

# Community Connection

## Annual Report To The Community 2013/2014



*Leading, Learning,  
Caring For You*

Phone (613) 732-2811 Fax (613) 732-9986 Email [pr@pemreghos.org](mailto:pr@pemreghos.org)  
Website [www.pembrokeregionalhospital.ca](http://www.pembrokeregionalhospital.ca) YouTube Channel: [pembrokeregionalhosp](https://www.youtube.com/channel/UCpembrokeregionalhosp)



### Bringing Quality Care Closer To Home

Bringing quality care closer to home has been one of our major thrusts these past several years and these efforts have resulted in the significant growth in the breadth and scope of services delivered right here in our community. This effort continues, and during the past 12 months our team has been busy, often behind-the-scenes, working at improving and expanding the scope of what we offer locally. With this in mind, I'd like to share a few highlights with you from the past year.



**Pierre Noel**  
President and CEO

Last August we received some good news when the Board of the Champlain Local Health Integration Network (LHIN) unanimously endorsed our Surgery/CSR redevelopment project. You may recall from coverage in the local media at the time that this is a Ministry of Health and Long-Term Care supported project to upgrade our day surgery area, inpatient surgical unit, central sterile reprocessing (CSR), pre-operative assessment clinic and supporting services which are currently located in inadequate and outdated facilities.

The Champlain LHIN's review and endorsement confirmed that this is a project that is well-aligned with their Integrated Health Service Plan and with the Ministry of Health and Long-Term Care's Action Plan for Health Care. It will also enable more people to receive quality care closer to home and reduce wait times, particularly in relation to cancer surgeries and orthopaedic surgeries – two priority areas of focus for the LHIN. We are now actively working on the next stage of the process which involves more detailed space planning and approvals with a view to getting the initial parts of the project off the ground in the next year or so.

Continued on page 4

### Experienced Board Of Directors Oversees Hospital's Progress

A year ago, in our report to the community, we delivered a message of change for the Pembroke Regional Hospital and our Board of Directors.

We had introduced our latest Strategic Plan, innovative advancements in quality, performance and safety through our Lean Healthcare initiatives, and my new role as Board Chair. Today, I am feeling great confidence thanks to the outstanding support of our volunteer Board members, Past Chair Barb Schoof, our Senior Leadership and the expertise of many others on our Hospital's healthcare team who have been passionately committed to delivering the safest and highest quality of care to every person, every encounter, every day.

Early on we saw the framework of our strategic plan come to life with improved patient flow through Zone B in our Emergency Department and the beginnings of the Lean Healthcare Initiative. This past year has involved laying a solid foundation for these programs and more; and now, as with my work as Chair, I see us confidently hitting our stride as we go forward with a variety of projects which will not only support and benefit our patients, but will also support and benefit our organization and the way in which we deliver care.

While I recognize that others will also highlight and celebrate the success we have had with Lean, I do want to share that our Board is very proud of the accomplishments which have been made throughout the hospital including the Emergency Department where changes have helped to reduce wait times and to improve patient satisfaction.

Just as importantly, we celebrate outstanding teamwork, empowerment and communication within the operation as demonstrated in our improved Employee Satisfaction survey results. **Continued on page 3**



**Kelly Hollihan**  
Board Chair



#### 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.

#### VALUES

Compassion and Caring; Excellence and Innovation  
Social and Fiscal Responsibility; Sacredness of Life  
Mutual Respect; Community Spirit

### 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@pemreghos.org](mailto:carolyn.levesque@pemreghos.org).

Pembroke Regional  
Hospital Foundation



Fondation de l'Hôpital  
Régional de Pembroke

## Celebrating a Banner Year Of Healthcare Philanthropy

The 2013 fiscal year saw a marked growth in revenue, as citizens of Renfrew County, the Pontiac, and those who do business here, rallied together in support of improving our healthcare access.

From April 1st, 2013 through to March 31, 2014, the Foundation saw a 31% increase in cash donations with a 79% overall increase including Gift-In-Kind donations. The revenue flow is derived from several sources: Foundation Special Events, Foundation Programs, Third Party Events, Legacy Gifts, Gifts of Stock or Property, and outright cash gifts. Each gift we receive generates a valuable charitable receipt that may offset estate taxes or year-end taxes. Your support is fueling great advancements at our hospital. With the expansion of technology combined with the compassion and expertise of our Healthcare Team, we are creating a world class hospital that everyone should be very proud of.

As we enter the final lap of the MRI: Image Matters Campaign with just \$850,000 to secure, we invite everyone to pitch in and help us cross that finish line.

This past year we were honoured to have been recognized as the Community Organization of the Year by the Upper Ottawa Valley Chamber of Commerce and this wouldn't have been possible without your support. Thank You! *Nancy Warren, Executive Director*



Accepting the gift were PRHF Board members Kelly Hollihan, Bob Holmes and Donor Relations Coordinator Gregory Junop.

**↑158%**  
\$293,826

Save the date for the  
**9th Annual Black & White  
Gala on October 18th!**  
A special thank you to  
Scotiabank for their  
Lead Sponsorship over the  
past 6 years.

