would like to take this opportunity to thank everyone who donated to our causes, without your generosity we could not improve the patient / resident experience at our facility.

At the Foundation our Work is about making a Difference, and our Story is about Hope, Community and Cooperation.

Yours in Giving,

Michael

Michael Dunn
Foundation Board Chair



Financial Report



The Finance Team

Here at the ERHHC, the key to our success is our committed and dedicated professionals. The Finance department is no exception; the staff work diligently to provide quality financial services to our four corporations and two distinct operational areas. The Hospital, Nursing Home, Foundation, Queensway Place, Family Health Team and Non-Profit Housing all have unique requirements from transaction recording to reporting. This year marked a change in our small team as Lee-Ann Thibeault, Finance Officer, was wished all the best in her retirement and Darcie Collinson was welcomed. Darcie will work closely with the rest of the talented finance team of Kim Renaud and Cheryl Renaud.

Statement of Financial Position March 31, 2019 with comparative figures for 2018

	2019 \$	2018 \$
Assets		
Current assets		
Cash	2,015,220	1,386,613
Accounts receivable	740,291	1,019,563
Inventories	256,463	271,240
Prepaid expenses	168,932	179,052
	3,180,906	2,856,468
Portfolio investments (note 3)	4,488,942	4,072,534
Capital assets (note 4)	14,919,492	15,129,728
Capital expenditures for projects in progress	636,795	207,599
	23,226,135	22,266,329
Liabilities and Net Assets		
Current liabilities		
Accounts payable and accrued liabilities (note 6)	2,859,703	2,408,750
Deferred contributions for capital assets (note 7)	10,061,464	9,828,132
Post-employment benefits (note 8)	723,033	725,991
	13,644,200	12,962,873
Net Assets		
Invested in capital assets (note 9)	5,494,823	5,509,195
Internally restricted for the acquisition of capital assets	325,517	335,994
Unrestricted	3,781,907	3,578,727
	9,602,247	9,423,916
Accumulated remeasurement losses	(20,312)	(120,460)
Total net assets	9,581,935	9,303,456
	23,226,135	22,266,329

Statement of Operations

	2019	2018
	\$	\$
Revenues		
Ministry of Health and Long-Term Care / North East LHIN:		
Hospital operations	11,846,018	11,883,401
Emergency on call coverage	1,854,189	1,906,407
Sources other than Ministry of Health and Long-Term Care / North East LHIN:		
Other patient revenue	1,202,569	1,282,526
Preferred accommodations	90,922	103,349
Chronic care co-payment	624,276	631,897
Recoveries and other revenues	1,836,360	1,859,762
Gain (loss) on disposal of capital assets	-	(312)
Amortization of deferred contributions for allowable capital assets	98,587	105,945
	17,552,921	17,772,975
Expenses		
Salaries and wages	8,013,696	8,150,172
Supplies and services	3,253,765	3,403,403
Medical staff remuneration	2,373,724	2,425,395
Employee benefits	2,616,759	2,485,695
Amortization of allowable capital assets	394,128	322,853
Drugs and medical gases	169,391	151,067
Medical and surgical supplies	129,117	143,218
Bad debts	34,731	22,775
	16,985,311	17,104,578
Excess of revenues over expenses before undernoted items	567,610	668,397
Other Revenues		
Long-term care program (schedule 1)	2,544,000	2,346,673
Realized investment income on portfolio investments internally restricted for the acquisition of capital assets (note 13)	199,202	150,720
Other votes and programs (note 10)	4,650	4,650
Amortization of deferred contributions for non-allowable capital assets	386,057	386,554
	3,133,909	2,888,597
Other Expenses		
Long-term care program (schedule 1)	2,922,802	2,804,463
Other votes and programs (note 10)	4,650	4,650
Amortization of non-allowable capital assets	595,736	595,904
	3,523,188	3,405,017
Excess of revenues over expenses	178,331	151,977

ERHHC Team 2018-2019



Through the Foundation's Radiothon the Physio Department received a donation from the Espanola Branch of the Royal Canadian Legion to purchase a Bariatric Treatment table.

