

# MAKING *connections*



# Sault Area Hospital

Serving a catchment population of approximately 115,000 SAH provides primary, secondary and select tertiary services to residents in Sault Ste. Marie and the District of Algoma.

In addition to providing core services in Emergency and Critical Care; Medicine; Surgery; Obstetrics, Maternity and Pediatrics; Mental Health and Addictions; Complex Continuing Care; and Rehabilitation, SAH is also home to the Algoma Regional Renal Program and the Algoma District Cancer Program including radiation therapy services.

SAH is extremely proud of our entire team of over 1700 dedicated staff, 365 physicians and 535 volunteers.

# Vision Mission Values

## OUR VISION

**Trusted Partner. Outstanding Care.**

## OUR MISSION

EXCEPTIONAL PEOPLE WORKING  
TOGETHER TO PROVIDE OUTSTANDING  
CARE IN ALGOMA.

## OUR VALUES

INTEGRITY | COMPASSION |  
COLLABORATION & PARTNERSHIP |  
ACCOUNTABILITY | RESPECT | EXCELLENCE

# Patients & Family Advisors Partners in Care

---

Hospital Patient and Family Advisory Councils (PFAC) consist of patients and family members who are interested in providing the health care team with constructive input for the purpose of improving the overall patient experience. There are now hundreds of PFACs at hospitals all across Canada, in other health care agencies, in government, and in the United States. They are also a growing phenomenon internationally.

The mission of SAH's PFAC is to work in partnership with staff, physicians and volunteers to ensure that the voice of patients and their families is at the heart of the provision of outstanding care that focuses on the delivery of quality services and compassionate patient and family-centred care. SAH's first Patient and Family Advisory Council (PFAC) was created in October 2013. Since then, the hospital has grown the advisory program and now

has upwards of 80 patient and family advisors working in a variety of capacities across the organization. Patient and Family advisors are volunteers whose primary purpose is to provide insight, suggestions and recommendations to SAH. This will help ensure that our services are designed collaboratively with our patients so the hospital can improve health care service delivery and ultimately, the patient's overall hospital experience.

SAH currently has 4 program-based councils (Emergency, Mental Health & Addictions, Renal and Cancer programs) a corporate council, and a resource pool of advisors that are engaged across the organization. Some PFAC advisors participate on leadership hiring panels, while others assist in reviewing patient-facing documents and participate on committees, focus groups and projects. The hospital welcomes and appreciates the

contributions of Patient and Family Advisors to the health care team.

Patients and their families are partners in their health care and hospital staff and leadership learn a great deal from their insights. Advisors have first-hand

experience with the health care system and through their story-telling and experiences the goal is that positive changes will be implemented to profoundly impact the lives of all of those who receive care at SAH.



Volunteering as a patient or family advisor is a great way to learn more about our hospital, behind the scenes, and it's a great way to give back to the community. As an advisor, you can choose which projects you want to be involved in, and the more you get involved, the more you learn!

— Stephanie Parniak, Patient Advisor



# Patients Benefit from Partnership with Police Services

---

In December 2015, SAH and Sault Ste. Marie Police Services (SSMPS) partnered to form the Mobile Crisis Intervention Team. Launched as a pilot project, police officers work in collaboration with SAH mobile crisis workers to respond to mental health-related calls in our community.

The goal of the program is to divert, whenever possible, individuals from being taken to SAH's Emergency department for mental health reasons by referring them to other more appropriate community mental health services. The hope is that this intervention will provide timely and effective services to patients while also reducing the amount of time police spend in the hospital's Emergency department, freeing them up to work on the frontline. Helping people with mental health needs before they have

an emergency was also another priority.

Two specially-trained and assigned Police officers and SAH crisis workers work together on their shifts, enabling the team to attend more mental health-related calls. They respond to incidents involving persons threatening suicide or having mental health duress. The team decides who needs help immediately through the Emergency department and who can be assisted by other community agencies.

