

Community Connection



Pembroke Regional Hospital Fall 2020 Edition



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Website pembrokeregionalhospital.ca / Facebook pembrokeregionalhospital / Twitter @PRHhospital

PRH President And CEO Provides Pandemic Overview And Update



Pierre Noel

Now seven months or so into the pandemic, with kids back in class and many businesses back up and running to a greater or lesser extent, we are all striving to adapt to our new normal while ensuring that we do our part to keep the virus at bay.

This effort has not come without challenges, but clearly, when you look at the number of cases we have had in Renfrew County, the measures you are taking – staying home when you are sick, wearing a mask out in public, washing your hands frequently and maintaining physical distance from others, have all helped to contain the spread of COVID-19 in our community.

I, like you, am feeling the disruption this pandemic has caused in our lives, but given the now increasing number of COVID-19 cases in the province, and in particular in the Ottawa region to our east, it is clear that we must remain vigilant.

Lessons Learned

Over the summer and early fall we had the opportunity to reflect on the first phase of the pandemic, not only in terms of assessing our own response, but also on how we performed as a region in collaboration with our partners as we worked to ensure that all of our actions were well aligned and that we were maximizing the resources we had available at the time.

We have learned a lot since March and we are using this knowledge to guide our actions and to assist us in our collective planning for the weeks and months ahead.

Gratitude

We owe a great deal of thanks to the Renfrew County and District Health Unit, the Renfrew County Emergency Medical Services (EMS) and the Renfrew County Virtual Triage and Assessment Centre (VTAC) for the tremendous work they have done to date. Not only have they provided our communities with testing and tracing capabilities for COVID-19, but the Renfrew County VTAC demonstrated innovative leadership in the delivery of both testing and primary care during a pandemic. These efforts helped reduce the number of visits to our emergency departments and made our local access to COVID-19 testing and to primary care much easier than it would otherwise have been.

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Hospital Welcomes Dr. Nathaniel Abutu

Dr. Nathaniel Abutu has joined the professional staff as the hospital's third obstetrician / gynaecologist, alongside Dr. Sarah Leavey and Dr. Kayode Fadare.

Dr. Abutu comes to the region from Nova Scotia where he practiced for the past five years.

Born and raised in Nigeria, Dr. Abutu's draw to the medical field was greatly influenced by his older brother who practices medicine as a family physician in the West African country.

"My brother was one of the greatest influences on my career choice and I decided that I wanted to be part of a group of people who help others," Dr. Abutu said.

After completing medical school in Nigeria, Dr. Abutu worked for a short time before moving to Ireland where he spent 10 years practicing and furthering his education; completing

an OB/GYN diploma program and earning a Masters in public health.

Dr. Abutu is settling well into his new practice and appreciates the warm welcome he has received.

"With an interest in minimally invasive procedures and high risk obstetrics, I will be offering a broad spectrum of general obstetrics and gynaecology services, including prenatal and intrapartum care for pregnant women. I will also be providing a full range of surgical procedures in general obstetrics and gynaecology and I look forward to providing services that will meet the needs of women in the community and surrounding areas," he said.



Dr. Nathaniel Abutu

IF YOU HAVE A HEALTH CONCERN

AND DO NOT HAVE A PRIMARY CARE PROVIDER

OR CAN'T ACCESS YOUR PRIMARY CARE PROVIDER

CONTACT US 24/7 **1-844-727-6404**
 www.rcvtac.ca

MUST HAVE VALID OHIP CARD

RCVTAC
RENFREW COUNTY
Virtual Triage & Assessment Centre

FAMILY PHYSICIAN

NURSE PRACTITIONER

COMMUNITY PARAMEDIC

PRH Provides Pandemic Support To Long-Term Care And Retirement Homes

With flu season around the corner and as COVID-19 case numbers increase across the province, the Pembroke Regional Hospital is once again making preparations to assist local long-term care and retirement homes should the need arise.

"We have always had a close working relationship with health care partners in the region and the pandemic brought us even closer as we worked together to ensure the safety of the staff and residents in long-term care and retirement homes in our community," said Sabine Mersmann, Vice-President of Clinical and Support Services – Partnerships and Integration.

"Now as we head into the second wave, we are once again surveying our staff to create a list of those willing to assist in these care settings and we are working closely with our health care partners to ensure they have the support they need when and if they need it," Ms. Mersmann said.

During the first five months of the pandemic, hospital staff across the Champlain region volunteered for thousands of shifts in long-term care and retirement homes. This helped increase their staff levels so that enhanced infection prevention and control (IPAC) measures could be put in place. In addition, hospital staff were able share IPAC advice and training, while

providing those facilities with access to a regional supply of personal protective equipment to ensure that all health care workers in the region could work safely.

