

Community Connection



Annual Report To The Community 2017/2018

*Leading, Learning,
Caring For You*

Phone (613) 732-2811 Email pr@prh.email

Website www.pembrokeregionalhospital.ca Facebook www.facebook.com/pembrokeregionalhospital



**Your Hospital,
Caring For You!**

Continuous Improvement At PRH Is Driven By Valuable Input From Many Stakeholders

We all need people around us who will give us some honest and constructive feedback – because that’s how we improve. A hospital is no different. And, while we might have state-of-the-art equipment at our disposal and have well run services and compassionate staff, we know that we can always do better.

Now more than ever before, we are listening to the voice of our patients, their families, our community at large, our partners and the members of our own healthcare team in order to identify areas in need of improvement and to validate that the work we are doing to improve is being done in the areas where it’s needed most.

Now in its third year, our Patient and Family Advisory Council continues to play a valuable role in offering insight into how we can enhance the patient and family experience at our hospital. A total of six advisors meet six times per year in order to provide us with input in a wide variety of areas. As well, patient advisors sit on our Senior Friendly Hospital committee and on leadership teams in our Emergency Department, our Rehabilitation program, our Acute Mental Health unit and in our Surgical program.

Some of the Council’s accomplishments this past year have included work to improve signage, educational materials, policies, and patient meals, and their value has not gone unnoticed. In fact, our management team is actively seeking their input and we are now looking at how to broaden their involvement throughout the organization. **Continued on Page 4**



**Pierre Noel
President and CEO**

Professional Staff Recruitment Has Helped To Stabilize And Grow Clinical Programs

Throughout the past year-and-a-half, I have enjoyed learning and growing in the role of Chief of Staff at Pembroke Regional Hospital. This position has given me the privilege to observe firsthand the dedication of each and every member of our professional staff; a team that strives to serve all those entrusted to hospital care.

As we work together to provide clinical care, our services are furthered by diligent staff members whose leadership and guidance have expanded our reach into the community. Our common goal is to provide the best possible care, closer to home, for all residents of Pembroke and Renfrew County.

Achieving that goal is not without challenges however, with



**Dr. Tom Hurley
Chief of Staff**

physician recruitment and retention being significant obstacles. A strong commitment to overcome this issue has led us to welcome a number of new physicians this past year; found in our Surgical program, Diagnostic Imaging department, and Lab.

The Surgical program is a shining example of some of the progress that has been made. Not only has the new orthopaedic component become a respected fixture in the community; allowing us to provide care for most orthopaedic conditions, but the volume of cases has exceeded even our own expectations. In the past year alone, there have been 62 hip replacements, 152 knee replacements and 92 hip fractures have been surgically repaired. **Continued on Page 3**

Our Mission, Vision

Leading, Learning, Caring.....For You

MISSION: We are a regional community hospital committed to delivering a wide range of quality health services. Following Catholic tradition, we will meet the physical, emotional, and spiritual needs of all.

VISION: Delivering the safest and highest quality of care to every person, every encounter, every day

Our Values

Compassion and Caring	Excellence and Innovation	Social and Fiscal Responsibility	Sacredness of Life	Mutual Respect	Community Spirit
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PRH Board of Directors 2017/2018



Seated, from left, Dr. Kathryn Reducka (Acting President of Professional Staff), Kim Drake, Diana Gagne (Auxiliary President), Sheila Clarke (Vice-Chair/CHSO), and Dr. Tom Hurley (Chief of Staff).

Standing, from left, Richard Wilson, Mitchell Stillman, Wayne TerMarsch (Chair), Norm Carroll (Foundation Chair), Francois Lemaire (CNE), Pierre Noel (President and CEO), Dean Sauriol, Frank Christinck, David Unrau, and Garry Yaraskavitch (Vice-Chair).

Missing: Daniel Burke, Brenda Lammi, and community representatives Gabriel Cloutier, Matthew Conway, Linda Fuller, Amanda Hawkins and Rebecca Paulsen.



Annual Report

April 1st, 2017 - March 31st, 2018

Pembroke Regional
Hospital Foundation



Fondation de l'Hôpital
Régional de Pembroke



Our local communities are steadfast in their efforts to bring best-in-class healthcare services closer to home and the 2017/18 financials are a true testament of that commitment. It wasn't that long ago that we had to travel out of town for Dialysis, CT, MRI or Orthopaedic services, but your support has changed all that!

As PRH continues to move forward, our circa 1950 inpatient Surgical space will soon undergo a \$10 million overhaul that will create 12 modern recovery bays for Day Surgery along with upgraded patient rooms, a family area, an Endoscopy suite and a multi-function room (cystoscopy, ophthalmology). With close to 6,500 surgeries performed annually at PRH, this revitalization is going to positively impact families across the county for many, many years.