**Foundation Special Events** Throughout the course of the year, the Foundation offers a variety of special events with the support of business partners, donors, and volunteers. Over the last year, these partnerships have expanded and yielded a tremendous growth for the Foundation. Each special event is designed to allow for different communities of people to engage with the Foundation at all levels.

Thank you for participating in: The Eighth Annual Black and White Gala, LOTTO MRI, monthly Denim Days, the Christmas Card Campaign, our Summer Memories Photo Contest and our Valentine's Dance.

### Local Businesses Support First Hospital Lottery LOTTO MRI:

George's Marine and Sports, Regal Boats, Moncion Grocers, Mr. Glenn Rankin, MacEwen Fuels, Canadian Tire, TravelOnly (Brian Kendrick), Gearheads, Barry's Bay Outfitters, Docks by Trucks Plus, and Henry's Furniture.



**↑2.79%**  
\$100,867

**Foundation Programs** Whether it is recognizing a caregiver through our Guardian Angel Program, or joining our Healthcare Together Monthly Giving Club, your donations are helping families here at home. Other programs include: Healing Wishes, Staff Payroll Deduction, Community Connections, In Memoriam Gifts and In Celebration Gifts.

**In-Patient Rehabilitation Staff (right) were nominated as Guardian Angels for their healthcare excellence and professionalism as nominated by Evelyn Black.**



A special thank you for the continued support of families and funeral homes who dedicate In Memoriam gifts to enhance our local hospital.

Murphy Funeral Home - Neville Funeral Home - Malcolm, Deavitt & Binhammer Funeral Home - Ringrose Funeral Home - Laundry Funeral Home  
Belleville Funeral Home - McPhail & Perkins Funeral Home - Lougheed, Jackson & Barnard Funeral Home - Zohr Family Funeral Homes  
and Fraser-Morris & Heubner Funeral Home

**↑457%**  
\$149,362

Save the date for the  
**Knight's of Columbus  
Pat Harrington Golf Classic  
on September 11th,  
and the 10th Annual  
Kim Armstrong Turkey Trot  
on October 11th.**

**Third Party Events** Our success is also due to the efforts of our community in hosting events and donating the proceeds to the Foundation. We are a small foundation and community-driven events are greatly needed and appreciated! Thank you to the tireless volunteers who organized and hosted, and to everyone who participated in third party events in celebration of healthcare:

The Knights of Columbus Pat Harrington Golf Classic - Garrison Petawawa's 40th Annual Ironman  
McDonald's McHappy Days - Shopper's Drug Mart Tree of Life - Peter Doran Golf Tournament - AECL Black Bears Hockey Tournament - Hell or High-Water Dragon Boat Race - Tour de Bonnechere - CIBC Staff Penny Drive and Denim Day - Mulvihill Drugmart Denim Day and Matching Gift - Charity Wheelchair Basketball Game  
Community Mental Health Charity Dance - 1 Dental Unit Education Symposium - Tim Hermitte Charity Concert  
Dr. Kim Armstrong Turkey Trot - Kinette Club Basket Raffle - Don MacDonald Golf Tournament - Riverview Heights Staff Collection - Cobden and Area Civitan Club Golf Tournament - Ottawa River Hydro Staff Fundraiser - Suny's Variety Nevada Tickets - The Pat Banks Memorial Golf Tournament - The Peter Doran Memorial Ride - Metal for MRI Concert  
Sno-Drifters Club of Eganville's Bonnechere Cup & May Mudder - Northern Credit Union's Golf Tournament, spring raffle and book sales - PRH Staff Cookbook Sale and several Moustache Growing Competitions.

**↑64%**  
4,643 Gifts

Aside from Foundation Programs, Foundation Special Events, and Third Party Events, we saw a 50% increase in the dollar value of cash donations including Gifts-in-Kind.

**Outright Donations** The Foundation saw a 64% increase in the number of gifts we received during the 2013 fiscal year; 4,643 gifts in comparison to 2,833 gifts across a range of programs in 2012. This direction reflects international trends: donors are seeking different channels to support their charity of choice.

**MR BRING IT  
ON HOME**

Pembroke Regional Hospital Foundation



Nancy Warren accepts the keys for the property donation from Dr. Eng and Dr. Pan, accompanied by their former medical secretary Lisa DuLong, PRHF Board member Dr. Anne-Marie Savoie and Hospital President and CEO Pierre Noel.

Thank You For Investing In Local Healthcare!

## Experienced Board Of Directors Oversees Progress...Continued (From Front Page)

Through this work, we better position our team for success as we introduce MRI, orthopedics, and other key programs to our region in upcoming years while we strive to bring quality care closer to home.

As we look forward to another solid year in 2014-15, I am pleased to say that we do so with a very solid Board at the helm – a Board with much stability which has experienced very little turnover in the past number of years, and one which has a great deal of expertise as a result of professional development opportunities which have been made available through our network of support in the Ontario Hospital Association, the Local Health Integration Network and the Ministry of Health and Long-Term Care, the Catholic Health Association of Ontario, Accreditation Canada, our members in the Catholic Health Corporation of Ontario, and more.

One of these continuing education opportunities is the Governance Centre of Excellence's Advanced Certificate in Board Governance. In September, our Board hosted this session locally in Pembroke with participants from healthcare Boards throughout the region and as a result, 12 of our directors are now certified in this advanced program while all of our trustees have achieved the Essentials Certificate in Hospital Governance for New Directors.