Locally, PRH reached out to facilities in our region and with great willingness to help on the part of our staff, PRH was able to deploy a total of 12 staff to Riverview Heights, Chartwell Pinewood and Marianhill for the period of May to July.

While a variety of staff across the organization volunteered, those who were deployed included registered practical nurses (RPNs), staff from IPAC and screeners. They each performed a variety of duties based on their expertise including administering medications, providing treatments, performing assessments, documenting care, screening staff and visitors, delivering supplies, preparing food trays for residents and then delivering the trays throughout the facility, performing IPAC assessments, educating staff and auditing IPAC processes.



Sabine Mersmann

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PRH Provides Pandemic Support ...Continued From Front Page

“Words alone cannot express the gratitude I have for the PRH, and the sigh of relief I felt on the day we received the call offering support. In the midst of the COVID-19 pandemic, PRH reached out to Riverview Heights, asking ‘What do you need?’



They were able to provide highly trained RPNs, fit testing for all staff, Infection Prevention and Control support and education. This allowed RVH to carry on with ‘business as usual’ for the residents and provide additional support to the staff.

Engaging in this successful short-term partnership opened doors to future opportunities. RVH residents, staff and management team would like to thank you from the bottom of our hearts.”

Deborah Gleason, General Manager

“The pandemic has shown us the importance of our collaborations and partnerships. Marianhill felt the impact



of the pandemic in many ways, one of them being ensuring the physical distancing for our residents and staff. This resulted in a new in-room dining service. Marianhill partnered with PRH who was able to deploy staff to the dietary department at Marianhill for several weeks to assist with this transition.

The two organizations have also been working together reviewing Infection Prevention and Control activities. In these challenging times, we have come to recognize and value partnerships like this as we tap into shared expertise for the benefit of our residents and patients.”

Linda M. Tracey, Chief Executive Officer

“Chartwell Pinewood is forever grateful for the relationship we fostered with the Pembroke Regional Hospital, especially during COVID-19. The hospital graciously deployed staff to our Retirement Residence amidst the beginning stages of the pandemic.



The PRH staff came to us as screeners, but left as so much more. Not only did their staff spend their days screening and sanitizing high touch surfaces, they were leaders here in infection, prevention and control measures. They were family to our residents during a very isolating time. They brought sunshine and friendships to our residents and staff members. They fostered a relationship that will always be cherished. Our residents ask about them daily and we miss them dearly. They assisted with activities and daily operations; bettering the lives of the residents during a very uncertain and difficult time. I cannot count how many times they acted as a listening ear and a companion to residents and staff who needed that extra reassurance.

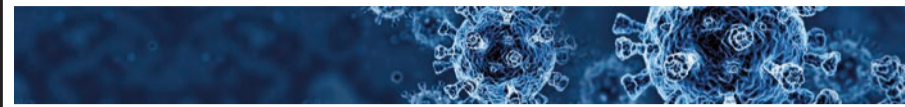
There are no words to describe how much we appreciated and continue to appreciate our relationship with Pembroke Regional Hospital. Due to the help of PRH, while following Chartwell’s excellent safety measures, we have been able to successfully keep our building free of COVID-19 amidst this pandemic. Thank you from the bottom of our hearts.”

Sarah Dagenais, Interim General Manager

For The Latest COVID-19 Information

The Renfrew County and District Health Unit
www.rcdhu.com

Government of Ontario
www.ontario.ca



Pierre Noel Provides Pandemic Update ...Continued From Front Page

On the testing front, they have been very effective with nearly 30,000 COVID-19 tests completed to date. In other communities, hospitals have been tasked with setting up and staffing testing centres and have been challenged to provide the level of access and timeliness that we have experienced here.

The Virtual Triage and Assessment Centre’s collaborative care delivery model has gained national recognition, serving as a model for others. Having this innovative and collaborative approach in place has been a huge help to our hospital and to our community.

Personal Protective Equipment (PPE) Status

Thankfully we have achieved stability in terms of our PPE resources. Great efforts were made early on with our health care partners to secure large bulk orders from international suppliers and, more recently, we have been able to tap into some new stock being made by Ontario-based manufacturers who are now producing PPE. While there are still some challenges with respect to a few individual items, for the most part, we have a stable stock of the supplies and equipment we need.

Ramp Up Of Deferred Non-Essential Services

One of the most difficult moves we had to make early on in the pandemic was the postponement of some elective procedures. While each case was evaluated to ensure that the risk of delay did not compromise the longer term health of our patients, we still recognized that any delay is stressful and anxiety provoking.

Given the stability of our situation this summer, we were relieved to receive provincial approval to begin a phased approach to the ramp up of services and have been working hard to get patients back into our facility and on track with their deferred appointments and procedures.

As you can appreciate, some of our challenges to achieving a return to full operation have had to do with ensuring physical distancing in our waiting areas and putting in place additional safety measures in some of our treatment spaces.

