

# **Getting Our House In Order**



A Year in Review: 2014-2015

# Message from the Chair & CEO



Temiskaming Hospital's Ron Scriven, Chair of the Board of Directors, left, and Margaret Beatty, President and CEO.

This past year is one of accomplishment and challenge at the Temiskaming Hospital, and this Annual Report or year in review provides a sampling of 2014 – 2015. We invite you to read the report in which you will find our audited financial statement, photos from the past year and highlights from our patients, staff, students, physicians and volunteers across the organization.

Temiskaming Hospital's tagline this year has been "Getting our House in Order" and this is the theme of our report.

At Temiskaming Hospital, the communities we serve have reached out to us in support. Our patients and families offered to tell their story during the year.

Margaret Beatty
President & CEO

Ron Scriven Chair

# FOUNDATIONAL STATEMENTS

#### Mission

Temiskaming Hospital will provide quality patient centered health care according to evidence based guidelines and standards.

#### Vision

Temiskaming Hospital aspires to be a model for rural health care.

#### **Values**

**Human Dignity:** Each person is valued as a unique individual with a right to respect and acceptance.

**Excellence:** A commitment to strive for the best in our delivery of care.

**Compassion:** Meaningful actions that demonstrate a presence of caring which fosters healing and wholeness.

**Social Responsibility:** Actions that promote the just use of resources entrusted to us for the enhancement of human life, both personally and collectively.

Community Partnership: Our people working together with other health care providers in a climate of mutual support that enables the healing and fulfillment of human potential.

**Safety:** Ensuring a safe environment for all.



#### TABLE OF CONTENTS

Patient Care1
Clinical Programs & Services3
Medical Care4
Professional Staff5
Media6
Auxiliary8
Foundations9
Education11
Finance
Information Technology14
Human Resources14
Financial Statements15
Statistical Report16

# HIGHLIGHTS ABOUT PATIENT CARE

#### ERIN MONTGOMERY, Chief Nurse & Health Professions Officer/Director of Operations

Throughout the past fiscal year, Temiskaming Hospital has continued to build on our commitment to providing quality patient-centered care through continuous quality improvement efforts, collaboration with community partners and increasing access to

health care services within the district.
There has been tremendous effort and improvement in numerous aspects of quality and safety including the:

 Implementation of electronic nursing documentation supporting standardized best practice patient care and improved workflows for care providers;

Participation in the more<sup>OB</sup> program which integrates professional practice standards and guidelines in our
 Obstetrical Department and receipt of the more<sup>OB</sup> Patient Safety Award for Temiskaming Hospital's implementation of birthing pools;



Picture courtesy of Temiskaming Speaker

- Implementation of Tele-pharmacy services;
- Implementation of the Virtual Critical Care program which has improved collaborative care efforts between Health Sciences North in Sudbury and our local health care team for critically ill patients via Ontario Telemedicine Network (OTN); and the
- Development and enhancement of clinical partnerships for focused services such as diagnostic imaging, cardiac care, chemotherapy, outpatient clinics and stroke services.

Compliance with "The Excellent Care for All Act" has motivated our improvement strategies in supporting our mission, vision and values. The development of the Hospital's annual Quality Improvement Plan focused on priority initiatives and indicators including Emergency Department wait times, Alternate Level of Care days in acute care, hand hygiene, medication reconciliation and falls prevention best practice, patient experience, readmissions for complex conditions and total margin.

Temiskaming Hospital is pleased to be an active partner of the Temiskaming Health Link initiative. This provincial model brings together health care providers in the Temiskaming region to focus on the coordination of local health care services and to improve access to the right care, at the right time, in the right place.



**Telepharmacy Services** 

As part of our mission to provide evidence-based care, Temiskaming Hospital has also continued to advance best practices through the standardization of patient order sets, policy and procedure development, and work towards the implementation of quality-based procedures.

It is with great pride to acknowledge the continuous dedication, achievements and patient-centered contributions of our staff, Professional Staff, and volunteers each and every day.

I look forward to 2015-16 as we continue to strive toward clinical excellence and high quality health care services that meet the current and future needs of the Temiskaming District.