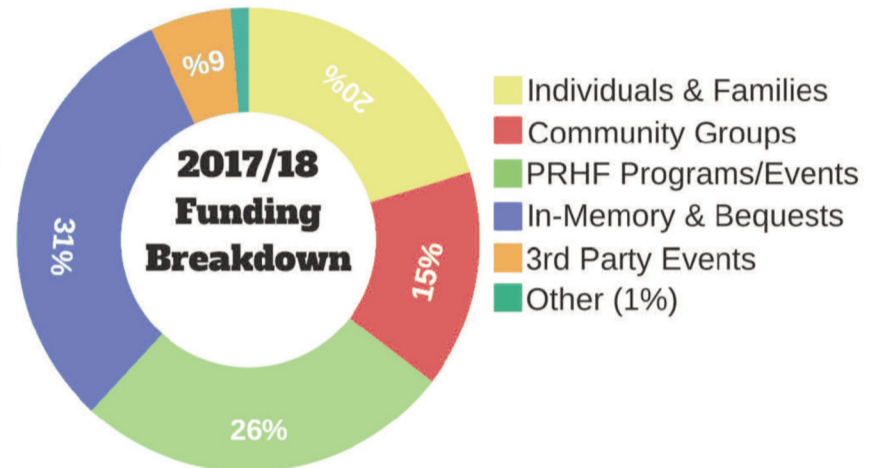
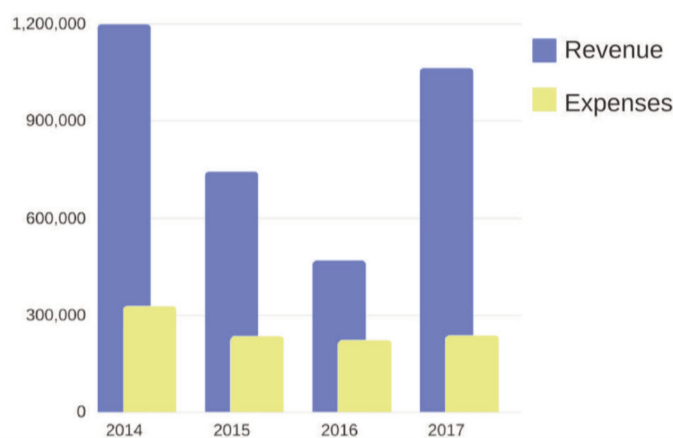
Thanks to your donations, we are now \$1.1 million away from our \$2.5 million *Cutting Edge Campaign* goal.

Thank you for your generosity and for making the health care needs of our local families a charitable priority!

Kim Drake, PRH Foundation Treasurer

Following the MRI campaign, renewed donor excitement soared in 2017 for the *Cutting Edge Campaign*. The return on investment (ROI) last year was \$3.49, averaging \$2.35 over the last 4 years.

2014-2017 Revenue & Expenses



Revenue up
127%

From an increase in Estate and Event revenue to the addition of the *Connecting to Care* Radiothon and a Coffee Morning, our community was very engaged and very supportive. The focus of our fundraising will continue to be the *Cutting Edge Campaign* as we pull together to reach our \$2.5 million goal.



23%
more donors
this year

2017 saw a 23% increase in donors and 42% more first-time donors — affirming that Pembroke Regional Hospital is a big part of our community that touches the lives of hundreds of people each day including staff, volunteers, patients and their friends and families. Whether you are a new donor or an old friend, your support is impacting healthcare for more than 95,000 people across Renfrew County. Thank you for making the PRH Foundation a Charity of Choice. We invite you to take a quick survey about your donor experience and help us understand what your needs are as a valued supporter:



42%
increase in
first-time
donors

<http://prhfoundation.com/donor-survey/>

2017/18 BUSINESS & COMMUNITY ORGANIZATION DONORS OVER \$1,000

Assante Wealth Management, Bank of Montreal, Bell Canada, Black Bears Hockey Club, BMO Pembroke, Buske Office Equipment, Butler Chevrolet Pontiac Buick Cadillac, Century 21 Neville Realty, Cobden & District Civitan Club, Dobbs & Hoffman Festive Home Tour, Economical Mutual Insurance Company, EGM Insurance, Emond Hamden LLP, Frank Carroll Financial, Great West Life Assurance Company, Harrington Mechanical, Holiday Inn Express Pembroke, Huckabone O'Brien Instance Bradley Lyle, Johnston & Mackie Limited, Knights of Columbus Council 11932, Knights of Columbus Council 1531, M.C. Carroll Insurance Brokers, MacEwen Petroleum Inc., Manulife, Mckie Pools & Spas, Mitsubishi Pembroke, OK Tire & Automotive Service, Patterson Telecommunications - Bell, Pembroke & Petawawa Lions Club, Pembroke Medi-Spa, Pet Valu (Petawawa), Petawawa Physiotherapy and Sports Injury Clinic, R.G.T. Clouthier Construction Ltd., RBC Dominion Securities, RBC Foundation, Roy & Associates, Ry-J's Climbing Adventures, Scotiabank, Ski For Kids In Trust, SRB Technologies (Canada) Inc., St. Andrew's Presbyterian Church, Star-Set Jewellers, TD Canada Trust, The Commonwell Mutual Insurance Group, The Co-Operators Frances M. Lemke Insurance Services, The Robert Campeau Family Foundation, Walmart Pembroke, Wilkies Fresh Baked Bread