However, I am pleased to say that the majority of our services have returned to full pre-COVID-19 volumes. While much of this care is face-to-face, access for some services remains in a virtual or hybrid format (a mix of in-person and virtual appointments) and this mode of delivery has actually turned out to be preferable in certain circumstances. We even anticipate that some services may maintain a virtual or hybrid delivery model when the pandemic ends.

We are also very pleased that we have been able to assist our hospital partners in the region, and ultimately our region’s patients, by making some of our operating rooms available to surgeons from Ottawa who have been unable to access their own ORs for some urgent and elective cases. Our orthopaedic team has also taken referrals for patients from other area surgeons in order to provide more timely procedures for these patients here. We all know that patients are best served when we all work together and I am so proud of our PRH team which has been working collaboratively to support our partners and to help as many patients as we can.


Challenges Ahead

As we now navigate what is being called a “second wave”, while at the same time heading into flu season, one of the biggest challenges we and our health care partners face is in staffing. Finding staff that are ready and able to work was already a challenge across our region due to the deployment of many staff to long-term care and retirement homes. Additionally, we have had staff who have been unable to work while waiting for test results or waiting for resolution of symptoms. So staffing is a significant concern going forward and may result in some future delays.

However, despite our challenges, our Hospital continues to be a safe place to be if you need care. We continue to take every precaution to ensure that those who need to come to the hospital or need urgent care in our emergency department can do so safely. While there is clearly increased COVID-19 activity right now, we know that we have what it takes to respond to the situation as it evolves. But, clearly, our best defense is a good offence...distancing, masking, hand washing and staying home when you are sick. Please do your part, protect our most vulnerable community members and stay safe!

NEED A COVID-19 TEST? HERE'S WHAT TO DO:



- STEP 1** COMPLETE THE COVID-19 SELF-ASSESSMENT
- STEP 2** BASED ON RESULTS, DETERMINE IF A TEST IS REQUIRED
- STEP 3** IF A TEST IS REQUIRED, CALL RC VTAC AT 1-844-727-6404 TO BOOK A TEST TIME (DROP-INS ARE NO LONGER ACCOMMODATED) 
- STEP 4** ARRIVE AT YOUR SCHEDULED TIME
WEAR A MASK
BRING YOUR HEALTH CARD & PROOF OF ADDRESS



Did You Know...Personal Protective Equipment (PPE) and the Pandemic

Few people realize just how many challenges our Materials Management team faced during the first wave of the COVID-19 pandemic. In fact, prior to COVID, few understood the ordering process and behind-the-scenes work required to bring in personal protective equipment (PPE). They just knew that if they required supplies, they would be delivered.

All that changed, and had to change, when the pandemic was declared in North America, said Materials Management Supervisor Monique Lafrance-Fleury. "Even before the pandemic was declared, early in the new year, staff began to notice that various items of PPE were already delayed or back-ordered. Once the pandemic was declared, inventory demand was already exceeding availability," Ms. Lafrance-Fleury said.

When demand exceeded supply and backorders were on the rise, the community responded to our call for donations and helped during a critical time period when supply shortages were being experienced. At this time as

well, the emergency shipment of procedure masks that we received from the Province transitioned us through that critical shortage. The Materials Management team also faced numerous challenges in efforts to source and secure alternative products, particularly N95 masks and face shields.

With support from the clinical departments, new measures were put in place to manage how PPE was issued to ensure that what was available would be equally shared with all areas in need. Additionally, a just-in-time order process was implemented and an onsite meeting room was secured as a supply area.

While the supply situation has since stabilized, Ms. Lafrance-Fleury said work continues regionally with other hospitals to create a regional PPE supply bank for future needs and the team is focusing on lessons learned and some of the benefits realized through the new PPE ordering process.

Health Care Together

Pembroke Regional Hospital Foundation



Fondation de l'Hôpital Régional de Pembroke

www.prhfoundation.com



Cutting Edge Campaign Comes to a Close!

Thank You!! Our *Cutting Edge Campaign* is wrapping up and we wanted to thank every individual, business, sponsor, volunteer, donor and staff member who contributed to this much-needed campaign supporting the Orthopaedics department and the Surgical floor renovations.

An amazing 2.5 million dollars has been raised over the past four years! You have truly made a difference in your hospital!

Construction will soon begin on our Surgical floor and the much-needed equipment will be purchased and installed in 2021-2022.

We hope that we may have a celebration sometime in the future when gatherings are permitted.

Our Community continues to make a difference !

OUR NEW CAMPAIGN



"Keeping Cancer Care Closer to Home "

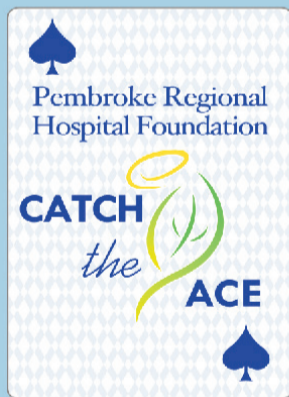
We need to expand our cancer care space and purchase the necessary equipment to make a difference for every cancer patient and the frontline workers who help them through their journey.