#### **Getting Our House In Order**





















# Clinical Programs and Services





#### On-Site Services/Partnerships

Canadian Mental Health Association (CMHA)
CBI Physiotherapy & Rehabilitation Centre
Community Cancer Care
HSN Chemotherapy/Oncology
North East Community Care Access Centre
North Eastern Patient Transfer Service (NEPTS)
Northern Ontario School of Medicine (NOSM)

Spiritual Care Services
Timiskaming Diabetes Program
Timiskaming Health Unit
Timiskaming Home Support
Timiskaming Palliative Care Network
Victim Crisis Assistance and Referral Services (VCARS)
VitalAire

#### **Specialty Out-Patient Clinics**

Cardiology Gynaecology Nephrology Neurology Ophthalmology



Orthopedics Pediatrics Physiatry Psychiatry Urology

# HIGHLIGHTS ABOUT MEDICAL CARE

#### DR. KHALED ELGADI, Chief of Staff



2014/15 has been challenging and a time for learning about the role and its leadership opportunities for medical staff. I thank my colleagues for their ongoing support.

In 2014 our hospital decided to undertake a Voluntary Operational Review (VOR) - in the face of a significant multi-year deficit. The review was followed with a number of follow up reports in many departments, for example the Surgical Services Review with our partner in surgery, Kirkland and District Hospital. Significant changes having a focus on improving quality of care and efficiencies have been implemented at Temiskaming Hospital since then.

One of the highlights of the VOR and my year as your Chief of Staff is the clinical partnership for medical imaging services. The hospital moved from a private sector radiology company to the radiology team under Dr. Ashley at Health Sciences North. This change in the radiology team has resulted in a 4-fold increase of onsite services with additional access to diagnostic and interventional procedures. Through the Health Sciences North radiologists, we have access to training opportunities for our medical technologists. As a result, they will be able to perform more tests for our patients.

I can proudly say that the impact of these changes is appreciated in our district as our patients avoid the five hour round trip to Sudbury for tests and this is just the start of our partnership with Sudbury.

I want to take this opportunity to thank our medical staff for supporting the new radiology team and for their patience during the transition. As well, the excellent teamwork from administration has resulted in regular management of the transitional issues brought forward by our medical staff.

The implementation of the physician voice recognition software system has resulted in shorter turnaround times for radiology reports to be available for our physicians. Secondly, the transcription services have been improved for faster turnaround times to our physicians and their patients.

The next year is going to be challenging, too. We have to tackle existing and anticipated medical staff vacancies. As Chair of the newly established Medical Human Resource Committee, our mandate is to create short and long term plans to address these vacancies. One of the system-wide recommendations is to have joint meetings with Englehart and District Hospital and Kirkland and District Hospital to leverage our opportunities in recruitment and in resident / student placement.

Lastly, I want to take this opportunity to stress our need for more fundraising from our Foundation as this will support the much needed patient care equipment in the radiology department and in hospital services.



Left to Right: Dr. G. Percy, Dr. J. Jeffrey, Dr. C. Blount

# PROFESSIONAL STAFF LEADERSHIP

#### EXECUTIVE

Chief of Staff: Dr. Khaled Elgadi

President: Dr. Femi Olokodana

Vice-President/Senior Advisory Physician: Dr. Andre Hurtubise

Secretary: Dr. Patrick Logan

#### CHIEFS OF SERVICE

Anesthesia: Dr. Chris Blount

Dentistry: Dr. John Marcassa

Emergency/Special Care: Dr. Glen Percy

Medicine: Dr. Colleen Davies

Obstetrics/Gynecology: Dr. Steve Sears

Surgery: Dr. Khaled Elgadi





#### MEDICAL DIRECTORS

Diagnostic Imaging: Dr. Lalitha Shankar

Laboratory: Dr. Anurag Chopra



#### CLINICAL ADVISORS

Cardiopulmonary Program: Dr. Andre Hurtubise

Day Medicine Program: Dr. Glen Percy

Rehabilitation Dr. Don Davies

Long Term Care Dr. Don Davies

NOSM Liaison Dr. Stacy Desilets

### IN THE MEDIA

#### PRESCRIPTION RENEWAL CLINICS



Temiskaming Hospital is proud to partner with Centre de santé communautaire du Témiskaming to make these clinics possible.