A WORD FROM PRH BOARD CHAIR, WAYNE TERMARSCH

The Hospital Foundation is an important part of our health-funding system in Ontario. All local communities are expected to raise their own funds for hospital equipment – be it new or to replace existing equipment – and it is the hospital foundations who spearhead those efforts in communities. All equipment ages, and it is an ongoing battle to raise awareness and ultimately money to support our local community hospital, equipment and infrastructure.

Without a strong foundation to help raise funds, we never could have been able to afford the additional services that bring healthcare closer to home. Please donate whatever you can. Every dollar will help us progress towards our goal.



SAVE THE DATE 2018

- June 21 - Custom Draperies & Blinds' Red Carpet Event
- Sept. 12 - Pat Harrington Golf Classic
- Sept. 29 - Holiday Inn Express Dr. Kim Armstrong Turkey Trot
- Oct. 13 - Black & White Gala

Contact us for more info!



Please contact the Foundation Office to make a donation, organize a fundraiser, or participate in one of our many charity activities & events:

705 Mackay Street, Pembroke, ON K8A 1G8 / (613) 732-2811 Extension. 7408 / foundation@prh.email / prhfoundation.com

Professional Staff...Continued From Page 1

Although one of the program's original surgeons, Dr. Ingrid Radovanovic, has returned to southern Ontario, her devotion to the foundational work in establishing the program was much appreciated. We are fortunate to have welcomed Dr. George Mathew in her stead. Dr. Mathew has been with our team since January and has already demonstrated excellent clinical acumen. His attentive, considerate, and approachable manner has been noted by his patients and our staff alike.



Dr. George Mathew

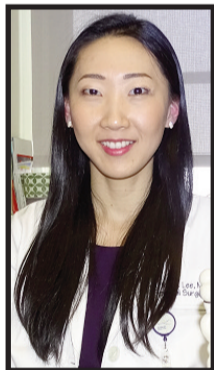
Also within the Surgical department, the urology program has seen great development. Established in 1981 by Dr. Scott Murray, he single-handedly ran the program with admirable care and precision and has now retired from full-time surgical practice in order to transition into the palliative care field. The urology program is now in the capable hands of Dr. Jeremy Setterfield.

Dr. Setterfield's practice is supported by both PRH and The Ottawa Hospital, under the terms of a Memorandum of Understanding (MOU). This MOU formalizes the strong relationships Dr. Murray fostered for nearly 40 years. The agreement also allows Dr. Setterfield to remain a member of the Department of Urology in Ottawa, where he continues to take part in educational activities and collaborate with colleagues. Furthermore, the MOU enables Ottawa-based urologists to join Dr. Setterfield in Pembroke for larger and more complex surgeries.



Dr. Jeremy Setterfield

Dr. Erika Lee has joined our well-established general surgery program, bringing further stability to a team made up of Dr. Colleen Haney, Dr. Amanda Williamson, and Dr. Adel El fitori.



Dr. Erika Lee

In Diagnostic Imaging, it's been several years since we welcomed our newest radiologists Dr. Pawel Stefanski and Dr. Raluca Antonescu. The rapid growth in DI, particularly with a full complement of modalities, has led to further recruitment as a new radiologist will join the team in 2019.

And although things tend to happen a bit more behind the scenes when it comes to our laboratory services which are operated by the Eastern Ontario Regional Laboratory Association (EORLA), considerable improvements have been made. Earlier this year, Medical Director, Dr. Matthew Henderson, transitioned back to full-time work in Ottawa allowing Dr. Yasmin Ayroud to take his place, certainly a welcome addition to our professional staff.



Dr. Yasmin Ayroud

Many other well-established hospital programs remain stable in terms of the professional staff members who support them. This has allowed us to focus more on growth and development. For example, the Emergency department continues to increase in both volume and acuity of patients. While we do struggle with

many issues common to all Canadian hospitals, most notably wait times, strides toward improvement are evident. Last fall, PRH was rated among the top 20% of high-volume emergency departments in Ontario during a study by the Ministry of Health and Long-Term Care's ED Pay for Results (P4R) program. We were able to achieve a reduction in wait time of greater than 50% for patients being admitted to hospital through the ED. The less urgent patients, those who are treated and then go home, also saw a change, as the period of time between triage assessment and discharge was reduced by over one-and-a-half hours. This brings the wait times for people in our community to well below the provincial average and our work in this area will continue.

