



Volume 6, September 2019



**ACCREDITATION**  
CANADA

**267 Days until Accreditation 2020**

**Hospital Highlights – An Expression of Gratitude** – I just wanted to say how proud I am to be working in such an amazing little hospital! This Sunday really tested our team work. Med/surg was full, the Emergency department was overflowing with admissions and critical patients, we had to open up the OR recovery suite and admit four patients there. The obstetrical unit also took two patients so that we could make room for the doctors to see patients in the ED. A big thank you to all the amazing staff including the nurses, PSWs, laboratory, dietary, housekeeping, the front desk staff and ward clerk and also thank you to the wonderful doctors, Dr. Logan, Dr. Lacasse, Dr. Currie and Dr. Pretty for being so patient while we sorted out the madness. You all made the day go so smoothly! I am so thankful to be part of the amazing Temiskaming Hospital Team. Thank you. ~Stacey

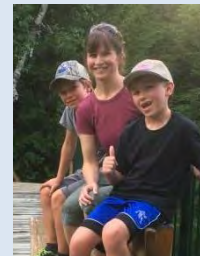
**Hospital Highlights – One-Day Breast Screening Marathon at TH**  
On June 19, 2019 Temiskaming Hospital's Diagnostic Imaging department participated in the Cancer Care hosted Annual Regional Mammoth day. We would like to say a big thank you to all of the staff and patients who came out to participate making this another successful year.

Temiskaming Hospital's mammography services perform on average a total of 1400 mammograms annually. As active participants in the Ontario Breast Screening Program (OBSP), the majority of the mammograms align with this program. In order to continue providing this invaluable program, Temiskaming Hospital maintains Canadian Association of Radiologist (CAR) accreditation.

The OBSP is a province-wide, organized cancer screening program that provides high-quality breast cancer screening throughout Ontario. Screening mammography can find breast cancers when they are small, less likely to have spread to the lymph nodes and more likely to be successfully treated. Women ages 50 to 74 are encouraged to get screened bi-annually through OBSP to receive all the program benefits.



#### Physician Spotlight



**Name:** Hillary Lawson  
**Department/Job Title:** Family Doctor  
**Years of service:** before TH: 17 years At TH: 2 months  
**Where did you attend school:** MD: McMaster; Family Practice  
**Residency:** UBC - Prince George  
**What do you enjoy most about your job:** Obstetrics and newborns

**Why did you choose New Liskeard:** We love how beautiful it is here and we were excited about the great snowy winters - but Dr. Nichole Currie threw a massive party three years ago while my family and I were visiting the area for the first time - and that did it! The hospitality and people we met at that party really stuck with us - and drew us back here three years later.

**What would be your second career choice:** Field biologist + Hobby farmer.

**Where is your dream vacation:** a month long back country canoe trip.

**What is your favourite food:** Sushi - with lots of wasabi!

#### Statistics

##### Average Occupancy Rate

2014-2018

2018/19

Year to Date

**72%**

**88%**

**98%**

## **Ontario Health Teams**

The Temiskaming Health Services Collaborative filed a self-assessment report to form the Temiskaming Health Team with the Ontario Government by the 15-May-19 deadline. On 18-Jul-19, The Collaborative was notified that the Temiskaming Health Team achieved “In-Development” status, along with 40 other Health Teams in the province. This is exactly where we expected and hoped to be. It achieves our goal of declaring that the community members of the Temiskaming District deserve to have their care managed locally and it shows the Government that we have progressed in providing integrated care.

A further 31 HealthTeams were invited to file “Full Applications” which includes completing a 38,000 word template by 09-Oct-19, a step our team felt we could just not resource in time for the tight deadline. Nine more Health Teams were classified in a new category entitled “Innovative Models”. That leaves approximately 70 Health Team applicants in the “In-Discovery” category, a category that indicates that a lot more work is required to even enter the Full Application process.