We look forward to our upcoming Mission Leadership Program training from the CHAO in our 2014 autumn Board retreat. And, throughout

2013-14 we have continued our series of Board Education sessions hosted by our Senior Leadership Team to bring understanding to complex issues for our deliberation and decisions including those on the topics of LEAN, Accreditation, the MORE<sup>OB</sup> (Managing Obstetrical Risk Efficiently) program, and the implementation of new Senior Friendly Initiatives.

### DID YOU KNOW...

Another important role the Board has is to grant privileges to physicians, dentists, extended class nursing staff and midwives, allowing them to provide care in our facility.

This past year alone, following a thorough credentialing process, our Board granted privileges to 246 of these professionals.

In the past year, our Board of Directors has played a key role in transitioning the Hospital to comply with new regulations introduced in the Canada Not-for-profit Corporations Act and our designation efforts through Ontario's French Language Services Act by revisiting and revising our corporate by-laws. Along with this exercise, and in preparation for Accreditation this year, we have also reviewed our Board policies through the OHA's Guide to Good Governance guidelines. These are just some of the projects in our annual work-plan that further demonstrate our commitment to responsible stewardship of public resources for our friends, family and neighbours in our community.

While I noted that we have little turnover on our Board, this year we will say goodbye to Margaret Smith and Mary Whelan, our CHCO (Catholic Health Corporation of Ontario) designate who is retiring after more than six years in this position.

Margaret brought great insight and compassion to our boardroom table from her many years of service in human resources and healthcare in our community. She showed outstanding commitment to her role which included serving on our Resource and Audit Committee and as Chair of our Executive Compensation and Evaluation Committee.

Mary has been a significant contributor to our Board in her tenure, bringing with her a passionate commitment to quality care, organizational development, people leadership, good governance and responsible stewardship. Over the years she has chaired our Executive Compensation and Evaluation Committee while lending her voice to many others. Mary's insights and experience greatly contributed to our strategic planning, policy development and mission. Both ladies are to be thanked and will be missed. In the coming year, we will also have new faces at the table representing our Auxiliary and Foundation.

While our Board positions for this year have been filled, there are always opportunities to join our organization as a volunteer community representative on select committees, so we welcome those with an interest to contact our Hospital's administration office.

## Fraser Strachan's Story...A Patient Testimonial

In late March, Petawawa resident Fraser Strachan found himself thrust into a medical emergency and hospitalized with blood clots forming in his lungs. During the two weeks he spent at Pembroke Regional Hospital, Mr. Strachan describes the care he received as "top-notch"; from the initial assessment and diagnosis, to treatment and recovery, he openly praised the members of the healthcare team. "The physicians, nurses, staff and volunteers at Pembroke Regional Hospital saved my life. Throughout my experience - from the time I arrived at the Emergency Department to my current follow-ups, I have been surrounded by the warm, friendly atmosphere of a terrific family. Beyond saving my life, staff went the extra mile which truly reflects their dedication and professionalism in providing premiere healthcare."

"Our Hospital's healthcare team saved my life because of the technological advancements made possible through donations. Like the MRI, the CT was purchased thanks to the generosity of those in our community. Without the CT scanner, the radiologist would have never caught the blood clots forming in my lungs. I'm thankful to all who helped make this a reality."



## Hospital Auxiliaries Continue To Play A Vital Role In Supporting Healthcare Delivery

Despite constant change and growth in the healthcare field, hospital auxiliaries continue to play a vital role in supporting a hospital's delivery of care by providing a broad range of important services for our patients, our visitors and our staff.

Fundraising in today's challenging economic times requires innovation, business expertise, marketing and management skills and more, but in every instance where modernization has been required or circumstances have left no option but change and forward thinking, our volunteers and executive have stepped up and risen to the occasion.

A perfect example of this is our continued success in the Sunshine Gift Shop and the Mural Café, with net profits this past year of \$38,859 and \$42,094 respectively.

In our gift shop alone, 2013 was a year of "firsts" with our first successful "Fashion on the Move" show at the Marguerite Centre which led to the hosting of a second show, just as successful last month. A variety of special sales and customer appreciation days also exceeded all expectations.

Most recently in the gift shop, tea, coffee and hot chocolate are now being sold during evening and weekend hours and there will be many more firsts in the coming year thanks to the dedication of 84 volunteers, of which 57 are regular volunteers and 27 are students completing their community hours.

In the Café, student volunteer opportunities have also increased and gift cards and payroll deductions for employees are adding greatly to our sales.

It was both a stressful and exciting year for our bingo volunteers who contributed a total of 500

hours and helped raise \$20,846 while adjusting to the new e-gaming centre and bingo format. Thanks to Eleanor Boire who has taken on bingo coordination in addition to her other duties.

Rounding out our fundraising efforts of the past year were our H.E.L.P.P. lottery profits which increased to \$10,000, the annual Fall Tea, TV rentals, the ATM and our Memorial Fund. Total donations to the Pembroke Regional Hospital for the fiscal year 2013-2014 were an impressive \$138,196, bringing the total contribution towards our one million dollar MRI pledge to \$659,500.