I'm also excited about the work that will be done through our new affiliation with Kids Health Alliance (KHA).

Founded by leaders in paediatric care including CHEO we look forward to bringing enhanced care closer to home in a more standardized manner for our children and youth.

Other programs will also continue to build on their own success. Our Obstetrics program continues to be supported by local midwives and family physicians. With just over 700 births this past year, we will once again see growth as we get set to recruit a fourth obstetrician.

Our Rehabilitation and Internal Medicine programs have remained stable. The Rehab unit has distinguished itself through commendable care provided to patients recovering from a wide variety of conditions; the most notable of these is stroke. Over the next year, we plan to build on stroke care in order to target new options for those suffering acute stroke. We will work with our pre-hospital care providers so that select patients can be transferred to Ottawa for endovascular therapy, when suitable.

Our Internal Medicine program continues to be supported by Dr. K.C. Li and Dr. Ben Mgbemena in addition to a dedicated team of hospitalist physicians.

As PRH continues to expand, we will continue to invest in the renewed development of other departments such as our Intensive Care Unit.

I want to recognize the outstanding team in Medical Affairs - Rita Amodeo, Dinah Fleury, Nancy Schroeder and Cecilie Wyngard. Their insight, patience, knowledge and assistance is greatly appreciated.

The needs of our community and the strong bonds of our professional staff serve to inspire the ambition of our team and to drive the goals of our organization. Together we will succeed in meeting the needs of every patient, upon every encounter, each and every day.

Recognizing The Value Of Partnerships

Often, to achieve successful outcomes, partnerships with others are not only required, but are welcomed and beneficial to all involved.

Those in the healthcare field have come to recognize that there is tremendous value in working with others - not only to maximize the available volume of expertise and resources, but also to ensure that there is a coordinated and streamlined system of care in place for our patients.

As you will note in this report, many of the initiatives which have been highlighted involve the participation of others in one way or another, with the value of collaboration extending well beyond patient care to staff education, service provision and more.

"Partnerships are an integral part of health care," said Interim Coordinator of Clinical Education Marilyne Beier. "It is especially important in terms of continuing education for our staff. Working as a team with our community partners enables us to access quality learning opportunities and best practices which result in direct benefits for those in our care."

"A patient's journey involves many points of contact," said Sabine Mersmann, Vice-President of Patient Services - Seniors and Community Care. "With this in mind, those providing services in the health and social services sector must work together to ensure that the journey is seamless."



Sabine Mersmann

Particularly in areas like Mental Health and Addictions services, paediatric care and palliative care, using what the Ministry of Health and Long-Term Services refers to as "the neighbourhood approach to care" allows a group of providers to identify patient needs and determine the best way to meet those in a coordinated fashion, Ms. Mersmann said.

"Working in silos creates a barrier to appropriate service delivery," said Sabine Mersmann, Vice-President of Patient Services, Seniors and Community Care. "This can restrict the level of services offered in our community. At the end of the day, working with partners clearly enables us to move forward and to do more for our patients than we could otherwise do on our own."

A sample of some of the new partnerships formed this past year.

- *Community Stroke Rehabilitation program* in partnership with Champlain Local Health Integration Network - Home and Community Care.
- *Moving on with Mental Health*: a Ministry of Community and Social Services initiative which brings together service providers to enhance access to Mental Health and Addictions services in Renfrew County for children and youth up to age 24. Regional partners include the Phoenix Centre for Children and Families (lead agency), CHEO, the Youth Services Bureau of Ottawa, CCAC, The Royal, You Turn, the Roberts Smart Centre, Parents' Lifelines of Eastern Ontario, and the Ontario Centre of Excellence for Child and Youth Mental Health.
- *PRH/County of Renfrew Paramedicine Fall Prevention Pilot program* in partnership with Renfrew County Paramedic Services and the Renfrew County and District Health Unit.
- *Regional Hip and Knee Replacement program* (Central Intake Centre and the Total Joint Assessments Clinics) in partnership with Queensway-Carleton Hospital, Cornwall Community Hospital, Montfort Hospital, The Ottawa Hospital and the Champlain Regional Orthopaedic Network.
- *The Situation Table*: a police-led initiative involving front-line service agencies to identify individuals who are at risk of harm and provide immediate, coordinated intervention with appropriate supports to avoid a crisis. This involves partnership with the Renfrew and Admaston-Bromley Police Service Boards, Addictions Treatment Services, Renfrew County Victim Services, the Deep River Police Service, OPP (Killaloe, Upper Ottawa Valley, Renfrew), and the Ministry of Community Safety and Correctional Services.