The Temiskaming Health Team has a total of 24 agencies that have signed on as members; 18 signed on as Formal Partners (ready to go), with a further 5 signed on as Associate Partners (agree with concept but not ready just yet) and 1 signed on as Supporter. The first planning meeting for the Temiskaming Health Team was held on 12-Sep-19 and Mandy Weeden, Executive Director of the Kirkland District Family Health Team and I were elected Co-Chairs.

**Town Hall Meetings** – Our first Town Hall meetings were held on 30th and 31st of May. The next Town Hall meetings are scheduled for the 28th and 29th of November. The Agenda will include a variety of topics, including Ontario Health System Transformation, Operating Results for 2019/20, Capital Spending for 2019/20, ALC & Occupancy challenges and Accreditation! We also have space for topics that you would like to see addressed at the meeting, so please forward your agenda items to Carla Scott by the 22nd of November.

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## **Andrew Brown, Chief Financial Officer/Director of Corporate Services Report**

Occupancy rates have continued to apply pressure to a variety of the hospital's expenses: medical and surgical supplies, drug costs, patient food and staffing. A number of cost savings initiatives have been reviewed with a portion of the savings being reinvested to support front line staff with a concept called the “innovation reinvestment dividend”. This is a strategic initiative wherein a portion of savings are reinvested into our operating pressures, to provide relief to in-year pressures or to be forward looking in our decision making, therefore not necessarily reducing bottom line financial pressures. So far this year, innovation savings of over \$60K been identified and reinvested in front line care. The Hospital's year end forecast is a deficit of \$251K, which is a decrease of \$13K from April's projection of \$264K and a decrease of \$142K to the original budgeted deficit of \$393K. These reductions come in the face of additional staffing and material costs for increased occupancy and the Non-Urgent Patient Transfer contract.

Corporate Services, in conjunction with CUPE 4404, have recently completed a review of clerical staffing. Over the past several months, a variety of changes have been implemented. Most recently, the Hospital will be redirecting patient registration for diagnostic imaging services from reception to diagnostic imaging in order to improve patient flow.

As of July, the hospital had completed or started more than half of its non-clinical capital projects slated for 2019-20, representing approximately \$130K in spending of the total approved capital spending of \$311K for this year.

The North Bay Regional Health Centre, West Parry Sound Health Centre, and Sault Area Hospital will be going live with Meditech Expanse in October, as part of the LHIN-wide ONE Project to upgrade hospital's electronic medical records. Remaining hospitals, comprised of Health Sciences North and the North Eastern Ontario Network consortium of hospitals (21 sites, including Temiskaming) will be moving forward in the second wave, pending approval from each facilities' Board of Directors.

## **Erin Montgomery, Chief Nursing Executive/Director of Patient Services Report**

### **Ontario College of Pharmacists – Site Visit**

On June 6, 2019 the Ontario College of Pharmacists (OCP) conducted its annual site visit with Temiskaming Hospital and has been successfully accredited for 2018. *Bill 21: Safeguarding Health Care Integrity Act, 2014* provides the OCP with the authority to license and inspect pharmacies within hospitals. Hospital pharmacies are required to renew their certification on an annual basis and are subject to routine assessments by the College. OCP's hospital practice advisor assessed a total of 101 pharmacy standards including critical National Association of Pharmacy Regulatory Authorities (NAPRA) standards of practice. An action plan report has been received for standards that have been partially met.

### **Addressing the High Census**

Due to ongoing capacity constraints, Temiskaming Hospital (TH) has had an average of 0.8% of inpatients admitted to unconventional spaces through Q1 2019/20. This represents an increase from 2018/19 performance of 0.1%. Occupancy rates have averaged 98% this fiscal year to date, with 48% of in-patient beds occupied with patients that are awaiting Long-Term Care Home Placement (58% of Medical/Surgical/Complex Continuing Care beds). As of September 6, 2019 there are 28 in-patients designated Alternate Level of Care (ALC). Availability of appropriate long-term care/community based settings for patients continues to be a concern both locally and at the provincial level.