Pictured L to R: Sarah Carroll, Physiotherapist, Gary Macpherson, Legion President, Monique Gallant, Manager & Vince Eshkakogan, Physiotherapy Assistant

Physiotherapy

Bundled Funding, Episode of Care, WSIB, Per Bed Allocation, Satellite Agreements, Global Budget – what's it all mean? It means we still have Physiotherapy services at Espanola Regional Hospital & Health Centre! Here at ERHHC we continue to see clients of all ages for a variety of conditions and channel them through a continuing variety of programs. By keeping up with the ever changing world of Ministry funding pockets for different programs we continue to be well positioned to take advantage of any that might serve our communities well. Last year this resulted in close to 400 new assessments and close to 6000 patient attendances – not including our activity in Long Term Care! Add to this CPR classes for staff, student placements, multiple liaisons with various departments, social club activities, and community poling and that makes for a busy department of three.



Infection Control: ERHHC scored 91% in HAND HYGIENE

Patient Experience: Acute Care & Emergency Departments received a 97% in their patient satisfaction survey

Health Records/Registration



Health Records Staff

L to R: Sandy Lamothe, Crystal Gagne, Kari Berol, Manager, Liisa Tallon, Roxanne Sakaluk

The Health Records Department is responsible for the collection, use, security and disclosure of your personal health information (your health chart). We do the transcription for many Consultations, Clinics, Emergency patients and Acute Care patients. We also submit all diagnosis and statistical information from Emergency and Acute Care visits to a central registry called CIHI and to the Ministry of Health.

The Registration Department is your central registration and information source. Last fiscal year we registered **37,729** outpatients and **570** inpatients. A very busy department who also receives most of the phone calls and assists the Emergency Department and the Health Records Department.

Patients and their families have the right to trust their privacy will be protected by the health care providers upon whom they depend. We take this very seriously and do our very best to protect your privacy and your information. We conduct regular audits and have policies and procedures in place should there be a breach of your personal health information. Every employee also signs a confidentiality contract.

Diagnostic Imaging / Cardiology



Cardiology

Echocardiography

We performed almost 850 echoes in 2018. Our Booking times and report turn around times have been excellent. We are looking at bringing contrast echoes to Espanola which is a very beneficial tool that improves the detectability of cardiac abnormalities in more difficult echocardiograms.

Cardiac Clinics

Dr C. Hourtovenko continues to provide us 2 clinic days per month with the aid of Joanna Hearn RN. Demand is very high for this clinic. Rest assured that all referrals are vetted and prioritized by Dr Hourtovenko upon receiving them. Often, he orders testing ahead, which is quickly accommodated with results being sent to him expediently, aiding further prioritization. Patients requiring urgent attention are fit in to see him. On occasion ERHHC patients may be seen at Dr Hourtovenko's office in Sudbury to facilitate more urgent cases.

Heart Health Program

Espanola Regional Hospital and Health Centre along with the Espanola and Area Family Health Team have assembled a multidisciplinary team to aid in the treatment and management of cardiac disease. This consists of exercise programming, smoking cessation, registered dietician, social worker, certified diabetic educator, physiotherapy rehab, hypertension management, medication review, cardiac education sessions, cardiology consultations and diagnostic testing. Once a patient is referred, a case manager will then do a thorough intake assessment and coordinate their appointments with the appropriate health care professionals to assist with lifestyle modifications for optimal cardiac health and wellness. This provides a more complete health/social history for individuals enabling a more focused assessment which ensures that patients are getting the resources that they need.

Diagnostic Imaging

In early 2018, we updated our general and vascular ultrasound units. These new units are state of the art allowing us to better visualize different pathologies. There are some new features such as 3D which help the technologist get the best images possible for interpretation by the radiologist. (Although as a patient, the most noticeable feature is the integrated gel warmers found on these units.) Now that we have this equipment in place, we are in the process of looking at a new Xray/ fluoroscopy suite. This is a considerable capital investment however the advancements in technology will reduce patient radiation dose and at the same time improve image quality. Ergonomics for staff and general workflow will also greatly benefit. These purchases show the community the commitment ERHHC has to ensure we have up to date equipment.

Emergency / Acute Care

Acute Care

Total # of admissions: **525**
Average Length of Stay: **7.5** days

After the ERHHC's successful launch of implementing electronic medication administration records (eMAR) in which we were the pioneers in north eastern Ontario, we have had requests from hospitals across the north requesting an onsite visit specifically to review our medication management processes. Two hospitals have completed their onsite visit and another hospital will be onsite for their tour in June, 2019.



ERHHC continues to move forward with the use of technology to provide quality and safe patient care by implementing the use of Smart Infusion Pumps in the Emergency Department and Acute Care. ERHHC purchased 8 new Smart Infusion Pumps and onsite training was provided to all nursing staff in January 2019.