Our Senior Leadership Team



From left, **Francois Lemaire**, Vice-President Patient Services - Acute Care and Chief Nursing Executive; **Pierre Noel**, President and CEO; **John Wren**, Vice-President Finance and Corporate Services - Chief Financial Officer / Chief Information Officer; **Sabine Mersmann**, Vice-President Patient Services - Seniors and Community Care; and **Dr. Tom Hurley**, Chief of Staff.

Continuous Improvement Is Driven By Valuable Input...Continued From Page 1

Another example of constructive feedback came from the collective voice of nearly 1,000 residents from our region who took the time this past summer to participate in spot surveys, focus groups and personal interviews about our hospital and its role in the community. Through this feedback, key areas were identified as priorities by the public including enhanced patient privacy, communication with the staff, and ways to better identify members of the healthcare team. We are now using this community input in our ongoing improvement work.

It is also true that sometimes the answers to healthcare challenges lie in engaging and empowering the individuals who work in it every day and there is no better example of this than the outcomes we have seen with hundreds of improvement ideas being brought forth and implemented on a regular basis by our staff.



Palliative Care Rounds

You will see in other sections of this annual report edition of our newsletter how engaging our own healthcare team through Lean management processes has greatly impacted patient care. Our staff and physicians know the work best and are in the best position to bring forward improvement ideas that can either be quickly implemented or tied in to larger change management processes.

Clearly, working with other health and social service agencies and being open to new and

innovative ways of doing things can bring about positive change. One example of this is how we now provide end-of-life care for our patients. In fact, the way that we have approached the provision of palliative care in our hospital has proven to be so effective that it is now being rolled out to rural hospitals across the Champlain region.

This stemmed from a long-standing practice at PRH of hosting bi-weekly "Palliative Care Rounds" in order to bring all the right people together to discuss the palliative care needs of our patients. These Rounds gather together the hospital's discharge planner, pastoral care and unit management, along with community-based palliative care providers and local physicians active in palliative care. It was here that it was identified that if the Champlain Regional Palliative Consultation Team was able to offer consultations within the hospital it would not only improve the comfort and quality of care for those patients but would also potentially improve the continuity of care from hospital to community – and so it has.

Another area where partnerships and feedback led to success was in our Food Services department and our Auxiliary with their drive to achieve Silver Status in the Healthy Foods in Champlain Hospitals program. Late last fall, PRH was named among a small but growing number of hospitals to reach this impressive milestone and represents a true reflection of our commitment to the long-term health of our community.

Feedback and innovation enabled Food Services, vendors and the Auxiliary's Sunshine Gift Shop and Mural Café to seek out new recipes and products which are both healthy and appetizing to sell in the retail locations and vending machines. All continue to respond to customer feedback and have been open to sourcing out recommended products as long as they meet the healthy foods Silver Status criteria.

This September, our hospital will be taking part in a comprehensive assessment of our services by Accreditation Canada, based on almost one thousand standards of best practice. Our last Accreditation survey took place in 2014 where we were awarded Accreditation with Commendation and now with Lean Management fully spread throughout the hospital, we believe we are set up for even greater success. But as much as this is an opportunity to shine, our team plans on using this process as another true learning and improvement opportunity.



Silver Status Recognition

We recognize that all of our readers may not have occasion to come to the hospital often but I hope that through continued communications like this newsletter, our website, our press materials in the local media and our Facebook page, you are able to gain some understanding of the variety of healthcare services we are providing for our residents as close to home as possible.

Through your continued feedback, we aim to continuously improve the health care services we deliver to our community in order to reach our hospital's vision of "delivering the safest and highest quality of care to every person, every encounter, everyday."

To provide feedback, visit *Your Feedback* on our website pembrokeregionalhospital.ca, call (613) 732-2811, extension 6172 or email patientrelations@prh.email.

Quality Improvement At Pembroke Regional Hospital 2017/2018

Using the Lean Management System, 22 of our departments have daily stand-up meetings to discuss, initiate and implement quality improvements at PRH. Annually, strategic goals for the hospital are identified and shared with the health care team. In 2017/2018 those goals were: Ensure Appropriate Antibiotic Utilization; Reduce the Readmission Rate for patients with Congestive Heart Failure, Chronic Obstructive Pulmonary Disease, Mental Health and Addictions and Diabetes; Improve the Patient and Family Experience and Improve Staff Engagement.