**Mary Olsheski**  
Auxiliary President

My term as president ended in April and I would like to say it has been a real pleasure working with everyone. For the coming year, Anne Sloan, who is no stranger to the Auxiliary, will return as president. We are also saying goodbye to Pam Lavoie who has done an exceptional job staffing our Café and to Susan Morrow, our 2nd Vice-President who so capably assisted with our Fall Tea, and we are pleased to welcome Margaret Dickerson as our incoming 2nd Vice-President.

A couple of additional highlights worth noting - in March we presented the first annual Pembroke Regional Hospital Auxiliary Bursary to Kayla Holmes, a very deserving nursing student at the Pembroke Campus of Algonquin College.

And in April we hosted the HAAO's (Hospital Auxiliaries Association of Ontario) Ontario East

spring conference at the Best Western Pembroke Inn which was a huge success. In addition to our annual meeting and networking, the 122 delegates from across eastern Ontario were treated to two wonderful guest speakers, Dr. Ben Hoffman and Dagmar Friedrichson.

A special thank you to the Alexandra Club of Pembroke for their generous contribution of \$500 to assist with costs.

We recognize that in our region there are many worthy volunteer opportunities and we are grateful that our 156 members (134 Regular Members, 13 Honourary and Life Members, and 9 Provincial Life Members) have chosen to give some or all of their time in support of our hospital.

Their commitment has enabled us to do great things!

### 2013 / 2014 Executive

Mary Olsheski (President),  
Anne Sloan (Past-President),  
Pierre Noel (Honorary President),  
Anne Sloan (1st Vice-President),  
Helene Giroux (Treasurer),  
Diana Gagne (Secretary),  
Eleanor Boire (Press & Publicity/Historian),  
Vina Hearty (H.E.L.P.P.),  
Brenda Long (Gift Shop Operations),  
Trudy List-Radke (Gift Shop Staffing),  
Mary Banks/Judy Johnston/Pat Bergsma  
(Mural Café Operations),  
Pam Lavoie (Mural Café Staffing),  
Dolly Pick (Special Events Telephone),  
Sr. St. Mark (Rita Mahoney) (Spiritual),  
Carmel Harrington/Dorothy Devine  
(Ways & Means/Fundraising),  
Janet Campbell (Membership)

## Bringing Quality Care Closer To Home...Continued (From Front Page)

Equally as exciting, last summer the Champlain LHIN also approved a regional plan for orthopaedic services, which includes the development of a comprehensive orthopaedic program at PRH. Securing approval to develop an orthopaedic program has been a longstanding strategic goal of our hospital and we were delighted to get the green light.

With that approval in place, PRH is now working on a detailed planning process led by Francois Lemaire, Vice-President of Patient Services - Acute Care, to examine a whole host of behind-the-scenes requirements to launch the program, likely in the spring of 2015.

In addition, and vital to bringing an orthopaedic program to PRH, efforts have continued this past



Lean celebration at the Marguerite Centre.

year on the work required to purchase and install our new MRI. Part of this activity has involved equipment selection and acquisition, which is now complete, and the securing of various approvals from the Ministry. Our next approval, that we believe we will have in hand shortly, is to go to tender for construction of the space to house the MRI with construction beginning this summer. This past year we were also successful in recruiting two new radiologists and in developing a recruitment plan for MRI Technologists. So assuming that the remaining planning and the construction goes well, and with our fundraising campaign getting closer to its goal, we expect to see our new MRI up and running in by mid 2015.

Some of our other programs had some exciting

new developments over the course of these past twelve months.

For instance, this past year saw the introduction of a Lean process improvement rollout at the Hospital with an initial concentrated focus in our emergency department. Early efforts have produced exceptional results with patients receiving the same exemplary service, but at a much quicker pace thanks to the implementation of new quality improvement initiatives designed to improve patient flow.

Among the improvements are a wait time reduction for low acuity patients from three hours to one, and a 12-hour reduction in the length of stay for an ED patient waiting for a hospital bed.

Another substantial wait time reduction was made in the time it takes a new admitted patient to occupy a bed from the point when the previous patient was discharged.

On average, this transition used to take 213 minutes. Thanks to a review of processes and a collaborative effort involving housekeeping, admitting staff, the Emergency Department and clinical units, that turnaround time has been reduced to an average of 52 minutes.

The Ministry of Health and Long-Term Care's Pay for Results ranking which is based on five indicators covering wait times and admissions is also reflecting these improvements. Based on statistics from January to August of last year, the Pembroke Regional Hospital experienced a 35% improvement in its ranking among 74 hospitals.

These changes are also gaining positive recognition within the community and the measures taken to achieve this are not only benefitting our patients, but they are also easing the pressure on staff.

Another noteworthy achievement this past year was the launch of the MORE<sup>OB</sup> (Managing Obstetrical Risk Effectively) program in our obstetrical department, a comprehensive program designed to create a culture of improved patient safety based on quality improvement and

professional development. A core team of PRH physicians and staff has been trained and this team will train other physicians and staff with support provided by the MORE<sup>OB</sup> organization during the next three years.