Emergency Department

Total # of Visits: **12,868** (approximately 1000 visits lower than 2017/18)
Average Length of Stay for Complex patients: **2.67** hours (ERH continues to be well below the provincial target of 8 hours)

In 2018 ERHHC had set a goal to have 100% ED & Acute Care clinical staff trained in Non-Violent Crisis Intervention. We were successful in reaching that goal and will now start our every two year recertification.

May of 2018 the Emergency Department participated in the Safe Grad Event by providing a mock trauma demonstration for the local high school students. The Safe Grad Event was in partnership with the local EMS, Espanola Regional Police, Bourcier Funeral Home and the Espanola High School. Due to the success of the 2018 Safe Grad Event there will be another event on May 30th, 2019 with the addition of the OPP.



The Opioid Crisis is real and is being experienced in all communities across the country. In November 2018, the Rapid Access Addiction Management (RAAM) clinic opened at the FHT and educational opportunities were provided to the ED & Acute Care Clinical Staff. The ED & Acute Care Clinical staff received training from the Public Health Unit on the dispensing of Naloxone kits to patients/families for individuals at high risk of overdosing on opioids.

Hospice

Specialized end of life care was provided for 26 patients/families in ERHHC's Hospice suite with an additional 15 patients/families receiving this care in alternate rooms on Acute Care. ERHHC's Hospice/Palliative Working group continues to work on internal and external processes with community partners to strengthen the Hospice/Palliative Care Program in Espanola.

Ongoing education is offered for the physicians and nursing staff on Acute Care who provide palliative and end of life care for patients/families with an additional 5 ERHHC staff members being certified in Learning Essential Approaches to Palliative Care (LEAP).

Pharmacy

The Ontario College of Pharmacists (OCP) returned for a follow up visit from their previous inspection in the fall of 2017. The pharmacy staff with the assistance of the Clinical Informatics and Material Management were commended by the OCP inspector on the quality and safety improvements that had been implemented since their previous visit 6 months earlier. The two visits from the OCP prepared us well for Accreditation in the fall of 2018 where ERHHC was very successful.

ERHHC pharmacy staff continually look for efficiencies in their medication management and cost savings.

Information Technology / Clinical Informatics



L to R Brad Crane, Nick Strong, Monique McLurg, Sheryl Flynn

Our IT/CI department have added a few new faces to their team, Nick Strong, Helpdesk Technician, Monique McLurg, Tier II Technician and Jacob Antonio, Helpdesk Technician Blind River.

They have had a very full year completing several projects,

- VMWare Virtualization Server upgrade completed to prepare for hardware refresh in 20/21
- 50 phones were rolled out to staff to replace end of life hardware
- 20 new desktop PCs were purchased to replace staff computers that were older than 5 years
- Integrated electronic referrals processes

Completed **2,893**
work orders!

The IT Department is excited to participate in the **ONE** project to advance how information systems can support clinical care.

Dietary

Our Dietary Department whips up approximately **2250** meals/snacks per week! All prepared in our



Laboratory



Our Lab has been very busy! They have performed 154,472 In house tests, 14,063 referred out tests, 2805 ECG's/holters and served 23,042 patients!

Central Supply / Receiving



This is the shopping & receiving department!
It is their mission to source the best pricing on every item that enters our facility, have it delivered to the hospital in a timely manner and then roll it out to the appropriate department.

Laundry / Housekeeping

Last fiscal year, the laundry team washed **102,992.4 kg** of laundry.
This includes **57,393.9 kg** of residents clothing from Long Term Care.



Queensway Place

Queensway Place, 18 unit assisted living, supports the community by providing the use of the library for agencies such as the Alzheimer's society monthly meetings. Social gatherings include live music, and tea socials.



Maintenance

It has been another busy year in the maintenance department. Below is a list of projects that have been completed over the last year.