In the past, Police did not have the training to respond. Now, they are trained and they bring crisis services workers, the experts, with them to respond to the calls. Initial results from this pilot have shown a decrease in the number of individuals apprehended

under the Mental Health Act and transported to SAH.

Ultimately, the patients in our community benefit from this collaboration. Patients will receive the appropriate care when they need it as close to home as possible, police will

be on the roads instead of in the Emergency department, and patients needing Emergency services will be able to access them faster.

SAH and the SSMPS continue to build on their well-established partnership to meet the health and safety needs of our community.

Initial results from this pilot have shown a decrease in the number of individuals apprehended under the Mental Health Act and transported to SAH.



# First-Ever Partnership Brings Dwayne Home

---

In November 2018, patient Dwayne Houle's dream came true. After a lengthy hospital stay and being told he would never be able to go home, he returned to his home at Community Living Algoma.

At the age of 5, Dwayne was in a car accident and for most of his life, he has been in a wheelchair and lived with chronic medical conditions such as requiring tube feeding to meet his nutritional requirements.

Approximately 2 years ago, Dwayne was hospitalized and with a decrease in lung function, it was determined that he would have to be a ventilator for the rest of his life.

Dwayne was very unhappy at the prospect of living at the hospital and asked hospital staff daily when he would be going home. Through a unique and first-of-a-kind partnership, SAH, CLA and Vital Aire partnered to

bring Dwayne home. Both SAH and CLA had safety concerns and their collective goal was to ensure that Dwayne would be cared for safely at CLA. This significant undertaking required funding, the purchase of medical equipment and extensive training of CLA staff to ensure they could support and care for Dwayne at home.

SAH respiratory therapists provided the majority of training to CLA staff and Vital Aire provided the equipment and oxygen. This collaboration included CLA staff, leadership at both organizations, nurses, respiratory therapists and the support of all staff who cared for Dwayne on a regular basis over a number of months.

In recognition of this collaborative undertaking, CLA has presented SAH with one of their Annual Community Partner Awards. This award recognizes an organization that builds and contributes to a culture of inclusion,

community acceptance and respect for all people.

Dwayne's dream was fulfilled and his next chapter is to go into schools to provide education about road safety.

This incredible gift for Dwayne was made possible only through the persistence of a group of passionate, dedicated and caring health professionals.

“It took a lot of work by a lot of people to make it happen - Dwayne's dream of returning home has been fulfilled and he's with the people he wants to be with...I think we learned a lot...we learned how to work better with our community partners...and we met a lot of people from SAH that we never met in our past. They are remarkable people.

— John Policicchio, Executive Director, Community Living Algoma



# Exceptional PEOPLE

Care is provided by compassionate, highly-skilled staff, physicians and volunteers who enjoy their roles, are proud to work at the hospital and always put patients at the centre of the health care team.

**Our goal** is to improve our Employee, Physician and Volunteer engagement by making sure Sault Area Hospital is your chosen place to work, practice medicine and volunteer.

## 2018/2019 ENGAGEMENT RESULTS

<b>EMPLOYEE</b>	<b>PHYSICIAN</b>	<b>VOLUNTEER</b>
<b>RESULT 66%</b>	<b>RESULT 60%</b>	<b>RESULT 97%</b>
<b>TARGET 65%</b>	<b>TARGET 60%</b>	<b>TARGET 98%</b>

**How we measure:** Engagement survey results for staff, physicians and volunteers



# Working TOGETHER

---

Our community has timely access to the right care from an integrated system.

**Our goal** is to decrease the number of Avoidable Hospital Beds by ensuring our patients do not stay longer than necessary or return to hospital unexpectedly after a previous stay in hospital.

## AVOIDABLE HOSPITAL BEDS

**2018 / 2019**

**RESULT 95**

---

TARGET 76

\* Results may change due to final submission



# Outstanding CARE

---

Patients and their families are active partners in realizing the highest quality care, as close to home as possible.