If you would like to designate your donation to the Cancer Care Campaign, please fill out the cut off area at the bottom of the page and return to the Pembroke Regional Hospital Foundation.

Draws every Tuesday at 4:15 p.m.

Live on our Facebook Page

Good luck !



catchtheace.ca

On October 17th Social Circles in Pembroke and Petawawa gathered safely in their own homes and enjoyed a meal prepared by Ullrich's on Main.



Thank you to all who made this unique event a success, and for supporting the Pembroke Regional Hospital!

Welcome to our ONLINE Car Lottery for Healthcare.

Support the Hospital and our Cancer Care Campaign for a chance to win a 2020 Toyota GR Supra.



www.autolotto.ca

YES, I WANT TO SUPPORT THE Cancer Care Campaign

Pembroke Regional Hospital Foundation / Fondation de l'Hôpital Régional de Pembroke

Please complete this donation form and return it with an enclosed payment, if applicable, to Pembroke Regional Hospital Foundation at 705 Mackay St, Pembroke, ON, K8A 1G8
A tax receipt will be issued for gifts of \$10 or more. Charitable Registration No. 870047610RR0001

DONOR INFORMATION

I would like to make a one-time donation of:

\$1,000 \$500 \$250 \$100 \$50 prefer to give \$ _____

I wish to pay by:

Cash Visa MasterCard American Express
 Cheque (payable to Pembroke Regional Hospital Foundation)

Card #: _____

Expiry: ____ / ____ Signature: _____

Donor Name: _____

Address: _____

City/Town: _____

Province: _____ Postal Code: _____

Phone: _____

Email: _____

For information on making a MONTHLY GIFT to ensure the continued health and well being of Renfrew County families for the foreseeable future, please contact us at (613) 732-2811 ext. 7408 or email foundation@prh.email or visit www.PRHfoundation.com

Quality Improvement Work At Pembroke Regional Hospital 2019/2020

As part of our Lean Management System, all departments have regular 15 minute stand-up meetings to discuss, initiate and implement quality improvements at PRH. Strategic goals for the hospital are identified annually and shared with the health care team. Our goals for 2019-2020 included: Embracing patients and their families as partners in their care (Patient and Family Centred Care); Providing a safe environment for our patients and my co-workers (Culture of Safety); Using resources wisely (Improving the value per day, per visit); and Taking pride in the work that I do (Staff engagement).

Here are some of the department-based improvements that focused on improving patient and family centred-care. These would have typically been highlighted in our newsletter's annual report edition but as our focus for the June publication was on COVID-19, we didn't want to miss an opportunity to showcase some of these so are sharing them now.

Acute Mental Health

- Additional headphones were purchased to ensure all patients using electronics have them in order to maintain a calm and quiet environment.
- Process improvements were made for patients who are transitioning from inpatient care to Community Mental Health services upon discharge. This will help ensure the appropriate resources and follow up will be in place.
- Worked with Maintenance to install new outlets and mounts to use with our new short charging cords so that patients can charge their own electronic devices during daytime hours.

Ambulatory Clinics

- Chemotherapy pharmacists now carry a portable phone so that they can be easily reached by staff in Systemic Therapy, preventing delays in care.

Emergency Department

- In response to patient feedback, a new discharge tool was created in partnership with our Patient and Family Advisory Council to ensure patients receive all the information they need upon discharge regarding follow up, prescribed medications and subsequent appointments.
- In consultation with our Maternal Child Care program, we created a process for those patients experiencing perinatal loss in the Emergency Department that ensures they are provided with appropriate resources and have the opportunity to speak with a nurse trained in perinatal loss.

Finance

- In response to patient and family feedback, the department worked with Information Technology, the Patient and Family Advisory Council, and other stakeholders to create an online bill payment option on the PRH website.

Food Services

- Unit Clerks and nursing staff can now input food and drink preferences directly into patient charts so that patients can be provided with items that they prefer when possible.
- Patients now interact directly with Food Services staff for selection of the day's menu items rather than having to independently fill out their choices on a form.
- Sugar-free juice options are now available on our patient menu.
- Improvements to the patient meal selections continue with the addition of some hot items on the breakfast menu and the availability of toast for those who request it.