- ◆ The back-up generator and transfer switch for the hospital has been replaced. The generator that was removed was over 30 years old and original to the hospital.
- ◆ The medical air compressor and air dryer was replaced this year. The old system was 20 years old and obsolete.
- ◆ The medical vacuum system was replaced this year. The old system was 20 years old and obsolete.
- ◆ We have continued the LED lighting upgrade in the facility. 70% of the indoor lighting has now been converted to energy efficient LED bulbs and fixtures. We also added new light posts to the front parking lot to improve lighting. The employee parking lot now has LED light fixtures as well. 90% of the outdoor lighting is now converted. The other 10% will be converted in 2019.
- ◆ We have started the replacement of all the heating and cooling coils in the air handling units for the hospital. There are 11 units in total that supply heating and cooling to the facility. The coils are over 30 years old and original to the hospital.
- ◆ Our Salto electronic locking system upgrade continued this year. We are now 90% completed.
- ◆ Both steam wells in our servery were replaced this year.
- ◆ We completed a renovation to room 201 in acute care. We replaced the wall guard, flooring, wall base, bathroom vanity, sink, plumbing, lighting fixtures and freshly painted.
- ◆ We replaced and installed new insulation to our heating and cooling pipes in the pent-house. This will improve the efficiency of our heating and cooling systems.



- ◆ We had the interlocking stone removed from the Family Health Team entrance and had a new concrete pad poured. The interlocking stone had deteriorated due to winter salt and become a hazard to walk on.
- ◆ We had an annunciator panel installed in the emergency department. This panel, through our building automation system, sends out an audible alarm in the emergency department if a critical system within the building fails. The emergency department can then notify the maintenance staff on duty or on call.

Honouring Our Volunteers



Quality Improvement


Espanola Regional Hospital and Health Centre (ERHHC) prides itself on delivering optimal, high quality care and service to all it serves. As such, we participate in Accreditation Canada's Qmentum Program every four years to ensure we are meeting standards of excellence in healthcare. The program focuses on quality and safety in all aspects of care and services throughout the organization. Best practice guidelines are utilized in a multitude of different services, settings and populations to confirm an organizations commitment to quality and safety. National Standards of Excellence are used to assess areas including; leadership, governance, infection control, medication safety, risk management and patient and staff safety.

RAAM

Espanola Rural Health Hub Pilot Project was foundational in strengthening our community relationships and facilitating a community approach towards the development of a Rapid Access Addiction Management (RAAM) Clinic as a spoke site. Health Sciences North, who is our hub site, supported and guided us through the creation and implementation phases. The success of our RAAM Clinic implementation was built upon existing relationships with our pain management specialist, primary care providers, Family Health Team providers, ED physicians and nurses and our relationship with our local Community of Care Planning Network Mental Health Providers. A mentoring model was embedded in our RAAM Clinic development to provide supportive education and training for all providers on substance-use disorders and pathways of care for patients who enter at various points of the system. Patient referral from our Emergency Department, Primary Care Providers, Community Agencies or walk-ins to the RAAM Clinic can access timely and effective Addictions Care five days of the week. Our partnership with the Public Health Unit allowed us to embed the distribution of naloxone kits in our ED and RAAM clinic. All hospital nurses and Registered Pharmacy Technicians received education on the use of the kits and how to educate patients on their use.

Mental Health

We have continued to build upon work that was done in early 2017, when it was recognized through patient and provider feedback there was a delay in accessing mental health services, specifically psychiatric services, and schedule 1 facility beds for patients in our community. In collaboration with HSN's Adult Psychiatry Unit we continue to strive for an OTN psychiatric assessment on all Form 1 patients within 24 hours of admission. The pilot project was successful in reducing the length of stay and need for transfer to a Schedule One Facility by approximately 50%. We continue to focus on timely access to psychiatry and also to strengthen our referral pathways to urgent psychiatry services if patients are discharged from our community hospital so they are connected to community mental health supports on discharge.



99.9%

In October of 2018, ERHHC participated in the Accreditation Canada Qmentum process over a four day period. A survey team of two, overviewed quality standards, required organizational practices and observed the ERHHC Team in action. As a result of this survey we scored 99.9%. ERHHC was recognized for several quality improvement accomplishments which have been highlighted below:

- Renovation to the Emergency Department and the Radiology Department
- Partnerships and Outreach to First Nations Communities
- Establishment of a Patient Advisory Council
- Recruitment of Family Physicians
- Dynamic Leadership
- Integrated Teamwork
- Willingness to Embrace Change
- Consolidating Partnership: Process Mapping
- Commitment to Excellence
- Community and Regional Involvement
- Involvement of Patients and Families in Care

We were acknowledged for being a model of care facility and for being a true example of integrated care across all health sectors. The surveyors also commended us for our great teamwork and respect for one another which allows us to be innovative and diverse with the type of quality care we deliver to our community.