Our goal is to improve our Admitted Patient Wait Time & our Patient Experience by ensuring our patients receive outstanding care and that they get to the right bed, to receive the right care, at the right time.

## PATIENT EXPERIENCE

**2018 / 2019**

**RESULT 63% PERCENT EXCELLENT**

**TARGET 59%**

## ADMITTED PATIENT WAIT TIME

AVERAGE

90TH PERCENTILE

**2018/2019**

**2018/2019**

**RESULT 14 HOURS**

**RESULT 30 HOURS**

**TARGET 13 HOURS**

**TARGET 29 HOURS**



# Seniors' Health a Priority for Algoma

A number of programs are available at SAH and in the community to support seniors in Algoma. Partner collaboration and innovation in service delivery is not new to Algoma, especially when it comes to senior care!

At SAH, the Algoma Geriatric Clinic, Seniors Mental Health, Geriatric Emergency Management nurses and Behavioural Supports Ontario work collaboratively with other community organizations such as the Alzheimer's Society, the Memory Clinic (Superior Family Health Team) and Home and Community Care to deliver care to seniors across Algoma. These organizations and others comprise the Algoma Geriatric Network whose goal is to provide a comprehensive range of specialized geriatric services to seniors in the Algoma District.

They do this in partnership across the region, with the North-East Specialized Geriatric Services Program (NESGC), the Regional Geriatric Program in the north. They also provide expert resources for health care professionals and

caregivers throughout Northeastern Ontario. Close collaboration amongst all partner organizations is key to ensuring that seniors in Algoma have timely access to the care they need. Case conferencing allows SAH to consult directly with other organizations such as Homecare to develop plans of care for seniors with complex needs.

Senior's health care is a priority for organizations in Algoma. A one-day conference is planned in the near future to gather all senior's services for a networking opportunity, allowing all organizations to connect and share information that will ultimately benefit our growing senior population.



# SAH and St. Michaels

## Provide Life Saving Treatment

---

Coronary Angioplasty is a minimally invasive procedure that opens up the narrowed arteries and it does not require general anesthesia. In August 2018, patients in the Algoma district began receiving this life-saving procedure locally at SAH.

Prior to August 2018, SAH performed the diagnostic coronary angiogram portion of the procedure. Patients requiring coronary angioplasty were sent to other centres for treatment. SAH has worked collaboratively with our mentor site, St. Michaels Hospital (SMH) to not only ensure proper training of staff and physicians, but to help build a strong cardiology program in Sault Ste. Marie.

The SAH team has worked alongside an excellent team of interventional cardiologists from St. Michael's Hospital while continuing physician recruitment efforts. The hospital also has an outpatient cardiology clinic which provides care to all patients who

have been referred, including follow-up for those who have had angioplasty and many other cardiac procedures.

Performing coronary angioplasty on a 24/7 basis will be possible with the construction of a second angiography suite, ensuring that emergency cases are treated in a timely and efficient manner. SAH is working with the Ministry of Health and Long Term Care (MOHLTC) to secure approval for the operation of a second lab.

Capital funding for a second lab has already been secured through the Sault Area Hospital Foundation. Their initial goal of \$4.5 million has been met through a number of events, draws, community donations, a pledge of \$250,000 from the Sault Area Hospital Volunteer Association and two incredibly generous donations. A pacesetter gift of \$1 million was given by the Dr. Lou & Mae Lukenda Charitable Foundation. A transformational gift of \$3 million was

given by Mr. Dale Harrison.

For 2018/2019, a total of 902 cardiac catheterizations and 194 coronary angioplasties have been completed. SAH's collaboration with St. Michael's along with the overwhelming

community support has been instrumental in making this treatment possible in the community. Algoma patients will reap the benefits of expanded cardiac care services in Sault Ste. Marie.