And finally, and more recently, PRH has been partnering with other agencies in the community to ensure that local patients with complex health needs benefit from more coordinated care and better transitions between healthcare partners through the development of a North Renfrew County Health Links.

While the West Champlain Family Health Team is the lead agency, Sabine Mersmann, our Vice-President of Patient Services - Seniors and Community Care, is co-chairing the group's



Staff launch and training session for the new MORE<sup>OB</sup> program.

steering committee. By working closely with identified patients and their caregivers, care plans will be jointly created which address their core needs and will link them with appropriate services within the community rather than having these people rely solely on hospitals. The Health Link program will help put patient needs first making best use of the community-based expertise available and providing better coordinated care.

As we continue with advancing these efforts and the many others designed to improve the care we deliver, we go forward with a great sense of pride in all that we have accomplished to date and with enthusiasm as we look to the future and to meeting the challenges of tomorrow.

## Our Volunteers Are An Important Part Of Our Hospital's Healthcare Team

Every day, volunteers within our community are making a difference in the lives of others. At Pembroke Regional Hospital, those in our Volunteer Services program are an important part of our Hospital's healthcare team providing over 5,558 hours of service this past year alone.

Comprised of 125 men, women and teenagers, our team of volunteers made a difference and a significant contribution this past year by donating time and service, while helping make the patient and visitor experiences more memorable in a positive way.

The Volunteer Services department is responsible for coordinating assignments and activities which help to enhance service delivery in many areas of the hospital including clinical units, hospitality, ambulatory clinics, the Geriatric Mobile Day Hospital Program, and the Woodworking Shop operated by Community Mental Health Services. Through tasks such as magazine delivery, administrative prep work, office duties, grounds beautification, friendly visiting, water delivery and more, volunteers are essential to helping sustain the hospital.

This past year we reintroduced the Pet Therapy program which has a proven effect of decreasing blood pressure, and lifting patients' spirits.

On Thursdays, Pet Therapy volunteer Blake Gamble brings in one of his special friends – four-year-old Buddy (a Collie), or six-year-old Dakota (a miniature Schnauzer) who have each been certified as part of a special training program offered free of charge through St. John Ambulance, for a one to one-and-a-half hour visit with patients and staff in the inpatient Rehabilitation unit.

"I look at it like I'm 'paying it forward'," said Mr. Gamble. "I'm a retired veteran and I know what having the dogs for company means for me and I wanted to be able to share that with those in hospital, especially those who are in for quite a while."

Mr. Gamble, who has been involved with the Pet Therapy program for nearly a year, said that in addition to being able to add a bit of 'light' to those in hospital, being involved in the program is personally rewarding and provides him with some social time as well as those he visits with tend to

share their own pet stories and tell him about the special friends they have waiting for them at home. "I feel really good after I've left each week, knowing that each visit has enabled the patients to leave the hospital – at least in spirit – for a little while," he said, adding, "If you see us in the hallway, don't be shy, come see us – that's why we're here."

Pastoral Care is another area in which many volunteers choose to use their time. We have 34 Eucharistic Ministers who come in once or twice a month to distribute Holy Communion to Roman Catholic patients and Clergy from the Protestant faith denominations frequently bring their congregation members communion as well. Our on-call Clergy are volunteers who are on duty 24/7. They are very committed to bringing the word of God, the sacraments and words of compassion and praise to those who are suffering.

Prior to any service held in the chapel, we have two volunteers who visit patients and ask if they would like to attend the service and whether or not wheelchair transportation is required. We are also lucky to have a volunteer who devotes time to keeping track of service participation and other statistics that help to shape the programs and services offered through Pastoral Care.

Each day, a Pastoral Care Volunteer Visitor comes to spend one-on-one time with each person on his/her list. They listen to patient stories and provide opportunities for patients to express their fears and anxieties which may weigh heavily on them due to illness.

During the past year, those who volunteer in our music ministry have had some busy times. We have two Memorial Services in November and April of each year to celebrate the lives of patients who died while in our care. Besides these, this past year we have had Memorial Services for our chaplain, Father Patrick Tait and for two staff members, Dan Pietersma from Plant Services and Dale Kutschke from Housekeeping. We miss them all.

We express our thanks to each volunteer at Christmas with a small gift and during Volunteer Appreciation Week we honour them with a prayer service and a dinner. On behalf of our patients, families, staff and the community, these selfless people are honoured.



Blake Gamble and Dakota

## PRH Board of Directors 2013/2014



Front row, from left, Frank Christinck, Romeo Levasseur, Wayne TerMarsch (Vice-Chair), Kelly Hollihan (Chair), and Dr. Michael Ferri (Chief of Staff).

Back row, from left, Christina Adams, Mary Whelan (CHCO), Sheila Clarke, Sabine Mersmann, Margaret Smith, Robert Cotnam (Foundation Chair), Barbara Schoof (Past Chair), Heather Ball (Vice-Chair), Steve Hartmann, Garry Yaraskavitch, John Wren, Pierre Noel (President and CEO) and Francois Lemaire (CNE).

Missing from photo: Dr. Kevin Roach (GSIC), Dr. Tom Hurley (President of the Medical Staff) and Mary Olsheski (Auxiliary President).

