

# Together We Make A Difference

## Annual Report 2012/2013



SAULT AREA  
HOSPITAL  
HÔPITAL DE  
SAULT-SAINTE-MARIE



## SAH 2012/2013 Annual Report

We welcome responses to this report. For more information, please contact:

Communications & Public Affairs

Tel: (705) 759-3671

Fax: (705) 541-7810

Email: [publicaffairs@sah.on.ca](mailto:publicaffairs@sah.on.ca)

Photos throughout by John O'Donnell and Neil MacEwan.

The hospital is grateful to the Sault Area Hospital Foundation as they are the only source of funding for much-needed medical equipment. To view a copy of the Foundation's Annual Report 2012/2013, please visit [www.sahfoundation.on.ca](http://www.sahfoundation.on.ca).

**Together We Make A Difference** ~ The talented, dedicated and compassionate people at Sault Area Hospital come together for one singular purpose – our patients. From the doctors, nurses and allied health professionals to the housekeepers, laundry staff, volunteers and a myriad of other health care workers, together we make a difference!

### Front Cover (left to right)

Front row:

Janet Myles, Housekeeping

Middle row:

Johanne Messier-Mann, Chief Nursing Officer and Director of Maternal Child Program

Emily Harry, Speech Language Pathologist

Olga Givens, Laundry

Back row:

Dr. Heather O'Brien, Chief of Staff and Medical Affairs

Karen MacDonald, Registered Nurse

Mike Devoe, Volunteer

Dr. Mir Shafiee, Nephrologist



# Table of Contents

<b>Message From the Board Chair, President &amp; CEO and Chief of Staff</b> .....	1, 2
<b>Highlights from 2012-2013</b>	
2012 Inaugural iCcare Recipients .....	3
A PARTY for Youth .....	3
ADCP Goes Live with Mosaiq.....	4
Best Wishes Program Connects Patients With Their Loved Ones.....	4
Dr. Febbraro Receives 2012 Dr. William Hutchinson Award .....	5
Emergency Department Improvements .....	6
Electronic Occurrence Reporting System launched.....	6
Excellence in Nutritional Care.....	6
<b>Feature Story</b>	
<b>Together We Make A Difference</b> .....	7, 8
<b>Highlights from 2012-2013</b>	
First Class Wound Care.....	9
Minister Sings Praises of SAH.....	10
New Home on the Horizon for Residential Withdrawal Management Program .....	10
Plummer Site Transitional Care Unit Closes .....	10
Providing our Community with Quality Care .....	11
Accredited with Commendation .....	11
SAH Goes Lean .....	12
Renal Program First in Canada to Implement Nexadia .....	12
SAH The Best It Can Be.....	13
Satellite Facilities Transferred to Blind River District Health Centre .....	14
Volunteers Make a Difference.....	14
<b>Financial Report</b> .....	15
<b>2012/2013 Board of Directors and Committees</b> .....	16

Message From Our

# Leadership

This past year marked our second anniversary in the new hospital and, by every measure, it was a tremendously successful one across our four pillars - Quality, Service, People and Operational Efficiency.

On the Quality front, we cut Alternate Level of Care numbers from about 40% prior to the move to below 15% in 2012/13, freeing up beds for our patients requiring the acute care services only a hospital can provide. Thanks to our in-house radiation therapy suite, approximately 450 residents of Sault Ste. Marie and the Algoma District no longer have to endure multiple trips to Sudbury for this vital treatment. Our Hospital Standardized Mortality Ratio (HSMR), a nationally recognized standard of quality for hospitals, is substantially better than the expected norm and continues to improve significantly.

From a Service perspective, we increased capacity in outpatient clinics, for screenings, diagnostic imaging and surgical procedures. Wait times continued to decline in the Emergency Department, surgery and other areas, most notably for MRIs where for the first time, Sault Area Hospital (SAH) ranked best in the entire province at an average of just three days!

And speaking of service, the selfless men and women who volunteer at SAH contributed almost 66,000 hours of their time and talents in the past year to provide much-needed help and a friendly smile to our patients and visitors. In fact, we had

*(l-r) Ron Gagnon, President & CEO, Dr. Heather O'Brien, Chief of Staff and Medical Affairs and Jamie Melville, SAH Board Chair.*



an average of 350 individual volunteers on site during each month and approximately 60 on any given day.

At the same time, advances in our People pillar goals were reflected by improvements in physician, employee and volunteer satisfaction rates. We are making significant strides toward our goal of being known as an excellent place to work, volunteer and practice medicine, so much so that twelve new physicians were recruited in the past year alone, including seven specialists and five family medicine practitioners.

2012/13 also saw recognition by Accreditation Canada, with SAH being accorded "Accreditation with Commendation" status, after having successfully met 98.2% of 2243 applicable national standards.