Health Records, Admitting and Registration

- Relocated patient registration services to ensure safe and effective registration for patients.
- Developed communication for patients who still had the old red and white health cards regarding the process for obtaining a new health card. The hospital stopped accepting the old cards in July.
- By increasing the use of electronic transmission, we've reduced the time it takes for family physicians to receive patient information after their hospital visit. To achieve this we had to repair and update the Electronic Medical Records, Health Care Provider Address Book database. This project took almost one year to ensure the correct fax numbers, addresses and methods for delivery were assigned to the providers. To date, we currently have 14,356

active providers in Ontario that we maintain the correct addresses, fax number and provide delivery services to, either via electronic medical record transmission, auto-faxing services or mail.

Human Resources

- All volunteers are now trained in health and safety, infection prevention and control, emergency preparedness and accessibility.
- New wayfinding resource manuals and a hospital directory are now available at each volunteer desk as resources for questions.
- Volunteers have now received guidance on how to respond to patient and visitor complaints and compliments. Special cards were created to give to those with feedback in order to ensure all challenges and opportunities are captured.

Inpatient Rehabilitation

- Previously, physicians would visit patients later in the day. Sometimes this resulted in patients not having the prescriptions they need to go home with at discharge because it was too late to have the pharmacy staff prepare them. Now, patients scheduled for discharge have their charts flagged so that physicians can ensure their final assessment is done earlier in the day.
- A hair dryer and curling iron were purchased for patients to use if they don't have their own personal items to "look good feel better".
- New furniture including a sofa and chair were purchased for the patient dining room to make this area more welcoming for patients and families to use outside of meal time.

Maternal Child Care

- We purchased eight new cribs that adjust to height of the parent to make caring for baby more comfortable for the parent.
- Nurses learned how to do newborn bloodwork to ensure that comfort measures are provided and to facilitate quick discharge.
- Pre-operative appointments are now completed on the phone to prevent parents having to make an extra trip into the hospital.
- To provide the best care possible and prevent repeat testing, the department worked with physicians to create a new checklist for bloodwork/tests that need to be ordered/done prior to labour/delivery and newborn care.

Medical 3B

- To facilitate quick check-ins on patients in our negative pressure rooms who are on airborne precautions, windows were installed in the doors.
- Given the increasing number of patients with Dementia in acute care, the Medical Program looked at ways to improve the unit with a focus on creating a more supportive environment for our patients with Dementia.

By sectioning off a sub-unit, we have created an area where our patients with Dementia can safely wander on the unit and receive focused Dementia nursing care. In collaboration with a Behavioural Support Nurse, a Behavioural Support Champion reviews Care Plans and works with the physicians and nurses to optimize and plan care.

Mental Health Services of Renfrew County

- Phone cards were purchased for clients so they can connect virtually with case managers.
- Our Recovery Outreach program developed outdoor group activities in order to meet and support clients safely.

- Virtual care is used consistently for adult counselling (MSW, CBT counselling). Video conferencing via Zoom is being trialed by case workers with clients on a one-to-one basis and will soon be trialed for small education groups.

- Geriatric Mental Health is now using Zoom for psychiatric consults for clients who are housebound in the community. This program is also supporting long-term care and retirement residences by offering psychiatry consult clinics via Ontario Telemedicine Network and telephone.

- All our programs are adapting our sites to create safe physical space for staff and clients in all offices and day program areas. We have standardized the in-person appointment to ensure consistent screening, safe onsite interactions and tracing information if need be.

Operating Room

- A new policy and protocols were put in place to decrease the number of patients arriving in the OR wearing jewellery and/or body piercings.
- We have improved our process for family-centered paediatric care post-operatively. We now allow one parent in the recovery area post-operatively which enables the child to see a familiar face. Including a parent in this part of the process improves comfort and allows us to better assess pain and the needs of the child in the immediate post-operative period.

Outpatient Rehabilitation

- A new information booklet for shoulder surgery patients was developed in partnership with the orthopaedics and surgical teams.
- In partnership with the orthopaedic surgeons, the program for those who have had hip surgery was improved through the addition of updated exercises, flow sheets, progress notes and patient handouts.

Spiritual Care / Social Work

- Families faced with the unfortunate experience of suddenly losing a loved one can cause increased stress and anxiety. In conjunction with ICU educator Sue Bow, Spiritual Care, and Social Work, we have put together a "Bereavement Resource Package" that is available for patients and families facing end of life circumstances.

This package answers the commonly asked question, "What do I do now?!" We provide information on what needs to happen after a loved one has died, including agencies to call, local funeral home contact information, guidance on working through the grief process, and contact information for local bereavement and counseling services.

Surgical

- The communication process has been improved to provide regular updates for family on the status of their loved one's surgery.
- In order to encourage more independence prior to discharge, patients are now provided with the means to bathe themselves at their bedside rather than having the nursing staff do it regardless of a patient's ability.
- In partnership with Medical Records, the department is now ensuring that a patient's accommodation request is correct upon admission in order to avoid unnecessary moves.
- The majority of pre-operative appointments are now completed over the phone to prevent patients from having to make an extra trip into the hospital.