Our teams and departments have worked to support these goals. Here's a sample of some of the goal-oriented initiatives from the past year:

Goal: Appropriate Antibiotic Utilization

Education/Infection Prevention and Control

- Throughout the year, education sessions and information displays based on best practice for clinical staff were made available.

- A pamphlet was developed for patients which explain why they didn't receive antibiotics after clinic and emergency department visits.

Pharmacy, Infection Prevention and Control and Information Technology

- Created a new electronic process for managing patients who are on antibiotics to ensure they are receiving the best course of treatment.

Goal: Reduce Readmission Rates

Patient teaching methods

- Our Medical program, Respiratory Therapy, Heart Function and Diabetes Education clinics have worked to develop new patient teaching processes and tools.

- Implemented a new weight tracking tool for heart failure patients which has been very successful on the Medical unit.

Patient Family Factors

- Staff in Respiratory Therapy, Heart Function and Diabetes Education clinics, have worked to improve the transition for patients from hospital to home. This includes supporting patients while still in hospital and ensuring they have appropriate followup appointments in place after discharge.

Transition/Communication

- The Information Technology department, our

hospitalists and Pharmacy collaborated to create an electronic medication reconciliation tool that allows family physicians, patients and community pharmacies to have an accurate record of a patient's medication after their hospital stay.

Linkage to community resources

- Discharge planners and physicians were educated on the Health Links approach in order to identify patients at high risk of readmission, and ensure they are followed by Health Links coordinators.

Goal: Improve Patient and Family Experience

Medical

- Implemented bedside rounding with the patient, family and care teams. (Pictured below)



Ambulatory Clinics, Surgical and Maternal Child Care

- Implemented real-time patient experience surveys. Results of these surveys were brought to Lean huddles to identify improvement opportunities and celebrate positive stories.

Acute Mental Health

- Created a quiet room for patients and families.

Emergency Department, Diagnostic Imaging

- Collaborated to remove unnecessary overnight stays for ED patients who need diagnostic tests.

- ED staff and physicians have worked diligently to improve wait times.

Surgical

- Updated teaching material given at discharge.

Maternal Child Care

- Worked with the Renfrew County and District Health Unit to provide continued breastfeeding support and increased education opportunities regarding breastfeeding for patients and nursing staff.

How the Community sees PRH

- From July to November, 2017, PRH conducted community surveys across Renfrew County in order to gather current perceptions of hospital performance and identify areas for improvement. The feedback validated the work that is being done and is being used to further improvements.

Goal: Improve Staff Engagement

Organization wide

- 724 improvement ideas were submitted over the past year resulting in 539 changes being made.

- 450 staff completed a satisfaction/engagement survey which identified new areas to work on.

Lean Management

- The huddle process was reviewed in order to ensure that there is a consistent structure in place to allow staff and physicians to attend huddles, bring forward concerns and be involved in the implementation of improvements.

Quality Improvement At PRH 2017/2018...Continued

Here are some of the department-based “quick fix” improvements that directly impact patient care which were implemented.

Acute Mental Health

- Improved process to ensure that patients who are at risk of falling have a physiotherapy consultation.

- Worked with Food Services to improve the meal selection process.

Ambulatory Clinics

- Updated patient education materials for various procedures.

- Made various improvements related to patient privacy such as adding curtains in treatment areas and relocating waiting room chairs.

- Began stocking juice for patients so it is easily available when needed.

- Created a new phone extension for patients if they need to call after hours to confirm appointments and can't get through during the day.

- Outpatients in the Pulmonary Function Lab, Pre-op Assessment Clinic, Systemic Therapy/Medical Day Care and Vascular Health programs who wish to quit smoking are now screened and offered followup support through the University of Ottawa Heart Institute's Smoking Cessation Model or a community resource.

Diagnostic Imaging

- Created an information sheet for patients who may be allergic to the dye we use for images requiring contrast.

- Worked with Medical Records to create a new process for release of patient information to ensure we are giving the right information to the right patient.

- Worked on improved flow for the booking of appointments.

- Installed extra hooks in the bathroom to make it easier for patients to hang clothes when changing into gown for ultrasound exams.

- Implemented a new ticket system for patient registration to avoid having to stand in a lineup.

- Improved process for ultrasound appointments to reduce wait times.

Emergency Department

- Added paediatric clothing to our ED linen cart.

- Created a list of community services available for psychology/counselling when patients and families are requesting resources.

- Improved the labelling of patients' own medication to ensure they are returned at discharge or when patients leave the department.

Environmental Services

- Worked with all inpatient departments to more quickly identify which rooms are ready for cleaning to allow for new admissions.

Finance

- Improved the wording on the ambulance invoice to eliminate confusion over the billing portion which is not covered by OHIP.

Food Services

- Worked with the ED and all inpatient departments to ensure there are the right amount of sandwiches and snacks for patients when needed.