Given all of the above, not surprisingly, our patient satisfaction rates were well above 90% and climbing toward our 2012/13 target of 94% (final yearly results are not yet available).

It is precisely because of the talented, dedicated and compassionate staff, physicians and volunteers coming together for a singular purpose – our patients - that we continue to make significant strides along our journey to "Best." It's been said many times before but bears repeating - our people are the heart and soul of SAH and we are fortunate and proud to share this journey with them.

Because of the critical importance of our people, we have made a commitment as an organization to ensuring that they have a say in decisions that impact their jobs or work environment. We have invested significantly in the implementation of Lean methodology in the past year, which resulted in the certification of 18 "Yellow Belt" practitioners. At the very heart of Lean is the principle that those who do the work get to change the work.

This commitment will carry through to this year when we will continue to grow our Lean expertise and capacity in the organization. Our ultimate goal is to have 80% of change happen at the front line every single day and only 20% occurring through larger projects.

We have also invested heavily in our leaders with the implementation of the Best Leadership program, developed by the Ontario Hospital Association. This program includes an assessment of skills and gaps among our leadership group, the development of strategies to augment the skills and address the gaps, as well as proactive succession planning, whereby new people are ready to step in when someone else leaves the organization.

Our ongoing quarterly Leadership Development Institutes continue to provide valuable educational opportunities on a myriad of topics to our supervisors, managers,

directors and senior management team. Recognizing their critical roles in the organization, this year we will also be inviting our medical leaders to share in these sessions.

All of these achievements have been realized while going from the second highest annual operating deficit for any hospital in the province three short years ago to a second straight year of operational surpluses, demonstrating clearly that quality care and Operational Efficiency can indeed go hand in hand.

Given the above – and so many more successes that space doesn't permit us to relate – this year's theme of "Together We Make A Difference" couldn't be more appropriate. None of this happens in isolation. No one person is responsible. It is a true collaboration between every member of the SAH team, from physicians to nurses, allied health professionals, housekeepers, laundry workers, logistics, maintenance, administration, volunteers...and the list goes on.

As important as it is to recognize and celebrate our past successes, it is equally vital that we plan for the future. Although our current Strategic Plan covers the period from 2010 to 2015, due to significant changes in the health care environment, we have accelerated our timetable and already begun preliminary work on a new strategic plan. As part of the development of the new plan, we will seek input from our staff, physicians, volunteers and community members to ensure that we make informed decisions on what is best for our hospital, our community and the people we serve.

We know that we will continue to be challenged to find efficiencies, not driven strictly by financial reasons, but to provide better, more accessible and seamless care to patients. To this end, we have already seen the introduction of Health Links in parts of the province and this is indeed a game changer.

All segments of the health care system must work more cohesively than ever to provide the right care, in the right place and at the right time to the province's residents. This includes hospitals and all partners involved in the provision of health care and related services to patients.

In fact, we foresee the potential development of a single and truly unified health care system to serve the needs of Sault Ste. Marie and the surrounding communities within the next decade. We intend to be ready for that eventuality and play a leadership role, commensurate with the critical importance of SAH to the health and wellbeing of the residents in our catchment area.

In closing, we would like to thank the men and women of SAH for their commitment and steadfast determination to improving the welfare of those we exist to serve. Just as we have made a lasting and positive difference in the past, we will continue to do so in the future...together!

# Highlights From 2012-2013

## 2012 Inaugural iCcare Recipients



(l-r) Bill Kerr (Volunteer), Cathy Hallaert (Employee) and Dr. David Berry (Physician).

June 2012 marked the inaugural presentation of the SAH iCcare Awards, established by the SAH Board in 2011 to recognize an employee, volunteer and physician who consistently demonstrate the values of SAH – *Integrity, Compassion, Collaboration and Partnership, Accountability, Respect and Excellence.*

The SAH Board congratulates the first recipients of these awards:

**Cathy Hallaert** - Cathy is an employee in the Housekeeping Department who has worked at SAH for over 30 years and consistently demonstrates all of the hospital's core values to patients, physicians and fellow staff members alike. She takes great pride in her work and demonstrates kindness, care and respect to everyone she encounters.

**Bill Kerr** - Bill has been a volunteer with SAH for more than 10 years and has been extremely generous with his time. Bill volunteers in Day Surgery, helping patients get ready for surgery and escorting family members into the waiting area. Bill is always kind, compassionate and caring to our patients, helping to lessen their anxiety and ease their concerns.

**Dr. David Berry** - Dr. David Berry is a Nephrologist and the Medical Director of the Algoma Regional Renal Program. He is focused on providing quality patient care and is a dedicated member of many hospital committees. A countless number of Dr. Berry's patients consistently remark about the tremendous level of professionalism and respect with which he conducts his practice.