Pembroke Regional Hospital Launches Geriatric Rehabilitation Program

The Pembroke Regional Hospital is piloting a new inpatient program that supports local seniors. This program is set up for our geriatric population who meet a particular set of criteria and wish to maintain their independence but are experiencing health issues which are making it difficult for them to live at home.

Modelled after the Geriatric Rehabilitation Service at Bruyère Continuing Care in Ottawa, the new program was launched in early July based on an identified need in our region.

“Based on demographics in hospital admissions and visits to emergency departments, we saw the need for specialized geriatric care and began working towards development of this new program last fall, with the intent of launching in March of this year,” said Beth Brownlee, PRH Director of Rehabilitation.



Beth Brownlee

Co-located within the hospital's general Rehabilitation and Integrated Stroke Unit, the Geriatric Rehabilitation program was deemed to be a good fit for available space.

With the goal of maintaining independence, Ms. Brownlee said patients are referred by a physician and on average, can expect to be admitted for approximately 21 days during which time they have access to a multi-disciplinary team of health care professionals who work with the individuals to achieve their identified goals.

Rehabilitation Manager Dean Quade said members of his team have received additional geriatric rehabilitation education, spent time working with staff from Bruyère and did site visits to learn best practices that support the geriatric population.

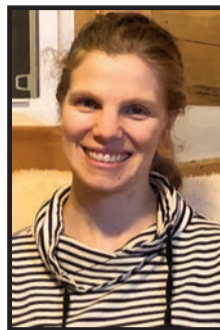


Dean Quade

He added that an individual could be admitted to the

program for a multitude of reasons including frailty and mobility issues, trouble with multiple medications, frequency of admissions/visits to the emergency department, or other factors that are causing difficulty living in an independent setting with minimal to moderate assistance.

Dr. Linde Corrigan who is the program's lead physician and is certified in Care of the Elderly said she's very enthusiastic about being part of this new program with a focus on seniors' health. “Typically, with in-hospital care, we are always working reactively. For example, a patient has a hip fracture from a fall due to weakness and then we start rehab to strengthen deconditioned muscles. Now, we can identify seniors who are falling and start rehab proactively to hopefully avoid the hip fracture in the first place,” Dr. Corrigan said.



Dr. Linde Corrigan

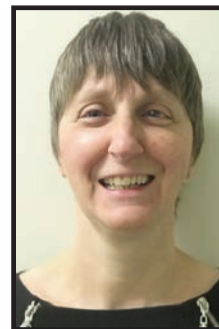
“In addition, we can focus on issues specific to the elderly population. This includes a focus on medication use, loneliness, assisting family members with the stress of caring for their loved one, optimizing cognition, and mobility to promote independence and the ability to live at home for as long as possible with the best quality of life possible. I hope to be a senior one day and this high caliber interdisciplinary Rehab team is exactly the care I would want,” she said.

Through Dr. Corrigan's involvement with this new program, she has also been able to provide education on geriatric care to other staff and physicians throughout the organization.

Sabine Mersmann, Vice-President of Clinical and Support Services – Partnerships and Integration said the program is being launched in a phased approach in order to solidify policies and protocols. The first few patients were admitted directly from the hospital's

Rehabilitation Unit with others now coming from the Medical program, Surgical unit and regional orthopaedics program. Over time, the hospital is looking to expand admission to those from other Renfrew County hospitals.

And Psychiatrist Dr. Debbie Timpson said she's excited to be able to offer this increased service to patients.



Dr. Debbie Timpson

“Many of the patients who require inpatient rehabilitation are seniors who have multiple medical problems above and beyond the issue that brought them in to hospital initially. Patients who are admitted to the Geriatric Rehabilitation program will not only benefit from the usual care our Rehab team provides, but also from the additional help that Dr. Corrigan and our Pharmacy team will add.”

Geriatric Rehabilitation Program Admission Criteria:

- Age 65 and over, living in the community (house, apartment or retirement residence)
- Acute medical/surgical issues now addressed
- Sitting tolerance of at least two hours and ongoing help required with some or all of the following:
 - transfers, ambulation, and stairs
 - daily self-care (washing, dressing, toileting)
- Identified role for comprehensive geriatric assessment and rehabilitation in supporting discharge and preventing re-admission.
- Willing and cognitively able to participate, follow directions and tolerate daily therapy
- Realistic goals with anticipated ability to make progress within their allotted length of stay

PRH Excels in Compassionate, Timely Delivery of Regional Screening Program

While routine breast screening can represent a stressful experience for many women, the Pembroke Regional Hospital works hard to ensure that those requiring additional imaging, biopsies or surgical procedures are receiving these appointments as quickly as possible.