## Just Some Of The Achievements In The Past Year...

**Diagnostic Imaging:** Contributed to wait time reductions in the Emergency Department by redeploying staff and increasing the hours of operation for CT and Ultrasound; Optimized wait times for CT by streamlining a number of processes around radiologist report turnaround times; Standardized Ultrasound equipment which improved quality for patients and ergonomics for staff.

**Diabetes Education:** Introduced common branding for Renfrew County Diabetes Education Program; Conducted an environmental scan to assess diabetes and mental health needs for the county's aboriginal population.

**Materials Management:** Began selling the Hospital's surplus equipment to the public via Kijiji yielding over \$2,000 in sales in the first year.

**Emergency Department:** A real-time patient satisfaction survey was developed in order to help identify opportunities for improved care. The surveys are randomly administered by a volunteer using an iPad and results are pooled and analyzed to allow the team to focus on further improvements to patient care and processes in the ED.

**Respiratory Therapy:** All staff participated in neonatal training at Montfort Hospital.

**Community Mental Health:** Our clients experienced equine therapy in conjunction with Hope Reins Equine Assisted Therapy at Vanderbrook Farms in Killaloe; Our downtown outreach site underwent renovations to improve the environment for our clients; Our ACTT (Assertive Community Treatment Team) teamed up with community partners to host Journey to Wellness, a program which addresses metabolic syndrome - a condition faced by many CMH clients.

**Medical 3B:** Areas to store personal belongings for visitors of patients in isolation were created; Containers were found and provided to patients to neatly store their belongings in at bedside.

**Senior Friendly Initiatives:** Operation Mobilization was implemented hospital-wide in clinical areas to prevent functional decline in seniors admitted to hospital. This program includes posting of walking markers, unit-based exercise classes, mobility goal-making, functional ability assessments, and weekend mobility prescriptions.

## Our Hospital's Senior Leadership Team



From left, Dr. Michael Ferri (Chief of Staff), Pierre Noel (President and CEO), Sabine Mersmann (Vice-President Patient Services - Seniors and Community Care), John Wren (Vice-President Finance and Corporate Services CFO/CIO), and Francois Lemaire (Vice-President Patient Services - Acute Care and CNE)

## Medical Staff Shows Leadership In Journey To Improve Quality And Safety

Sometimes, the key to making progress is to recognize where you've been, know how to take that first step and then, start your journey. Throughout that journey, you hope for the best and you stick with it, no matter how challenging, because no one said progress would be easy.

Ten years ago I began my own journey as I cautiously took on the role as Pembroke Regional Hospital's Chief of Staff. Increasingly over the recent years in particular, we have been exploring better ways to improve quality and safety.

One of these ways is through the work being done in our hospital based on Lean methodologies. As the Chief of Staff, I have completed initial Lean training and I have seen first-hand the enthusiasm of our Senior Leadership Team for sustainable change in the way we do things.

And while our medical staff is now embracing the work that is being done and recognizing the success we've had to date, it was not without initial scepticism.

We've all heard the buzz words - streamline, optimize, integrate, adapt. Everyday someone comes up with a new strategy or tool or technology to increase our efficiency. Everybody is being asked to look at ways to improve the way we care for people, but with a Lean approach we have chosen to rely on our frontline staff that are in a very good position to see where the efficiencies are needed. As such, we have seen positive changes especially in the emergency department, where there have been great successes.

The Lean process favours and values those

who make changes. It validates that everyone has expertise, it engages people, it peaks their interest because it's relevant, it leads to an endorsement of ideas and it allows people to take action when and where needed.

Ultimately it brings the focus back to our patients, and as part of this process I've seen some real emerging strength in the organization by physician leaders especially with regard to quality and safety.

I think this is testament to a real shift in the medical field towards professional development. Mentoring is now a strong part of our role as physicians and to support this, the Canadian Medical Association (CMA) has put in place a sponsored leadership development opportunity for those up for the challenge.

This allows for improved quality of patient care because we are able to communicate better, methodologies are standardized, and new physicians are given clearer directions and responsibilities with measurable outcomes. Elevated safety issues also become opportunities to develop corrective measures which are physician studied and physician approved.

Another area where significant improvements are being made is within our Hospitalist program which dates back to 2005 and was launched not only in response to the number of residents in our region who were at that time without a family physician, but also because a number of family physicians had left hospital-based care for office practice.

This is a trend that has not completely reversed in the past nine years and in the past

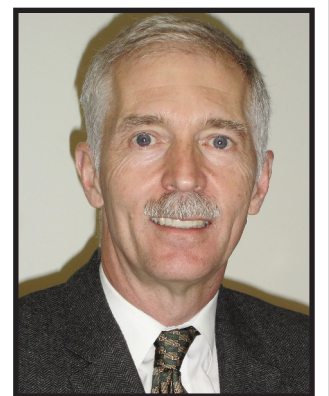
couple of years our program has grown to the point where we have four hospitalists on staff every day to look after an increased number of patients.

During the past year, our lead hospitalist position has been vacant but we will have a new lead on board this summer. This individual will work closely with family practitioners, the Senior Leadership Team and me to look at ways to deliver better care, improve the admission and discharge processes, and look at succession planning so that we will have enough hospitalists to look after our patients as physicians in the community plan for retirement.