SAH's collaboration with St. Michael's along with the overwhelming community support has been instrumental in making this treatment possible in the community.



# Collaboration

## Key in Success of Algoma RAAM Clinic

---

People in Algoma are now receiving timely access to medical treatment for opioid and alcohol addictions, closer to home. The Algoma Rapid Access Addiction Medicine (RAAM) Clinic, operated by SAH, opened in April 2018.

According to Public Health Ontario's data, Algoma has the highest rates of Emergency department visits, hospitalizations and deaths related to opiates alone. In light of the rising rates of opioid use, this service will begin to address a service gap in the community.

Co-located at SAH's Addictions Treatment Clinic, the RAAM Clinic is staffed by SAH physicians and a Nurse Practitioner. The goal of this clinic is to provide expedited, barrier-free treatment for patients who are addicted to alcohol or opioids. No

booked appointment or referral is necessary, although referrals from doctors, nurses, social workers, addiction counselors and community providers are welcome.

SAH received \$330,000 in funding from the NE LHIN to enhance community withdrawal management. This initiative is part of the Northeast Local Health Integration Network's (NE LHIN) Regional Opioid Strategy, designed to meet the rising rates of opioid use, accidental overdoses, hospitalizations and Emergency department visits in Northeastern Ontario.

Opioid Task Forces within each Sub-Region will support its implementation, ensuring all Northerners have timely and equitable access to care. The Algoma RAAM Clinic will provide outreach supports to providers throughout the north and east Algoma

District. The local Opioid Task Force, consisting of community partners will work together to form linkages and provide the most effective outreach in our outlying areas.

The Algoma RAAM clinic is a highly collaborative response to the

community and regional addiction crisis. This new service has garnered strong engagement of key institutions, agencies, and individuals, all working together for positive change. The most significant benefit for Algoma residents is improved access to care closer to home.

The local Opioid Task Force, consisting of community partners will work together to form linkages and provide the most effective outreach in our outlying areas.



# SAH and Trillium Advance Organ Donation

---

Approximately 1,600 people in Ontario are waiting for a life-saving organ transplant. A total of 17,639 Ontarians have received an organ transplant since 2003.

In Ontario, organ and tissue donation is coordinated and managed by Trillium Gift of Life Network (TGLN). SAH works closely with TGLN to facilitate the process of organ and tissue donation at the hospital. Although everyone is a potential donor, the opportunity for organ donation is rare. On average, only three percent of hospital deaths occur in circumstances that may lead to organ donation. Over the period of April 1, 2018 to February 28, 2019, SAH had 63 notifications of potential organ donors to TGLN which resulted in only one donor.

Organ donation at SAH typically happens through the Emergency

department or the Intensive Care Unit (ICU). There are strict guidelines around retrieval of organs and usually, there are 2 circumstances under which retrieval can occur – either through neurological or cardiac death.

SAH is required by law to contact TGLN if death is expected and once they are contacted, they take over the process with the family. The organ consent rate is 2% when a family is approached by hospital staff and the rate jumps to 64% when approached by TGLN.

SAH works in close collaboration with TGLN to support families through this process, and to ensure that as many people as possible benefit from the generous gift of organs and/or tissue. The entire team at SAH is committed to facilitating all potential organ donations.

# Fast Facts

- ✓ One organ donor can save 8 lives
- ✓ From 2013, 34 lives have been saved through organ donation at SAH
- ✓ One tissue donor can improve life for up to 75 people
- ✓ From 2013, 32 people received the gift of sight and over 100 lives were enhanced with skin and bone donation at SAH

As hard as it was to lose our son, the decision to donate his organs was easy. He saved the lives of 4 people and in essence, continues to live on. We were and are proud of what he and we were able to do - embrace your gift and I encourage you to write a little note to the surviving family. Those letters help aid in our healing and I am thankful for them.