Patient Advisory Council

Significant growth has occurred with our Patient Advisory Council (PAC) over the past year, which now includes PAC representation on several committees throughout the organization. The PAC played an integral part in helping us to meet Accreditation Canada standards and QIP initiatives executed in relation to patient and staff safety. Our PAC committee has provided feedback and suggestions on policies and procedures such as our ethical framework for decision making, discharge and admission protocols, and patient safety brochures. PAC committee work will continue to be integrated in all of our quality and safety initiatives as we recognize that the patient perspective is paramount to ensuring our “Patient First” philosophy.



Aboriginal Partnerships

Improvements in collaboration with our Aboriginal Community Partners resulted from an initiative we put in place January 2018 to identify Aboriginal patients presenting at the point of registration and educating them on the services that are available for them at the hospital and in the community. We embedded a process whereby patients were asked at outpatient registration if they identify as Aboriginal, Metis or Inuit. They are also asked what First Nations Community they are affiliated with and if they reside in the community. The data that has been collected has helped immensely to work with our Aboriginal Community Partners to identify what services patients are accessing and where opportunities for care collaboration or integration can occur. As well we created an automatic notification to the Aboriginal Navigator if the patient identified as Aboriginal and was admitted to the hospital. We have since expanded on this to include a daily report that informs the Aboriginal Navigator of all admissions and discharges of patients who have identified. This initiative has helped to create a more seamless discharge planning process for those patients living in our surrounding Aboriginal Communities.

Workplace Violence

Incidents of workplace violence have been an emerging significant safety issue for hospital employees, and ERHHC recognizes the substantial risk that our healthcare workers face. We believe that workplace violence can be reduced or prevented by creating a workplace environment and organizational culture that prevents problems, protects the staff/patients and pursues strategies for change. Espanola Regional Hospital and Health Centre is committed to ensuring the safety of our staff and patients and have placed significant focus on prevention of workplace violence. As such, we have implemented several provisions to help our employees manage incidents of workplace violence. (WPV)

In keeping with our Accreditation Action Plan and Quality Improvement Plan, we have adopted an initiative that truly supports the ongoing need to mitigate risk of workplace violence to our staff and patients. We have taken a very proactive approach to the prevention of workplace violence by performing risk assessments twice yearly. A comprehensive workplace violence risk assessment is performed on a yearly basis and workplace violence risk re-assessments are completed on a bi-annual basis. These assessments are done by department and are attended by the department manager, frontline employees, a member from our Joint Health and Safety Committee and the CQI Manager. This method for assessing risk encourages the frontline staff to think about what could happen and looks back at the previous risk assessment to help determine if that risk still exists and if there is the need to implement more to support the risk. During these assessments we also review the strategies that were to be completed as identified on the previous assessment to ensure that they have indeed been implemented. This system promotes accountability both departmentally and on an organizational level as the senior administration team is involved to approve these safety enhancements. This proactive approach to reducing incidents of workplace violence strongly requires the support and commitment of the senior administrative team as it consumes fiscal and human resources.

A main focus for this year is the development of a WPV Task Force. This committee will be chaired by the Human Resource Manager and co-chaired by the CQI Manager. Representation will include frontline staff from both unions and non-union within our organization, departmental managers, a member from our Joint Health and Safety Committee, our Public Relations Officer and a member of our Patient Advisory Council. The goal of this task force will be to place emphasis on raising awareness for prevention of workplace violence throughout the facility. Efforts will be concentrated on strategies to communicate workplace violence incidents and develop strategies to reduce the risk to our patients and staff