### **Improvement Initiatives Underway Include:**

#### **Communication with Partners –Transitions**

Meetings with Home and Community Care continue to review current waitlists and opportunities for enhanced community supports and resources.

*Continued on insert...*



## Temiskaming Hospital and Platinum Patient Transfer Services Sign Contract

Temiskaming Hospital is taking several steps to address overcrowding at the hospital, one of which is addressing patient transportation issues. Non-urgent patient transportation has become an issue in the past several years as Emergency Medical Services (EMS) decreased providing these services due to capacity, budget and patient safety concerns, ensuring services available for emergent cases. There have been two previous attempts to provide the non-urgent services in the area; both have been discontinued as they were not economically viable. Temiskaming Hospital has entered into a guaranteed rate agreement with Platinum Patient Transfer Services from Sudbury, which will result in a dedicated Non Urgent Patient Transportation Vehicle and staff for the Temiskaming Hospital and its patients.

"With patients not receiving timely access to care, such as an MRI, due to lack of transportation, there is significant impact to patients, staff and the health care system," stated Erin Montgomery, Chief Nursing Executive and Director of Patient Services at Temiskaming Hospital. "Staff have spent countless hours attempting to book appointments and arranging transportation, only to have transportation cancelled at the last minute..."

"We are pleased to be part of the patient care solution in this partnership with the Temiskaming Hospital", stated Scott Ryan, President of Platinum Patient Transfer Services, "We look forward to improving patient flow, providing better access to care and reducing the pressures both the hospital and its patients currently face."

*Continued on page 4*



Mike Baker, President & CEO, Temiskaming Hospital shaking hands with Scott Ryan, President of Platinum Patient Transfer Services.

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Stacey Chartier, Heather Morrow, Sally Aitchison



Sandy Grainger, Jocelyn Mailloux

Arlene Hearn, Kerry Rivard



Nicole Allen, Cindy Pearson, Stacey Chartier

Suzanne Gosselin, Charlotte Martin

### Departmental Highlights – Medical Device Reprocessing Department (MDRD) – Jamey Swartz - Support Services Manager

The Medical Device Reprocessing Department is one of the hospital's smallest departments, at only three part-time and one casual staff, but also one of the most vital. The MDRD team is essentially responsible for taking the microorganism count on surgical equipment down to zero, therefore lowering the risk of hospital-acquired infections. To accomplish this, the department picks up all soiled instruments and devices from the operating room (OR) and is responsible for: disassembling, cleaning, inspecting, reassembling, sterilizing, packaging and delivering the equipment back to the OR, all in a timely manner that coincides with a busy OR schedule. They are a flexible and committed team that does an exemplary job keeping our patients and staff safe!

### Departmental Highlights – Housekeeping – Jamey Swartz - Support Services Manager

The Housekeeping team provides one of the more visible services to the hospital and is always quick to provide a helping hand and a smile. The housekeepers work closely with Infection Control to ensure a thorough and effective clean has been completed on every one of the 135, 000 square feet in our facility. They need to pair specific cleaning products and strategies with the different types of microorganisms infecting our patients and in doing so, have been strongly affected by our increased census. With our increased census has come an increase in isolation cases, with each isolation case we have increased the cleaning time for two staff members by around 45 min. In the first quarter of this year alone we have had 370 total isolation days. The next time you see a housekeeper in the hallways; don't forget to thank them for helping to keep our facility, patients and staff healthy and clean!

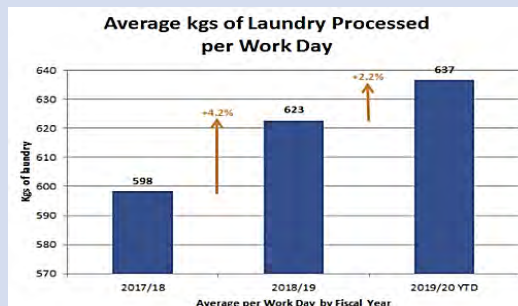
900

← Total number of endoscopes sterilized 2018/19  
Square footage of hospital cleaned by housekeeping →