“Our region is very fortunate to have such quick turn-around times,” said Radiologist Dr. Raluca Antonescu who is the clinical lead for the Mammography program at PRH. “If, after the initial exam, an abnormality is found, patients are called back for additional imaging and it doesn't take long to be recalled – usually within a few days of the first appointment,” Dr. Antonescu said.

For some, that callback results in a determination that everything is fine and no further testing is required.

Others may require a biopsy, Dr. Antonescu said, and that can often be scheduled within a week-and-a-half of the original exam. And if surgery is required, patients are usually booked in to meet with a surgeon within two to three weeks of the original mammogram.

According to the latest statistics (2018-2019) from the Cancer Care Ontario branch of Ontario Health, and for the fifth consecutive year, all wait times at Pembroke Regional Hospital for the Ontario Breast Screening Program (OBSP) exceeded provincial targets.

For example, 98.8% of PRH patients requiring additional imaging received their callback within the targeted three weeks of their initial screening, compared to 80.5% of patients province-wide.

Dr. Antonescu said these results speak to the precision of the service and the expertise of her team which includes onsite radiologists Dr. Marlene Van Gentevoort, Dr. Fred Matzinger and Dr. Abe Choi. “There is excellent work being done in terms of identifying what is seen,” she said, noting that this means less risk of unnecessary call backs.

Dr. Jean Seely, Regional Breast Imaging Lead for the Ontario Breast Screening Program said regular breast cancer screening with mammography saves the greatest number of lives from breast cancer for women 40 years and older. “In improving timely access to additional testing for abnormal recalls, Pembroke Regional Hospital is supporting the high-quality Ontario Breast Screening Program and helping to improve the

outcome of their patients.”

Breast imaging and breast surgery are part of regional programs at Pembroke Regional Hospital, said former Diagnostic Imaging Director Jim Lumsden, adding that PRH performs biopsies for patients coming from other hospitals in Renfrew County and also provides radiologist support to the Deep River and District Hospital.

“Our team recognizes how stressful procedures like this can be for our patients and are sensitive to that throughout the process,” Mr. Lumsden said.

Clerks Stephanie Eckford and Lucia Della Penta echoed that sentiment, noting that staff care about the outcome for each patients and where possible, try to accommodate things such as unexpected biopsies as quickly as possible through extended hours that help to accommodate patient schedules.

Women ages 50 to 74 can be screened as part of the Ontario Breast Screening Program and can be self-referred if they are an Ontario resident who has never had breast cancer. Participation in the program for women under 50 years of age and those 75 years and older requires a physician referral.



Dr. Raluca Antonescu



**Ontario Breast Screening Program
For Ontario Women
50 and Over**

**Please call 613-732-1463
to make an appointment at the
Pembroke Regional Hospital or
Deep River and District Hospital site.
Take a Moment, Make the Call,
Go For Your Mammogram**

Eastern Ontario Regional Laboratory Association (EORLA) Invests In New Equipment For Pembroke Regional Hospital

The Eastern Ontario Regional Laboratory Association (EORLA), in partnership with the Pembroke Regional Hospital, has invested in new state-of-the-art equipment to enhance blood testing capabilities in the clinical laboratory, and standardize testing procedures across our region.

The new hematology (blood) analyzers are capable of processing 100 test samples per hour. A complete blood count (CBC) test measures several components and features of your blood to evaluate overall health and detect a wide range of disorders.

On June 16th, staff began using the new Sysmex Analyzer following an extensive period of validation, quality assurance testing and training for staff, as well as other behind-the-scenes tasks that are required before operating new equipment.

"This extensive period of testing and training was done to ensure that the lab produces and reports the highest quality of blood test results for patients and staff," said former Lab Manager Chetan Jariwala. "Given that laboratory test results can influence up to 70 percent of medical decision making, we work to ensure that results are as accurate as possible for both the physicians and patients."

PRH is the second largest EORLA site outside of Ottawa and this is a real investment in the needs of the local community that will contribute to

better patient care, said Lab Director Dr. David Colantonio. In addition, most EORLA sites are receiving the same equipment to allow for standardized testing and results across Eastern Ontario. The new blood analyzers will replace instruments that were still functioning but outdated, Dr. Colantonio said.



Lab staff at PRH have worked hard over the last several months to ensure that transitioning to the new equipment would be as seamless as possible from a clinical perspective, with no interruptions or delays in patient care.

"This important investment represents the ongoing efforts by the Pembroke Regional Hospital, and EORLA to bring high quality care close to home for the residents of Renfrew County," said Jim Lumsden, EORLA Liaison and Director of Diagnostic Imaging at PRH.

EORLA is a member-owned, non-profit organization encompassing the operation of 19 licensed, acute care, hospital-based clinical laboratories that service clinical programs across Eastern Ontario. The purpose of EORLA is to deliver patient-focused, consistent, high-quality and cost-effective hospital-based laboratory services to meet the needs of the region's patients.