— Donor Mom



# Operational EFFICIENCY

## Financial Report

### Condensed Statement of Financial Position

As at March 31, 2019 with comparative figures for 2018

(in thousands of Canadian dollars)

#### Assets

	2019	2018
Current assets	\$36,061	\$25,617
Capital funding receivable	\$201,414	\$0
Capital assets	284,206	283,353
	<u>\$521,681</u>	<u>\$308,970</u>

#### Liabilities, Deferred Contributions and Net Assets

Current liabilities	\$58,116	\$39,338
Long-term liabilities and deferred capital contributions	504,963	309,531
Deficiency in net assets	-41,398	-39,899
	<u>\$521,681</u>	<u>\$308,970</u>

### Condensed Statement of Operations

As at March 31, 2019 with comparative figures for 2018

(in thousands of Canadian dollars)

#### Revenues

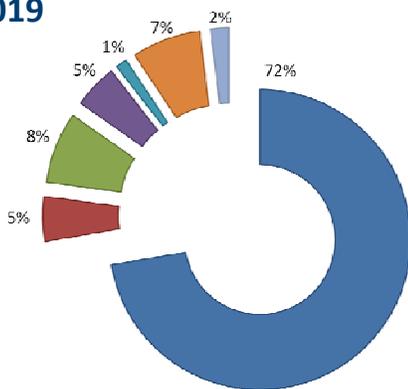
Ministry of Health and Long-Term Care and Local Health Integration Network and Cancer Care Ontario funding	\$177,375	\$170,454
Other	31,881	29,054
	<u>\$209,256</u>	<u>\$199,508</u>

#### Expenses

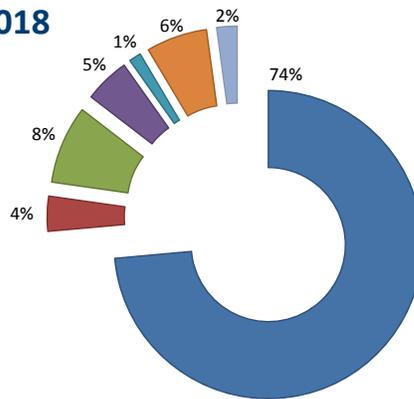
Compensation and benefits	\$130,765	\$127,982
Other	77,289	70,695
	<u>\$208,054</u>	<u>\$198,677</u>

## REVENUES(%)

2019



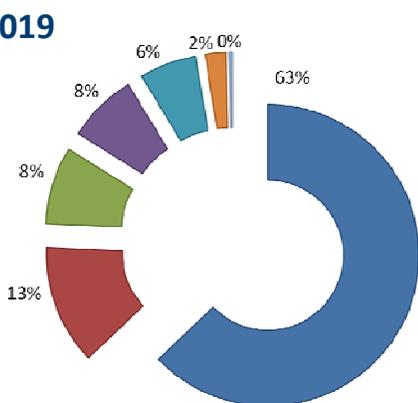
2018



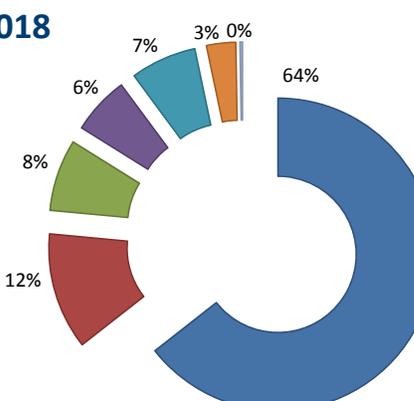
- LHIN based allocation
- One-time hospital grants
- Cancer Care Ontario funding
- Patient revenue
- Differential and co-payment
- Recoveries and miscellaneous
- Amortization of deferred capital contributions - equipment

## EXPENSES(%)

2019



2018



- Compensation and benefits
- Supplies and other
- Medical staff remuneration
- Medical and surgical supplies
- Drugs and medical gases
- Amortization of capital assets - equipment
- Rental and lease of equipment, Interest and Bad Debit

**Our Goal** is to ensure we are using our resources effectively to deliver outstanding care.

## OPERATING MARGIN

**2018/2019**

**RESULT \$1.20M**

**TARGET \$1.25M**

**How we measure:** Total Revenue from Hospital Operation less Total Expenses from Hospital Operations as calculated in monthly financial statements. Items excluded: Amortization of Deferred Capital Contributions, Amortization of Building and Service Equipment, Net Annual Service Payments, Net Other Votes Funding, and Net Other Funding Sources.