# TEMISKAMING HOSPITAL PRESCRIPTION RENEWAL CLINICS FOR PEOPLE WITHOUT A FAMILY DOCTOR



http://www.nomj.ca/2015/03/12/prescription-clinic-eases-burden-on-er.html

"It was indeed a pleasure to have the nurse practitioners serve our community out of the Hospital Clinic area. Once again, many thanks to the Centre Du Santé and the Haileybury Family Health Care Team for making these clinics possible in which we were able to see approximately 50 unattached patients."

Mark Tysick, Clinical Nurse Manager

#### HUMAN TOUCH AND MOREOB AWARDS

http://www.nomj.ca/2014/06/30/tesmiskaming-hospital-celebrates-two-awards.html

# OHA PRESIDENT & CEO ANTHONY DALE, VISITS TEMISKAMING HOSPITAL





#### **HEALTH LINKS**

http://www.nomj.ca/2014/12/19/temiskaming-health-links-boosts-care-for-highest-users.html



Northern Ontario Medical Journal » Temiskaming Health Links boosts care for highest users



Spiritual Care Committee



Temiskaming Hospital Board of Directors

Site visit from Ontario Hospital Association, President & CEO Anthony Dale.

### HIGHLIGHTS FROM THE AUXILIARY

#### DIANE CHARTRAND VACHON, President



The year 2014 was very busy and a productive year for the Temiskaming Hospital Auxiliary.

Membership this year is up to 75 with approximately 65 active members. We are very proud to have among us four Provincial Life Members and five Local Life Members.

In November 2014, 5 delegates attended the HAAO Convention in Toronto. They had the opportunity to participate in the following workshops: Benefits of

Naturopathic Healing; Connection in Medicine; Harmony Within Intergeneration Volunteer Team; It's a Zoo Out There!; Volunteer Patient Service Training. All workshops were extremely interesting and educational. Upon their return, the delegates gave a brief report to the members at our monthly meeting.

Our main financial contribution this year went towards the Ontario Telemedicine Network (OTN) Department. A \$30,000 donation was made for the replacement of three OTN Systems. These systems provide enhanced access to quality health care in Temiskaming Shores and area. Patients are able to have appointments with their specialists in the comfort of a hospital room in their own community, reducing the cost, time and stress associated with traveling out of town.



Annual General Meeting of the Auxiliary



Volunteer Hairdressers

Our four \$1,000 bursaries for post-secondary education are another significant contribution to our community. Two graduating students from both schools, Temiskaming District Secondary School and École Secondaire Sainte-Marie received a bursary for pursuing studies in the medical field.

The Auxiliary also provided funds for prizes given out at different activities for long term care patients, such as decorations for special events, flowers for Mother's Day and Valentine's Day, treats for Easter and other items for the activity room.

The sale of our unique garments, decor and accessories in the Gift Shop is one of our main sources of fundraising. The sales of Nevada tickets as well as our annual raffles are also important sources of revenue. This year we also launched a Facebook page as a method of advertising our Gift Shop and what we have to offer.

Due to the closure of the hospital cafeteria at the end of 2014, the Gift Shop is now selling coffee and tea to staff and visitors.

A Volunteer Appreciation Dinner was held May 25th. We have 6 new members, 4 adults and 2 students.

Four delegates were in attendance at this year's Spring Conference. A summary of the conference will be presented to our members at our next meeting.

# **FOUNDATIONS**

Our two foundations are critical to Temiskaming Hospital's efforts in achieving district-wide, rural and northern excellence, making a difference in patients' lives.

The Hospital Foundation helps fund new and replacement medical and patient care equipment. This ensures that our hospital Board can continue to deliver high quality patient care.

The CAT Scan Foundation contributes to the operating costs of the CT scan.