Maintenance

- Painted stairwells for accessibility and installed automatic door openers in the links, ED, Zone B, Dialysis and on Medical.

- Installed a new desk in DI for accessibility and privacy.

- Worked with ED and Environmental Services to have a vending and coffee machine installed in the ED waiting area.

Materials Management

- Made improvements in the way orthopaedic program supplies are ordered and delivered which frees up time for our nurses and physicians to spend more time on direct patient care.

Maternal Child Care

- Installed hooks on the back of doors in labour rooms for patient/family coats or sweaters.

- Worked on a process to improve early allergy identification for patients.

- Worked with obstetricians and midwives to develop an improved schedule for clinic appointments.

- Improved the process for weekly meetings with the public health nurse to improve transitions for our patients from hospital to home.

Medical 3B & 2A:

- To help prevent patient falls, the interdisciplinary team now gathers within 30 minutes of every fall to analyse the root cause of the fall and develop a care plan to help avoid another fall from happening. This has resulted in a 50% reduction in falls and the procedure has been rolled out to other clinical departments.

- To improve post-surgical care for orthopedic patients, the physiotherapy department helped provide training to the nurses on proper post-surgery positioning and mobility.

- Staff received education through Renfrew Victoria Hospital's Regional Assault Care Program and now involve a representative in care planning as required.

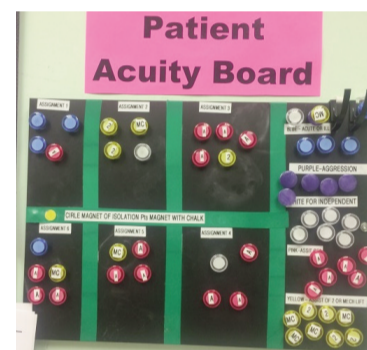
- All nurses received training on improved therapeutic communication techniques. This training provided strategies which have had a positive impact on communication with patients and families.

Pharmacy

- Reviewed medications stored on the inpatient units, in the Pharmacy and at our offsite building to ensure that the right medication is kept in the right quantities in the best place for quality and safety and patient care.

Inpatient Rehabilitation

- A patient acuity board was put in place to quickly identify which patients require the most support each day and ensure that nursing assignments are balanced for best patient care and quality and safety.



- Continued to increase the amount of time that a stroke patient is engaged in active face-to-face rehabilitation therapy during their hospital stay, resulting in better outcomes in their functional abilities. To achieve this, the team has invested in additional Occupational Therapy staff, implemented daily therapy schedules for each stroke patient to support this initiative and they have also implemented a daily five-minute Rehab Intensity huddle. Since first implementing these changes in September, 2016, the average amount of therapy per patient has increased by 52%.

Outpatient Rehabilitation

- Moved Geriatric Day Hospital to Tower D; a space that is quieter and easily accessible for patient drop-off and pickup. The space is also more patient-friendly for education and exercise purposes.

- Created business cards for therapy appointments to ensure patients and families can easily contact the correct health care provider if they need to change an appointment.

- Improved the scheduling process for patients in order to try and avoid multiple appointments and/or multiple trips to PRH.

Surgical

- Worked on new education booklets for patients having breast or bowel surgery.

- Worked with Food Services to ensure there are gluten free snacks and other food items available for our patients who are gluten free.

Vascular Health

- Reorganized the patient and family meeting room to ensure that all information is available in one place.

- Reviewed best practices with inpatient nurses for hypoglycemia management for our diabetic patients.

PRH Partners With Kids Health Alliance To Enhance Care For Children And Youth

PRH is proud to announce it has joined Kids Health Alliance (KHA), a partnership aimed at enhancing the paediatric health system with providers who share a common goal of improving the health of children and youth in Ontario. PRH is the first community hospital in eastern Ontario to join KHA which was founded in June, 2017 by CHEO, The Hospital for Sick Children (SickKids) and Holland Bloorview Kids Rehabilitation Hospital.

“Being a part of Kids Health Alliance will enable our team to provide a high quality, consistent, coordinated approach in caring for our child and youth patient

population through the sharing of specialized resources and expertise, and through collaboration on research and education,” said President and CEO Pierre Noel.

Initially, the partnership will focus on enhancing care for children and youth in the PRH Emergency Department (ED) where nearly one in five patients is under 18.

Recognizing that KHA's founders are leaders in paediatric care, and PRH already has successful partnerships with CHEO, Dr. Tom Hurley, Chief of Emergency said he looks forward to building on those successes to bring enhanced care closer to home.



PRH Auxiliary Celebrates Continued Fundraising Success In Support Of PRH



Diana Gagne
Auxiliary President

Our team of volunteers shows no sign of slowing down as 2017-2018 was another tremendous year for fundraising.