# SAH BY THE NUMBERS 2018/19

Exceptional  
**PEOPLE** 

1,673 ACTIVE EMPLOYEES	37 ALLIED HEALTH LEARNERS
379 CREDENTIALLED PHYSICIANS	384 CLINICAL LEARNERS
618 VOLUNTEERS	9 NON HEALTH CARE LEARNERS
	105 MEDICAL LEARNERS
	75 PATIENT ADVISORS

## Working TOGETHER

TOTAL ADMISSIONS TO SAH

**9,705**

2018 TOTAL ADMISSIONS 10,147

58,100

AMBULATORY CARE VISITS  
2018 - 56.3k

32,562

MENTAL HEALTH OUTPATIENT VISITS  
2017 - 35.7k

**104,118**

DIAGNOSTIC IMAGING VISITS  
2018 - 101,891

**97,055**

INPATIENT DAYS 2019

**97,448**

INPATIENT DAYS 2018

2.7M

LABORATORY PROCEDURES  
2018 - 2.7M

737

BABIES DELIVERED  
2018 - 842

21k

CT SCANS  
2018 - 20k

18k

MRI PROCEDURES  
2018 - 16k

2.2M

MEDICATION DOSES ADMINISTERED  
2018 - 2.2M

## Outstanding CARE

EMERGENCY DEPARTMENT VISITS

**58,857**

2018 TOTAL ED VISITS 60,057

SURGERIES PERFORMED

**15,916**

2018 TOTAL SURGERIES PERFORMED 15,408

EMERGENCY DEPARTMENT WAIT TIMES

Total Time (hours) Spent in ED [90th Percentile]



complex conditions (IN HOURS)



minor, uncomplicated conditions (IN HOURS)

SURGICAL WAIT TIMES ORTHOPAEDIC



90th Percentile Complete Surgical Procedures (IN DAYS)



Average Wait Complete Surgical Procedures (IN DAYS)

# 2019 AWARD RECIPIENTS

Volunteer, Employee, and Physician iCare Awards • Dr. William Hutchinson Award

## iCare AWARDS

The iCare Awards are given by our Board of Directors to recognize an employee, a volunteer, and a physician who consistently demonstrate the iCare values of Sault Area Hospital.

Integrity, Compassion, Collaboration & Partnership, Accountability, Respect and Excellence.

---

## *Dr. William Hutchinson* **AWARD**

The Dr. William Hutchinson Award was established in 1982 to recognize distinguished contributions to health services in Sault Ste. Marie and the District of Algoma. Dr. Hutchinson was an esteemed local surgeon at Sault Area Hospital and a founding member of the Algoma District Health Council.



SAULT AREA  
HOSPITAL  
HÔPITAL DE  
SAULT-SAINTE-MARIE





*Laura is also a mentor and a leader, developing her own skills by teaching and learning. She is an innovator in the treatment for patients and is willing to share her learning so that other hospitals can follow her example.*