135,000

### Departmental Highlights – Laundry – Jamey Swartz-Support Services Manager

The Laundry Department works behind the scenes to collect, wash, dry and redistribute all linen across the hospital. This is a department that has also been hit hard with the increased census, with an increase in patients obviously comes an increase in linen. Since the 2017/018 year we have seen a 6.4% increase in the daily kg processed in laundry, equating to on average 40 kg extra per day! This again is not only washed and dried, but collected and redistributed in a timely fashion. As our ALC patients continue to increase, this again puts more pressure on laundry as they are now collecting, washing, drying and redistributing clothing for all of our LTC and ALC patients. The laundry team is a hardworking and very positive group who can always be relied upon for a job well done!



## Employee Spotlight



**Name:** Doris Cecile Marie Maille  
**Department/Job Title:** Team Leader, RN  
**Years of service:** 33 years  
**Where did you attend school:** Cambrian College Bilingual Nursing Diploma  
**Top 3 things you do in your job:**  
1. I am part of the team and keep the boat afloat  
2. Consult for RN, RPN and PSW  
3. Wound care consultation for best practice

**What do you enjoy most about your job:** Co-ordination, management day to day on Med/Surg/LTC

**Why did you choose New Liskeard:** I was raised in Earlton and all of my family lives in the area. I am a true Northern girl and love the small town feel. Our community is tightly woven and I truly enjoy looking after them.

**What would be your second career choice:** Always wanted to be a nurse and would follow the same pathway. Love nursing.

**Dream vacation destination:** Hawaii

**Favourite food:** Sweets are my favourite but Chinese food or roast beef are top favourites.

## People Appreciation

### Upcoming celebrations:

Environmental Services Professionals Week: September 9-13

Occupational Therapy Month: October

Information Technology Professionals Week: October 7-11

Food Services Professionals Week: October 7-11

Medical Device Reprocessing Professionals Week: October 14-18

Infection Control Professionals Week: October 21-25

Respiratory Therapy Professionals Week: October 21-25

Boss's Day: October 16

Medical Radiation Technologist Week: November 4-8

Skilled Trades Professional Week: November 4-8

## Welcome Announcement

Over the past two months, we have welcomed new faces to our team.

Eric Ethier, Summer Student  
Kim Guitard, Ward Clerk  
Marissa Gray, Registered Nurse  
Sandy Grainger, Laundry Aide  
Tori Lacarte, Registered Practical Nurse  
Dr. Brandon Harvey, Medical Resident

### Personal Support Worker

Brenda Steep-Loach      Phyllis Hunter  
Caroline Van Iperen      Stephanie Nielsen  
Katie Regimbald

### Medical Students

Alexandra Valcourt      Helene Bouchard  
Damilola Bodunde      Julian Lew  
Dominique Lachapelle

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## Temiskaming Hospital and Platinum Patient Transfer Services Sign Contract *continued*

"This issue has caused significant frustration for patients and families as appointments are rebooked on a frequent basis, solely due to the lack of transportation services available" clarified Mrs. Montgomery. "Patients waiting for appointments or return trips to other facilities cause back logs in the hospital."

"This back log is one of the factors contributing to the overcrowding in the hospital" stated Mike Baker, President & CEO at Temiskaming Hospital. "Almost 50% of our patients right now should be in other facilities, based on their health care needs."

To accommodate these patients, more and more patients are staying in unconventional places, such as in Emergency or in the Operating Room recovery area. It is inconvenient for patients and inefficient for staff.

As a result, the Hospital is relocating the Chapel and renovating that room to accommodate two more beds. This room will house another two unfunded beds for the hospital to operate; however, having patients in conventional spaces is safer, more efficient and provides more privacy and more dignity for the patient.

"Although the North East Local Health Integration Network (NE LHIN) did provide some additional funding for non-urgent patient transfer last year, we continue to work with the NE LHIN to provide non-urgent patient transfer and surge funding for these situations" stated Mr. Baker.

The Temiskaming Hospital would like to thank its staff and the community for its patience and understanding as we continue to address this system-wide issue.