Going forward, I am excited to see further progress in the MORE<sup>OB</sup> program which will allow for consistent structure and accountability within our robust obstetrics program, as well as the development of our full service orthopaedics program.

Our medical staff is very interested in and supportive of care closer to home in terms of creating this new program, but as with anything new they are cautious about the implications of such a large undertaking. Despite that, they are very supportive and are committed to making the transition go smoothly, because, at the end of the day, it is best for our patients.

The journey continues...

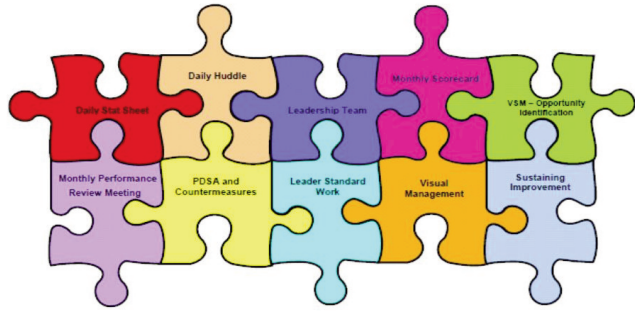


Dr. Michael Ferri  
Chief of Staff

## Our Lean Management Journey...How Far Have We Progressed In One Year?

**What is Lean?** "Lean is a set of concepts, principles and tools used to create and deliver the most value from the patient's perspective while consuming the fewest resources and fully utilizing the knowledge and skills of the people performing the work." *Perfecting Patient Journeys 2012*

At Pembroke Regional Hospital, we are on a journey to build a Lean Management puzzle. As we add more pieces to our puzzle, we are strengthening support base while creating an environment where ideas are generated from all staff and physicians, and new opportunities are put in place to improve the patient experience. Our goal is "to develop our people to become problem solvers which will improve performance and result in enhanced patient care and increased staff satisfaction".



### How are we doing now that we are one year into our journey?

We now have five units that hold daily status updates involving the Manager and Team Lead/Discharge Planner to better understand the business of their units, what could help to improve the work flow and most importantly, what could help to improve patient care and add value for the patients and families we work with every day?

The same five units also hold daily 15-minute improvement huddles where the teams gather to hear about staff improvement ideas, some of the problems staff have identified during their shift and the opportunities that the staff are working on to address these problems. During the huddles,

"True North Metrics" or the goals of the organization are discussed as well as how ideas for improvement at the unit level can help to meet these goals. Huddles are also a place to celebrate and highlight staff accomplishments, share positive feedback from patients, and discuss the things that helped make the work day or work environment better for all. Huddles are also a place to communicate what is being measured each month, what our targets are, and how teams are doing in terms of meeting those targets. This could include: patient satisfaction, admission numbers, and length of stay, among others. This allows us to engage our staff and physicians and be part of the solution in improving our hospital's overall performance.

### Are our team members becoming better problem solvers?

In the past two months, we have had more than 100 ideas brought forward at our Daily Improvement Huddle boards and 52 of these were implemented within one month. These ideas were identified by frontline staff and physicians as areas for improvement and worked together with management to develop and implement solutions - so we are on the right track.

### How are we doing with our goal to enhance patient care?

All ideas discussed at the team huddles must fall under at least one of four categories reflective of our organization's goals: quality and safety, patient satisfaction, working together, financial stewardship. We also focus on reducing waste and ask our staff and physicians to look at the different kinds of waste in our system that do not add value for our patients. These include unnecessary movement of patients through the system, excess inventory, doing work that is not valued by the patient or helping in the delivery of their care, time spent waiting or not doing something correctly. One improvement at a time, we are well on our way to achieving this goal.

## Quality Improvement Is A Priority

In striving to find new or better ways of doing things to improve or enhance care for our patients, to increase satisfaction and to achieve the better clinical outcomes, PRH along with all other hospitals in Ontario have developed annual Quality Improvement Plans which, as legislated under the Excellent Care for All Act, 2010 (ECFAA), must be made available to the public each fiscal year beginning April 1. A full version of ours can be found on our website.

The members of our Board and Quality Committee work closely with our Senior Leadership Team, physicians, and our clinical colleagues to determine areas where we are doing well and areas where we have room for improvement. From there, initiatives are selected and targets are set for the organization.

### Some of the reported quality improvements made in 2013-2014:

- Successful in once again lowering our rate of hospital-acquired C-Difficile.

We were able to reduce our C-Difficile rate to our 2013/2014 target by implementing a number of standard work protocols and improved cleaning procedures. We also are working on new standardized treatment protocols.

- Significant increase in hand hygiene compliance rates.

We experienced significant improvement in hand hygiene compliance with a rate of 92.95% for initial patient environment contact in 2013/2014.

- Considerable improvement in Emergency Department wait times.

Our rate of admissions from our Emergency Department was lowered to 10.5% from 13% which also led to a decreased wait time in the ED for those awaiting admission which is now less than the target for the Champlain Local Health Integration Network (LHIN).

- Successful implementation of a real-time satisfaction survey in the Emergency Department.

The Hospital developed and put into place a real-time patient satisfaction survey in the ED which allows the healthcare team to make immediate changes or improvements and has ultimately increased patient satisfaction in that department.