CAT Scan Foundation Board of Directors



Picture courtesy of Temiskaming Speaker

















Page 10

# OUR ROLE WITH NORTHERN ONTARIO SCHOOL OF MEDICINE

**DR. STACY DESILETS**, Site Director, Rural Stream NOSM FM RoCS Chair, South Temiskaming Local Education Group



The 2014-2015 academic year saw Temiskaming Hospital continue its tradition of being a highly sought after training spot for students from the Northern Ontario School of Medicine (NOSM) and other Ontario medical schools. We once again hosted 4 NOSM students in their third year of medical school training from September to April as part of NOSM's Comprehensive Community Clerkship. In addition, we welcomed two Family Medicine residents to our community full time as part of NOSM's Rural Stream of the Family Medicine Program. A third resident has also joined recently. Lastly, we hosted a large number of shorter placements for both undergraduate medical students and Family Medicine Residents. Perhaps our most exciting news is that two of our current residents have signed return of service contracts to practice Family Medicine in

Temiskaming Shores upon graduation! We certainly are hopeful that this trend of recruiting learners will continue to help us fill gaps in many areas of our physician staff.

In other NOSM news, our local faculty have formed the South Temiskaming Local Education Group (LEG) which will focus on delivering both excellent teaching for medical learners as well as Faculty Development and Continuing Medical Education (CME) for our local docs. This initiative is funded by NOSM and NOAMA (Northern Ontario Academic Medicine Association). We have big dreams for this organization including research, leadership and mentoring programs, and locally created and delivered CME. We believe the South Temiskaming LEG will strengthen our role in teaching tomorrow's physicians!





NOSM Comprehensive Community Clerkship (CCC) Students Orientation Day

### HIGHLIGHTS FROM FINANCE

#### KAREN BERTI, Chief Financial Officer / Director of Corporate Services



The hospital completed the development and implementation of the Hospital Improvement Plan during 2014/15. The Hospital Improvement Plan was developed as a result of the Voluntary Operational Review conducted in May 2014.

The voluntary review identified approximately \$1.6M in savings, and identified \$300K in one time investments and \$150K in capital investments. The one time investments included a governance review, education for management and investments in a new budgeting system for the organization. The capital investment was for the purchase of a second ultrasound machine to reduce wait times and improve patient care.

The hospital improvement plan was developed over two years and will achieve a balanced positon by the end of 2015/16. The Temiskaming Board approved the hospital improvement plan in November 2014 and the NE LHIN approved the plan in December 2014.

All of the voluntary review recommendations, with associated savings and one time investments were fully implemented by March 2015. The second ultrasound machine purchase was completed through a Request for Proposal, in collaboration with the St. Joseph's Capital Group and the purchase order was issued to Siemens on May 28th, 2015.

The outstanding voluntary review recommendations are as follows:

- Development of a fundraising campaign for the hospital. This is currently in the evaluation stage.
- Utilization Management and Decision Support Function. This is currently in the development stage and will be implemented by late fall 2015.

The hospital has completed the development of the 2015/16 operational budget and a three year capital call. This was completed with input from all managers and physicians. All contractual obligations and funding announcements were incorporated in the operational budget and will achieve a balanced position.

The capital call will be prioritized and will be provided to the Hospital Foundation for consideration in their fund development and campaign plan.



Administration, Finance and Human Resources

The hospital will continue to review and analyze both financial and clinical results in an effort to maximize funding through the Hospital Services Funding Model. The hospital management team is working on the next phase of operational efficiencies to ensure that the hospital can sustain a balanced positon beyond 2015/16 and meet the capital requirements of the hospital.







Trauma training session with EMS and TH Professional Staff



A generous donation made to the Obstetrics/Level 1B Nursery











# SHARED INFORMATION TECHNOLOGY ACROSS THE TEMISKAMING DISTRICT

#### TEK (TEMISKAMING, ENGLEHART & KIRKLAND HOSPITALS)

Temiskaming Hospital, Englehart and District Hospital, and Kirkland and District Hospital (TEK) have determined that there are benefits to be achieved by the Hospital Corporations working co-operatively together to provide information technology (IT) services and support for their mutual benefits.