# Laura Andreychuk

## ICCARE EMPLOYEE RECIPIENT

Laura Andreychuk has been working as a registered nurse for over 15 years. As a new graduate she started in the Critical Care Program before transferring to the Cardiac Cath Lab in 2008. In 2013, Laura took over the Pacemaker Program and worked alone in this role for many years. Laura is a forward thinker and an instrumental part of the development and growth of the Pacemaker Clinic, expanding it to serve the patients of the Algoma Region. Laura is willing to go above and beyond to deliver best patient care close to home. She understands the financial burden of patients traveling for care so Laura has worked hard to enhance local services for pacemaker patients. She developed a Telemedicine Clinic so that complex cardiac patients who do not have to access to a specialist locally can be seen via Ontario Telemedicine Network (OTN). Laura was also instrumental in developing a safe way for patients with Pacemakers to receive MRIs at SAH instead of having to travel to Southern Ontario. She is unwavering at advocating for what is best for her patients and is very passionate about putting the care for her patients first. Laura is a mentor and a leader, developing her own skills by teaching and learning. She values teamwork and is caring, kind and respectful in all her interactions with patients. We salute Laura for living our iCcare values and continuously driving patient care excellence at SAH.



*Dr. Edwards is even-tempered, kind, never disrespectful or impatient and always puts the patient perspective first...patients regularly comment on his bedside manner, sitting during their visits, sincerely attending to their concerns and addressing their requests.*

# Dr. Mark Edwards

## ICCARE PHYSICIAN RECIPIENT

Dr. Mark Edwards is originally from Sault Ste. Marie and graduated medical school in 1983 from the University of Western Ontario. He completed a one-year Internship at St. Joseph's Hospital in London and a 2-year Emergency Medicine Residency at the University of Florida in Jacksonville. Dr. Edwards practiced Emergency medicine in our community from 1987 until 1995 and in Sault Michigan from 1995 until 2013. He started his family practice approximately 7 years ago and has been with the Group Health Centre (GHC) for the last 5 years. He works at the hospital as an on-call physician (POD physician with GHC). Dr. Edwards is highly regarded, trusted and respected by his patients and his colleagues. Even brief encounters with patients bring them ease of mind and confidence that he will do his best for them. Dr. Edwards is seen as a valuable and knowledgeable partner in the patient journey. He always puts the patient first. When caring for patients, he consistently visits and calls them to keep them informed of what he has learned and their care plan. His interactions with students/residents, young newly recruited doctors, families/patients during therapy and through transition to palliative care are always kind, patient and respectful. Dr. Edwards often accepts last minute reassignments and offers to work in the hospital over holidays and peak vacation times so that other physicians can spend time with their young families. We thank Dr. Edwards for his many iCcare contributions.



*Beth Watson has been a great addition to our volunteer team. Beth has provided many donations of sewed items to the patients at SAH and also gives of her time to supporting the iCcare Store. She always provides excellent customer service to each patient or staff member she serves.*

# Beth Watson

## ICCARE VOLUNTEER RECIPIENT

Beth Watson is a retired Registered Nurse who worked at SAH for 32 years and then chose to volunteer at SAH after her retirement. She has volunteered at SAH for 5 years, contributing 900 hours in the iCcare Store where she assists customers to purchase hospital-branded iCcare Wear. Beth values the uniqueness of everyone and treats the people around her with fairness and respect. During every shift, she brings her positive energy and a welcoming smile to make the store a fun place to shop. Beth, along with four other women, shares a passion for sewing and together they provide needed items for patients. Some of these items include hankies for bereavement packages for maternity patients who experience pregnancy loss, laundry bags, sheets for isolets, burp bibs, operating room hats for staff, nursing pads for the Neonatal Intensive Care and activity quilts for dementia patients throughout the community. More recently, Beth with the support of her sewing group, has been making pic line and central line covers for oncology patients. Beth is a true champion of our iCcare values.

# Karen Scott

## Dr. Hutchinson Award Recipient

---

Karen Scott graduated from nursing school in 1965 and joined the Group Health Centre in 1967 after working on the pediatric unit at St. Joseph's Hospital in London Ontario. Thinking of innovative ways to cut down on patient wait times, in 1974, GHC enrolled Karen in a new Nurse Practitioner Program at the University of North Carolina.