Paula Mitroff, Continuous Quality Improvement

Espanola & Area Family Health Team



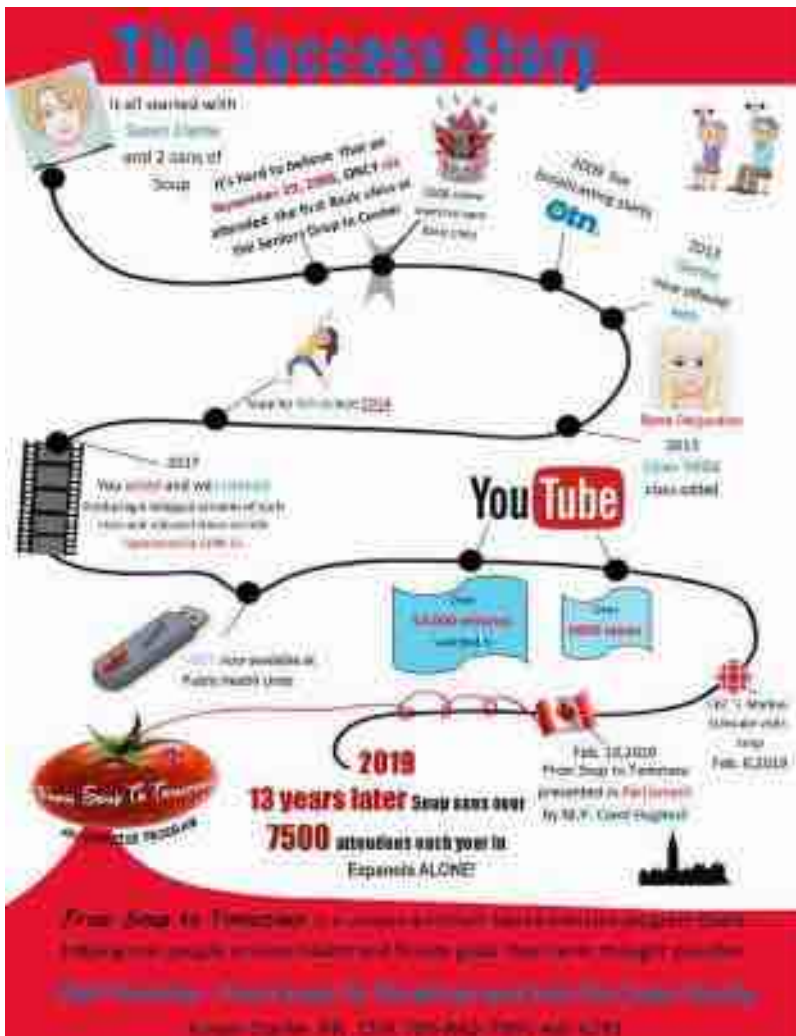
The Future of the Regional Approach to Healthcare Northeastern Ontario Family Health Team Network The North Stars – Leading the Way into Collective Action

As primary care teams become increasingly careful with resources, collaborations and partnerships are often the key to creating new programs. In northeastern Ontario, FHTs have taken this idea to the next level. Twenty-seven have joined together as members of the Northeastern Ontario Family Health Team Network (NEOFHTN) to implement a large-scale quality improvement program tailored to the specific requirements of their communities.

The genesis of the NEOFHTN QI program recognizes the importance of the standardization of program measures in order to facilitate a shift in focus from measurement and reporting to quality improvement. The network has committed to this approach and has agreed on a common set of indicators to track performance for the nine most common programs across the region. These indicators will yield information that will help improve patient experiences and care. Standardizing these measures will allow the teams to make comparisons, share lessons and collaborate.



Pictured L to R: Louise Gamelin, Family Health Team Board Chair, Jon Brunetti, Family Health Team Manager, Aimee Belanger, Public Health



Healthy Change Champions

Aimee Belanger (Public Health Sudbury and Districts), Jake Marion (Webbwood Public Library) and John Brunetti (Espanola Family Health Team) took the lead on an initiative to improve access to health care services in the small community of Webbwood. The model took the unique step of locating health services in the Webbwood Public Library, including exercise classes, cooking programs, and an Ontario Telemedicine Network (OTN) connection that allows patients to attend appointments with remote physicians, including specialists. The expansion of services brought new health care programming to Webbwood and helped reduce the need for residents to travel for health care.



Espanola Nursing Home

We have had a busy year again this year with more investments into our Long Term Care home.

We have adopted the DementiAbility methods, incorporating meaningful tasks into the lives of our residents with Dementia. Our South sitting room has been converted into a nursery for a doll therapy program through the DementiAbility concepts. House-keeping, Dietary, PSW and RPN staff are working in tandem with Life Enrichment, BSO, and Restorative Care to incorporate resident participation in routine jobs such as: setting tables, cleaning hand rails, sweeping, and clearing dishes. This has correlated to a reduction in our symptoms of depression from 15.9% to 10.3% resulting in a 5.6% improvement.

Our physicians have been working diligently on reducing the amount of antipsychotic medications prescribed without a corresponding diagnosis. This year, we reduced the overall amount from 12.1% to 9.3% resulting in a 2.8% reduction.

We have undergone 2 Ministry of Health and Long Term Care follow-up inspections related to critical incidents submitted. We are happy to report that the first inspection resulted in zero non-compliance issues and the second inspection resulted in 1 written notification. We are still waiting for our annual inspection.



Residents & staff enjoying a few of the many events held at the Espanola Nursing Home





It's not all work!

Halloween



Mock Code Drills



Work Family