- Improved medication reconciliation.

A significant effort has been made around safer medication practices including the implementation of best practice on establishing an accurate medication profile when patients are first admitted to hospital.

Led by physicians and the Pharmacy department, over 80% of all new patients are now being profiled and the hospital continues to progress on this when patients are transferred and discharged.

- Completion of clinical guidelines for patients with heart failure or acute coronary syndrome.

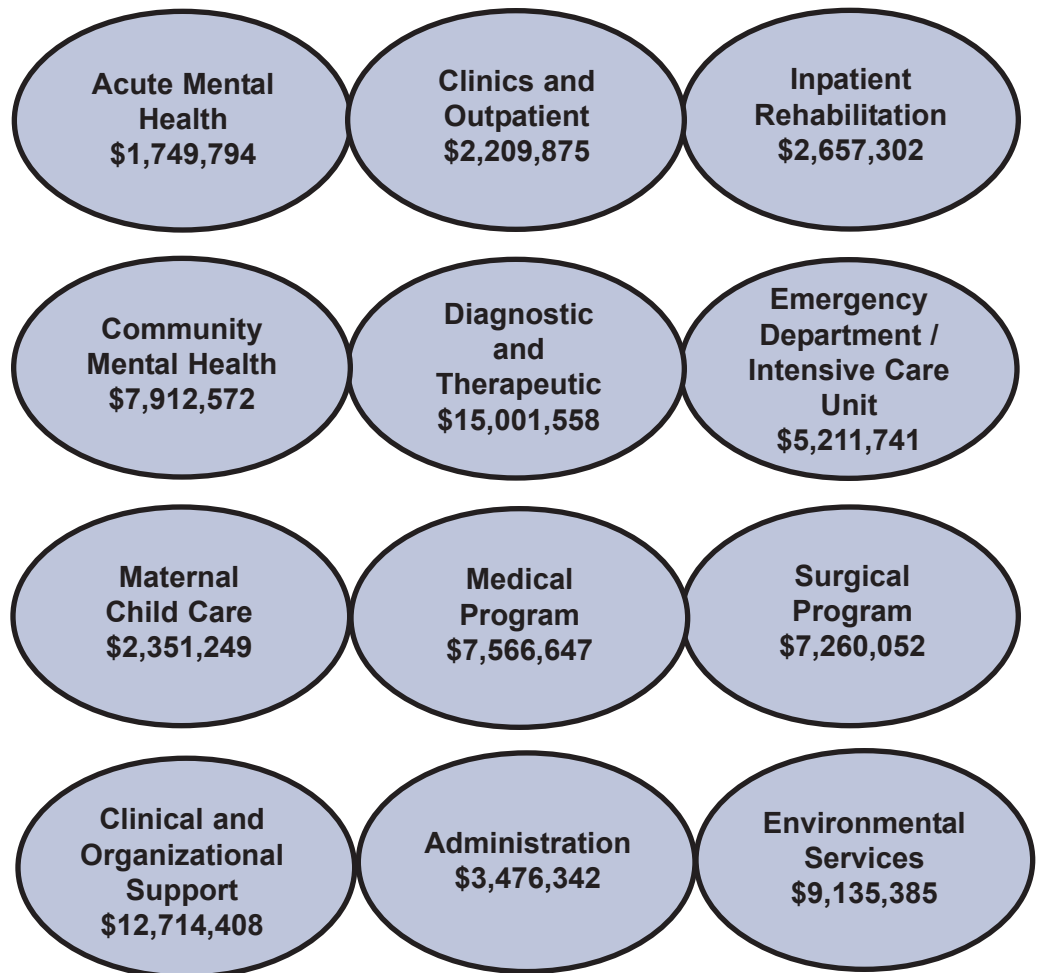
Another clinical best practice which has shown significant improvement in 2013/2014 is the completion of new guidelines for all patients with acute coronary syndrome and heart failure. We had a compliance rate of 83% in the third quarter of the past year and 98% in the fourth quarter.

## PRH By The Numbers

Please note that the Pembroke Regional Hospital's full financial statement is available on our website [www.pembrokeregionalhospital.ca](http://www.pembrokeregionalhospital.ca).

**TOTAL OPERATING BUDGET: \$83,656,920**

Our total budget includes funding for the following areas. Each amount includes funding for salaries/wages, supplies and equipment.



## In a Year, The Number Of...

Nurses **Over 300** Allied Healthcare Professionals **Nearly 200**  
 Support Staff **233** Active/Associate Physicians **46**  
 Volunteers **125** Auxiliary Members **156** Volunteer hours **5,558**  
 Trainees throughout our organization **Over 300**  
 Admitted patients **5,540** Emergency Department visits **34,681**  
 Ambulatory Clinic visits **30,125** Births **697** Surgeries **5,851**  
 Diagnostic tests **59,563** Filled prescriptions **124,385**  
 Patient meals **130,000 meals + 130,000 snacks**  
 Laundry pounds processed **950,000**  
 Square feet cleaned and maintained **330,000**  
 Incoming phone calls to the PRH **910,000+ (Approx. 3,500/weekday)**  
 Unique patient identifiers in the Hospital's database **244,479**