New Electronic Referral System Will Improve Diagnostic Imaging Booking Efficiency At PRH



The Pembroke Regional Hospital's Diagnostic Imaging department has joined more than 400 clinicians in the Champlain region who are now using a popular, new, electronic referral system to send, receive and book appointments for their patients.

The Ocean eReferral Network is compatible with electronic medical records and has a variety of features which make it easy for health care providers to use.

"By joining the provincial eReferral initiative, the Pembroke Regional Hospital's DI department has introduced a simpler process for community clinicians requesting imaging services for their patients. This will also improve the quality and appropriateness of the requisitions, which in turn minimizes unnecessary delays for the scheduling of services for PRH's patients," said Amir Afkham, Digital Health Program Lead for the Champlain region.

"This is also an important step towards a broader strategy of transitioning away from paper/fax, and improving communications between providers and patients," Mr. Afkham said.

Pembroke Regional Hospital's shift to use of the Ocean eReferral Network is part of a larger provincial eServices initiative funded by the Ministry of Health and will change the way health care referrals are sent and managed while replacing traditional fax-and-paper systems.

"We're always looking for ways to collaborate with our regional and provincial partners to enhance care and to do more in a digital format," said former Diagnostic Imaging Director Jim Lumsden, noting that, both regionally and across the province, there is a lot of work being done with regards to computerized medical records and electronic requisitions.

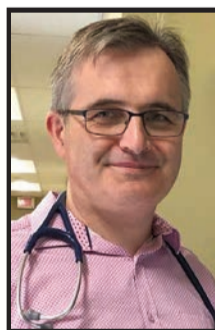
Traditionally, physical paper requisitions that weren't specific to any modality, had to be

faxed in to the department by physicians. As a result, this method presented opportunities for errors and breach of privacy by misdialing a fax number. Each incomplete referral or misdirected document meant delays in bookings.

With standardized referral forms for each modality, DI Clerk Lucia Dellapenta said the new system makes it easier for clinicians to complete requisitions leaving little to no room for error or misinterpretation of what is contained on the form.

Since launching the new system in early July, she said the transition has been relatively seamless and there has been lots of positive feedback to date. She added that all clerks now receive notification when there's a new referral and having both the modality and referring physician specified enables the referral to become a booking in a much more timely manner.

PRH Chief of Hospitalist Medicine Dr. Declan Rowan who is also a family physician with the Petawawa Centennial Family Health Centre calls the new system a positive improvement that is much safer and more efficient than traditional referral methods. "It's a real win in every way. I can now securely refer for a wide range of services directly from a patient chart and it prompts me to order the best evidence-based exam based on symptoms."



Dr. Declan Rowan

And Sabine Mersmann, Vice-President of Clinical and Support Services / Partnerships and Integration said because the new system interfaces well with the hospital's IT infrastructure, it lays the groundwork for expansion into other areas of service that PRH provides.

"This is a technological step forward for our organization and something that benefits all end users. Our patients gain faster access to care, our region's physicians have gained an easier method for making referrals and our specialists receive more appropriate, comprehensive referrals without chance for delay," Ms. Mersmann said.

Outpatients And Visitors: Things You Need To Know

As a part of our commitment to quality care and patient safety, there are a few things you need to know before you visit.

Please note that, given the current situation, all information contained in this section is subject to change. Please visit pembrokeregionalhospital.ca or check with a member of our health care team for the most up-to-date information.

Hospital Access

Access to our hospital for patients is currently restricted to four public entrances: Emergency Department (24/7), Tower B (7 a.m. to 5:30 p.m.), Tower C (7 a.m. to 5:30 p.m.) and Tower D (7 a.m. to 4:30 p.m.).

Please follow the signage posted onsite and be prepared to be screened on arrival for symptoms, travel history and contact history.

Use of Masks

As a safety measure for our patients, staff and visitors, everyone entering the hospital will be provided with a hospital-grade procedure mask to be worn at all times while inside the hospital, including while in patient rooms.

Visitor Policy

At this time, general visitors are not permitted in PRH as an important measure to ensure everyone's health and safety.

For the safety of patients and staff, each patient is able to receive one Family Caregiver/Care Partner per day. Details regarding the role of this individual can be found on our hospital's website.

Exceptions may be made and approved by the health care team in certain circumstances.

In addition to the above, patients may have a visit from their clergy/faith leader if the request for this visit has been approved by the Spiritual Care Coordinator and they have passed the screening at the hospital entrance.

The Lunch Box (cafeteria)

Due to COVID-19 safety measures, our cafeteria is currently closed to patients and visitors. However, the Auxiliary's Mural Café (Ground Floor, Tower B) is open from 8 a.m. to 4 p.m. Monday to Friday and 11 a.m. to 3 p.m. on weekends.

Thank you for helping us keep everyone in the hospital safe!