## Welcoming New Guests to Temiskaming Hospital

Wednesday, 21-Aug-19 Lynne Innis, President & CEO of Weeneebayko Area Health Authority (WAHA) visited TH. WAHA is responsible for health care along the Ontario side of the James Bay coast, including hospitals in Moose Factory, Attawapiskat and Fort Albany, Nursing Stations in Peawanuk and Kashechewan and a Health Center in Moosonee. Lynne is newly appointed and is the first Indigenous woman to lead a health authority.



Bruce Hawkins, Dominic Giroux, Mike Baker, Erin Montgomery



Carla Scott, Lynne Innis, Mike Baker, Erin Montgomery, Andrew Brown

Wednesday, 14-Aug-19 Dominic Giroux, President and CEO of Health Sciences North (HSN) visited TH. Dominic is responsible for both the hospital and research operations at HSN. Most of you are aware of the close patient referral and operational ties we have with HSN for Laboratory, Diagnostic Imaging, Information Technology, Cardiac Rehabilitation, Chemotherapy and Day Medicine programs.

## Newsletter Editorial Team:

Mike Baker      Patrick Rieux  
Carla Scott      Jackie Holtz

Suggestions and comments are welcomed, please email [jholtz@temiskaming-hospital.com](mailto:jholtz@temiskaming-hospital.com)

Temiskaming ■ ■ Hôpital  
Hospital ■ ■ Temiskaming  
Life Line ■ ■ Life Line

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### Patient Safety Indicator Report

In 2008, the Ministry of Health and Long-Term Care identified a number of safety indicators that all hospitals are required to publicly report as part of a plan to improve accountability, transparency and support quality improvement efforts. As per the Public Hospitals Act (PHA), all hospitals are to publicly report on patient safety indicators of each applicable indicator through their website.

Health Quality Ontario is currently reviewing these indicators for reporting and will be providing recommendation to the MOHLTC of suggested indicator amendments.

Temiskaming Hospital continues to demonstrate its dedication to patient safety by exceeding provincial averages and compliance with internal preventive strategies. Areas that can be strengthened are identified below.

#### Hand Hygiene

Our performance for Hand Hygiene both before and after interactions with the patient and/or their environment did dip below provincial averages during Q2 and Q3 of 2018/19. Communications were circulated by the Infection Control Practitioner highlighting the importance of diligent Hand Hygiene practices for the prevention of disease transmission and improving patient outcomes. Additionally volunteer staff in the Emergency Department were trained on audit completion as well as hand hygiene education to engage both patients and staff in the correct steps of hand washing. Since the implementation of these improvement strategies our performance for completion of Hand Hygiene after contact with the patient/environment has risen once again above provincial averages. Although hand hygiene before patient/environment remains below these averages, they have increased by 12% and continue to trend upwards closer to meeting our target.

#### Central Line Infections

Temiskaming Hospital did not meet the provincial average rate of 0.33 per 1,000 central line days in 2017/18 but has since exceeded with consistent rates of zero. In 2017/18 the rate was high due to the context of patients with Central Lines, as one patient of three was identified with a CLI. As well, since that time, education was provided to special care nursing staff related to the appropriate case definition for what qualifies as an internal CLI.

### Patient Safety Performance Measures Report 2019/20

Measure	Provincial Average	2017/18 Performance	2018/19 Performance	Q1 2019/20 Performance
Hand Hygiene (HHB) Before patient/environment	88.2% Compliance	87%	82%	86
Hand Hygiene (HHA) After patient/environment	91.6% Compliance	96%	88%	94
Clostridium difficile Infections (CDI)	0.20 per 1,000 inpatient days	0	0	0
Central Line Infections (CLI)	0.33 per 1,000 central line days	19.23	0	0
Methicillin Resistant Staphylococcus Aureus (MRSA) Infections	0.03 per 1,000 inpatient days	0	0	0
Surgical Safety Checklist (SSC) Compliance	99.4% Compliance	100%	100%	100%
Vancomycin Resistant Enterococci (VRE) Infections	0.03 per 1,000 inpatient days	0	0	0
Ventilator-Associated Pneumonia (VAP)	0.51 per 1,000 ventilator days	0	0	0