A Joint IT Steering Committee with representation from the three sites has been created to oversee the shared IT partnership.



The Hospital Corporations jointly appointed an Integrated Manager of Information Technology. The Manager has both the authority and responsibility, on behalf of all of the Hospital Corporations, to provide the IT Services across the TEK sites.



The creation of this partnership enabled the TEK hospitals to receive one time funding of \$250,000 for the implementation of the following shared projects: Learning Management System, Facilities Management Software, Risk Management Software, Occupational Health Software, Patient I.D. Bar coded bracelets and Document Control Software.

With the creation of a common infrastructure, future sharing opportunities between the three Hospital Corporations are more easily achievable.

# **HUMAN RESOURCES**

This year, in spite of the need for a reduction in our employee complement, we implemented a thoughtful Human Resources Plan using approaches like voluntary exits, retirement packages and the elimination of vacant positions, all to mitigate against involuntary layoffs.



# FINANCIAL STATEMENTS

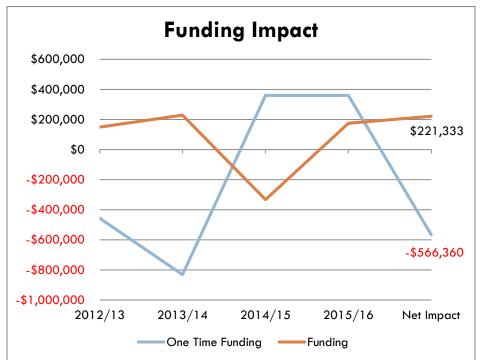
#### 2014/15

	2015	
		2014
Revenue:		
Ministry of Health and Long-Term Care /		
North East Local Health Integration Network	\$ 20,203,035	19,356,737
Cancer Care Ontario	739,371	596,204
Patient services	3,497,247	3,791,219
Other	2,239,097 26.325	2,148,828 59.725
Amortization of deferred capital contributions - equipment	26,705,075	25,952,713
Evenence		
Expenses: Salaries and wages	14,438,715	14,071,170
Employee benefits	3,599,599	3,636,217
Medical staff remuneration	2,279,184	2,341,163
Supplies and other	4,672,600	4,238,489
Drugs	957,243	1,254,341
Medical and surgical supplies	631,397	837,685
Amortization - equipment	544,014	656,032
	27,122,752	27,035,097
Deficiency of revenue over expenses for Ministry purposes	(417,677)	(1,082,384
Amortization - deferred capital contributions for buildings,	05.044	05.044
land improvements and building service equipment	85,311	85,311
Amortization - buildings, land improvements and	(000.054)	(500.005
building service equipment	(683,951)	(569,205
Deficiency of revenue over expenses	\$ (1,016,317)	(1,566,278
See accompanying notes to financial statements.		
On behalf of the Board:		
Director		

March 31, 2015, with comparative information for 2014		
	2015	2014
Assets		
Current assets:		
Cash	\$ 1,553,502	1,000,606
Investments (note 2)	4,601,972	4,125,903
Accounts receivable (note 3)	842,485	1,179,239
Inventories	312,518	261,416
Prepaid expenses	273,566	282,682
	7,584,043	6,849,846
Capital assets (note 4)	14,491,751	15,294,601
	\$ 22,075,794	22,144,447
Current liabilities:	\$ 	
Liabilities, Deferred Contributions and Net Assets  Current liabilities:  Accounts payable and accrued liabilities (note 6)	\$ 3,936,798	3,803,588
Current liabilities:	\$ 	3,803,588
Current liabilities: Accounts payable and accrued liabilities (note 6)	\$ 3,936,798 3,936,798	3,803,588 3,803,588
Current liabilities: Accounts payable and accrued liabilities (note 6)  Deferred capital contributions (note 7)	\$ 3,936,798	3,803,588 3,803,588 1,398,611
Current liabilities:	\$ 3,936,798 3,936,798 1,971,450	3,803,588 3,803,588 1,398,611 1,439,842
Current liabilities:  Accounts payable and accrued liabilities (note 6)  Deferred capital contributions (note 7) Employee post-retirement benefits (note 8)	\$ 3,936,798 3,936,798 1,971,450 1,474,049	3,803,588
Current liabilities:  Accounts payable and accrued liabilities (note 6)  Deferred capital contributions (note 7) Employee post-retirement benefits (note 8)  Total liabilities	\$ 3,936,798 3,936,798 1,971,450 1,474,049 7,382,297	3,803,588 3,803,588 1,398,611 1,439,842 6,642,041
Accounts payable and accrued liabilities (note 6)  Deferred capital contributions (note 7) Employee post-retirement benefits (note 8)  Total liabilities  Net assets	\$ 3,936,798 3,936,798 1,971,450 1,474,049 7,382,297 13,652,279	3,803,588 3,803,588 1,398,611 1,439,842 6,642,041 14,668,596