As part of special presentations at our fall and spring fashions shows, we were able to present a total of \$156,000 to PRH, all in support of the hospital's orthopaedics program and inpatient surgical unit upgrades for which we made a five-year pledge in the amount of \$500,000. We are hopeful that with the ongoing fundraising success in our retail locations, we will be able to fulfill our pledge sooner than anticipated.

Our year-round fundraising initiatives which include operation of the Sunshine Gift Shop and Mural Café, BINGO at the Boardwalk Gaming Centre (which raised \$49,000 in 2017 alone), HELPP lottery ticket sales, the onsite ATM, and our TV rental program for patients not only raise money for hospital equipment and service expansion but also provide many important and much-appreciated services which benefit the hospital's patients, visitors and staff.

The Sunshine Gift Shop, with its unique and attractive lines of merchandise, continues to be recognized as a retail gem in our community. The seasonal fashion shows and subsequent gift shop sales are still a lucrative formula and this spring we were also invited to participate in a spring fashion event at Marianhill which featured our latest styles.

On March 1st, the Auxiliary also participated in the PRH Foundation's Connecting to Care Radiothon at the Pembroke Mall. It was a great opportunity to showcase our organization while also raising money for the

event through a silent auction featuring a selection of items from our store.

The Mural Café continues to operate between 7 a.m. and 4 p.m. on weekdays and 11 a.m. to 3 p.m. on weekends. This past year we were very proud to have been able to help the hospital earn Silver Status in the Healthy Foods in Champlain Hospitals program.

Our buyer, Pat Bennett, worked very hard to research healthy food items which are not only appealing to our customers, but also meet the Silver criteria and are easy to source. Some of the new items such as the flavoured cottage cheese and fresh fruit have been selling well and we are very pleased to be part of the success of this program, even though we recognize that change is never easy. We are very proud to be able to offer healthier choices through our retail outlets and be a leader in this respect.

As always, thank you to our many volunteers. Without them, it would be very difficult to achieve our goals in terms of supporting the hospital and making a difference while promoting quality health care in our community.

2017 / 2018 Executive

- Diana Gagne** (President), **Gail Arsenault** (1st Vice-President),
Pierre Noel (Honorary President and CEO),
Helene Giroux (Treasurer), **Harlene Buske** (Secretary),
Jane Kielman (Membership), **Brenda Long** (Gift Shop Manager),
Donna Rielly (Gift Shop Schedulers),
Diana Gagne, Pat Bennett, Pam Lavoie (Mural Café Managers),
Gail Arsenault (Mural Café Scheduler),
Virginia Naylor (Special Events Phoning),
Carmel Harrington (Spiritual),
 Managers of Special Funds & Licencing:
Mary Olsheskie (HELPP Tickets), **Larry TerMarsch** (Bingo),
Brenda Reid (Bingo Scheduler)



PRH By The Numbers (April 1, 2017 to March 31, 2018)

Please note that the Pembroke Regional Hospital's full financial statement is available on our website www.pembrokeregionalhospital.ca.



Operating Revenue:
\$92,925,000

Operating Expenses:
\$93,623,000

**Champlain LHIN and
Ministry of Health funding**
\$70,287,000

**Salaries, benefits and
Medical staff remuneration**
\$65,511,000

**Other patient care
revenue**
\$18,286,000

**Supplies and other
expenses**
\$24,064,000

Other revenue
\$4,352,000

Depreciation
\$4,048,000

Versions Francaises Disponibles

À l'avenir, si vous préférez recevoir cette publication en français, veuillez communiquer avec:

Carolyn Levesque au (613) 732-3675, poste 6165,
ou au carolyn.levesque@prh.email

For 2017/18, The Number Of...

- Staff (total) **751**
- Nurses (RNs and RPNs) **297** Support Staff **348**
- Allied Healthcare Professionals **106**
- Active and Associate Physicians **67** Auxiliary Members **Close to 200**
- Volunteers **88** Volunteer hours **5,057**
- Trainees throughout our organization **300+**
- Admitted patients **5,874** Emergency Department visits **36,862**
- Ambulatory Clinic visits **19,097** Births **707** Surgeries **6,456**
- Diagnostic tests **72,600** (Includes **7,300 MRIs** and **12,500 CTs**)
- New and refilled prescriptions **126,352**
- Patient meals **122,640 meals & snacks** (Avg. **112 inpatients /day**).
(In addition, our Dietary department prepares outpatient meals for the Emergency Department, Medical Daycare, Surgical Daycare etc. as well as providing cafeteria and catering food services.)
- Square feet cleaned and maintained **330,000**
- Incoming phone calls to the PRH **950,000+** (**3,200/weekday**)
- Unique patient identifiers in the Hospital's database **268,520**