***Erin Montgomery, Chief Nursing Executive/Director of Patient Services Report – Addressing the High Census ...continued***

**Improvement Initiatives Underway**

Bed Capacity Planning

Clinical Leadership has conducted a capacity planning exercise to review additional bed location capacity to ensure patient flow is maintained. A new semi-private patient room is under construction to create two additional inpatient beds in response to increased occupancy demands, over and above the additional two beds already being utilized. Temiskaming Hospital (TH) will be operating 63 beds.

Reactivation / Transitional Care

On July 15, 2019, a proposal was submitted to the Ministry for targeted investment funding related to Reactivation / Transitional Care. As a priority to build capacity, improve patient flow and patient outcomes, TH requested funding for the development of a Transitional Restorative Care Program (TRCP). The Restorative Care program supports a "Home First" philosophy. The focus of the program is to provide short-term goal-oriented rehabilitative/restorative care for seniors and other individuals in a non-acute care unit /environment using an interdisciplinary care team to improve strength, endurance, and/or functioning so that they may safely return home.

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Weekly Rounds

Rehabilitation /Restorative Care Rounds have been reinstated with physician leadership, focusing on patients requiring rehabilitation, complex discharges and patients at high risk for being designated Alternate Level of Care (ALC).

Rural ALC Framework

Temiskaming Hospital has been an active participant in the development of the Rural Hospital ALC Leading Practices Guideline and is 1 of 4 hospitals throughout the province who will be piloting elements of the framework in actual practice over the upcoming year. The Rural Hospital ALC Leading Practices is a starting point for baseline self-assessment and action planning, providing a best practice approach to ALC management practices and improvement strategies with a focus on Senior Friendly Care. An internal current state review, including review of Leading practices document and self-assessment (current state), has been completed. A plan is in development to implement and trial three strategies within the framework over the next year.

Risk of Deconditioning/Functional Decline

Temiskaming Hospital has implemented the MOVE (Mobilization of the Vulnerable Elderly) program on its Medical-Surgical In-Patient Unit working to embed evidence-based practices that actively mitigate the risk of deconditioning/ functional decline and support optimal outcomes for seniors while in hospital. The MOVE program promotes early mobilization of patients 65 years of age and over. Goals of the program include decreased risk of deconditioning/ functional decline, decreased length of stay, increased rate of discharge to home / community setting, improved patient experience, and decreased falls.





# A WALK THROUGH MEMORY LANE





To date, The Temiskaming Hospital Foundation-Care Close to Home has raised

**\$4,653,351** of our **\$6,500,000** goal

Thank you to all donors

### Donor Highlights



Lucy Joseph-Smith held a lemonade stand and yard sale where she sold her baby toys, clothes, lemonade and rice crispy treats (we were lucky to try some-they were delicious!)

Lucy donated almost \$200 to Care Close to Home! We are so amazed by her generosity and willingness to donate her hard-earned money to help those in need.



The students from École publique des Navigateurs's 7th grade class built their own fidget spinners from old bike chains. They sold these fidget spinners and were able to raise \$150 which they've donated to Care Close to Home.

We are in such awe of the generosity of these students. While they may be learning about how to become entrepreneurs, they have already mastered the art of giving back to their community!



We've launched our new website:  
[www.temiskaminghospitalfoundation.org](http://www.temiskaminghospitalfoundation.org)  
Get the latest news stories and updates by visiting our website designed by INKit Design & Print.



Learn about our latest fundraiser entitled Gastro-Sponsorship by visiting our website. We are raising money to purchase a state-of-the-art Gastroscope, a lifesaving piece of equipment for Temiskaming Hospital.



Come visit our booth at the New Liskeard Fall Fair, September 12<sup>th</sup>, 13<sup>th</sup> and 14<sup>th</sup>!