# HOSPITAL FUNDING OVER THE LAST 4 YEARS

#### 2014/15

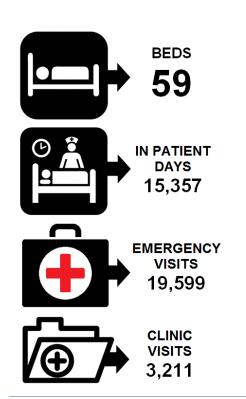


Funding Impact				
Fiscal year	One Time Funding	Funding		
2012/13	-\$455,200	\$149,200		
2013/14	-\$831,500	\$229,797		
2014/15	\$360,170	-\$332,664		
2015/16	<u>\$360,170</u>	<u>\$175,000</u>		
Net Impact	-\$566,360	\$221,333		

Note: In 2012/13 the Hospital transitioned to the new funding formula.

The net loss to the budget over the last 4 years is \$566,360.

# PATIENT CARE STATISTICS



C	Actual to Mar 15	
Total Weighted Ca	2,380	
Modical Surgical	Patient Days	14,722
Medical Surgical	Separations	1,537
Intensive Care	Patient Days	931
	Patient Days - Adult	763
Obstetrics	Patient Days - Newborn	602
Obstetrics	Separations - Adult	315
	Separations - Newborn	295
Chronic Care	Patient Days (Resource Utilization Group days)	593
Operating Poom	Inpatient Cases	357
Operating Room	Outpatient Cases	1,583
	Emergency Visits	19,599
Ambulatory Care	Chemotherapy Visits	1,685
	Clinic Visits	3,211

#### PATIENT CARE STATISTICS CONTINUED

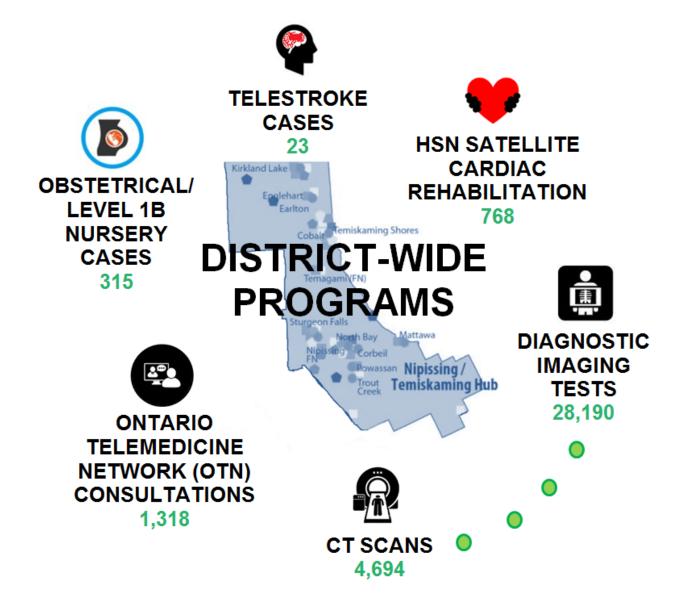












# **TEMISKAMING HOSPITAL**

421 SHEPHERDSON ROAD

NEW LISKEARD ON POJ 1P0
TEL: 705-647-8121 Bus. Line: 705-647-1088 Fax: 705-647-4154