By 1975, Karen graduated as Northern Ontario's first Nurse Practitioner (NP). She returned to work at the GHC, and within a year, she opened her own practice under the supervision of Dr. Tom Ferrier. This was a challenging time and the NP role was under great scrutiny. A pioneer in nursing, Karen was one of the first NPs in Ontario, paving the way for all NPs across the Province.

Once the NP Program was established in the late 1990's, Karen mentored students from the Sudbury program. In 2000, she went to Moosonee to deliver care in an outpost area. Returning to the Sault in 2002, she commenced working in SAH's Hospitalist program alongside Dr. Bob Maloney. She provided care to rehab and complex patients and assisted in Dr. Maloney's practice, allowing him to work in the Hospitalist Program. Karen quickly became the hospital presence for unattached patients and was instrumental in attracting other Nurse Practitioners to SAH. She retired from SAH in 2011.

A model for all future NPs, Karen was the first NP in Algoma, enabling an innovative model of care delivery to area patients. She was an instrumental part of the development of the Hospitalist program in Sault Ste. Marie. In 2009, she was part of the Steering Committee that developed the Algoma Nurse Practitioner Led Clinic.

Karen served on the Provincial NDP Committee for the education of NPs in 1994. Over the years, she has also volunteered her time working with developmentally challenged children, served on the Pain Management Committee, was a Board member of the Sault Ste. Marie Country Club and was a member of the Registered Nurses Association of Ontario.

Karen is an icon in the history of modern Canadian medicine. She officially retired from nursing in 2016 after an incredible 41-year career.



# PAST *i*care AWARD RECIPIENTS

---

	VOLUNTEER	EMPLOYEE	PHYSICIAN
2012	Bill Kerr	Cathy Hallaert	Dr. David Berry
2013	Arlene Pearce	Marsha DeFrancesco	Dr. Joseph Reich
2014	Jim Aquino	Wayne Marion	Dr. Sharon Beuhner
2015	Velma McClelland	Franca Iachetta	Dr. Michael D'Agostino
2016	Larry Conway	Shauna Hynna	Dr. Silvana Spadafora
2017	Tracy Dinelle	John Nardo	Dr. Michael Bondar
2018	Jackie Tomchak	Norie Tapiru-Cormack	Dr. Derek Garniss

# PAST *Dr. William Hutchinson* AWARD RECIPIENTS

---

1982	Dr. F. C. Hamill	1994	Dr. Harold & Mrs. Beth Trefry	2008	Dr. Sam (Sante) Fratesi
1983	Dr. Frances Mesaglio	1995	Ms. Rosemary O'Connor	2009	Mrs. Helen Ross
1984	Mrs. June Bauer	1996	Mrs. Kim Sitzes	2010	Dr. Dominic Tang
1985	Mr. P. Edgar Buchan	1999	Dr. Patrick Fyfe & Shannon McLeod	2011	Dr. Kwok-Lock Lam
1986	Mr. Harold S. MacLellan	2000	Mrs. Doreen Deluzio	2012	Dr. Susan Febbraro
1987	Mrs. Joyce Forman	2001	Mr. Anthony van den Bosch	2013	Ms. Elaine S. Pitcher
1988	Miss Joan O'Leary	2002	Mrs. Linda Watts	2014	Dr. Janice Willett
1989	Mr. Fred Griffith	2003	Ms. Marilyn Billings	2015	Dr. Derek Hopgood
1990	Dr. William Robertson	2004	Dr. Hui Lee	2016	Dr. Sharon Buehner
1991	Mr. Mario Bergeron	2005	Dr. J. K. Mohamed & Mrs. Cathy Shunock	2017	Dr. Doug Bignell
1992	Dr. David Gould	2006	Dr. David Walde	2018	Dr. Alan McLean
1993	Mrs. Hilda Syrette & Dr. Thompson A. Ferrier	2007	Mr. John Hollingsworth		