A permanent recognition display unit is located in the main lobby, honouring iCcare recipients. SAH congratulates all award recipients for their dedicated service to the residents of Sault Ste. Marie and the Algoma region.

### A PARTY for Youth

Every week in Canada, 14 young people between the ages of 15-24 die from traumatic injuries. That's nearly 800 young people every year. These startling statistics are the result of our youth not always understanding the importance of injury prevention and making smart choices.

The Prevention of Alcohol and Risk-Related Trauma in Youth program - or PARTY - was developed at Sunnybrook Health Science Centre in January, 1986. PARTY is an injury prevention program targeted at teens that focuses on making smart and safe choices. Through this program, SAH introduces Grade 10 high school students to the potentially horrifying consequences associated with drinking and driving.

The program focuses on the reality and repercussions that follow motor vehicle accidents. Each PARTY session includes lectures and demonstrations. Presenters throughout the day include paramedics, hospital physiotherapists, staff and physicians and representatives from Algoma Public Health.

“The program gives the students a sense of what it is like to suffer a traumatic injury,” says Tricia Scornaiencki, Emergency Nurse Clinician and PARTY Program Coordinator for SAH. “Students observe the full spectrum of care for traumatic injuries, from emergency room through to rehabilitation and they also have an opportunity to meet injury survivors.”

SAH thanks all of the organizers, partner organizations and participants involved in making a significant difference in protecting the lives of our youth.



*Dr. Michael Bodnar, Emergency Department physician and the health care team instruct teens on the perils and drinking and driving.*

### **ADCP Goes Live with Mosaiq**

The Algoma District Cancer Program (ADCP) introduced Mosaiq, its new electronic health record for medical oncology and radiation therapy.

Mosaiq allows nurses in the ADCP and Radiation Therapy Unit to perform electronic patient assessments, while physicians can now enter patient orders electronically as

well. The system is also used at Health Sciences North in Sudbury, allowing care providers to share information quickly and efficiently. The Radiation Therapy Unit is completely paperless at this time and the goal for medical oncology is to move in the same direction in the near future. The implementation of the Mosaiq system is another significant step in achieving that goal.

Nurses in the ADCP can access Mosaiq from an iPad. Each of the 16 treatment stations are now equipped with an iPad so nurses can do their documentation at the point of treatment. Staff members have embraced the new system and the introduction of the iPads, both of which allow them to deliver more efficient patient care.



*The team in the Algoma District Cancer Program is shown with an iPad on a moveable cart.*

### **Best Wishes Program Connects Patients with their Loved Ones**

Sault Area Hospital recognizes how important it is for family and friends to keep in contact with a loved one during a hospital stay. As a result, SAH launched the Best Wishes Program, a web-based email service for anyone wishing to send a hospital patient a message.

The Best Wishes email feature is accessible via the SAH website homepage. The message will be printed and hand delivered by an SAH volunteer Monday to Friday, usually on the same day it is received. Over 550 Best Wishes have been delivered to patients since the inception of the program last September 2012.

According to our volunteers, patients are thrilled to receive timely best wishes from their loved ones, also making this a highlight for the volunteer “messenger”. A special thank you goes to the Volunteer Resources Department for implementing this wonderful new service to hospital patients!

## Dr. Febraro Receives 2012 Dr. William Hutchinson Award



*Dr. Susan Febraro (left) and Elaine Pitcher, former SAH Board Chair.*

SAH and its Board congratulate Dr. Susan Febraro, the recipient of the 2012 Dr. William Hutchinson Award. Dr. Febraro practiced as a family physician in Sault Ste. Marie for more than 37 years, doing an exemplary job both as a doctor and a leader in the medical community.

Dr. Febraro has a reputation for excellence and “going the extra mile.” As one of the earliest full-time female practitioners in our community, she has been a positive example and role model for women entering the medical profession, demonstrating her ability to balance her family life and career. She has also demonstrated a deep commitment to advancing women’s health care as one of the founding leaders of the *Sexual Assault Care Centre*, having served as the Clinical Director for twelve years, and her active involvement with *Women in Crisis* as the house physician for many years.

In addition, Dr. Febraro has also had significant influence in children’s initiatives through her involvement in the *Infant Development Program*, the *Sexual Abuse Program for Children* and the *Gifted Children’s Program* with the Algoma District School Board of Education.

A permanent recognition display unit has been installed in the main lobby, honouring Dr. Febraro and all Dr. William Hutchinson Award recipients for their dedicated service to the residents of Sault Ste. Marie and the Algoma region.

## Emergency Department Improvements

Last fiscal year, SAH's Emergency Department launched key initiatives that resulted in improved wait times for SAH patients.

The improvements were targeted at the higher volume, non-urgent population in the See and Treat area (CTAS triage level 3) to address gridlock issues. Some of the initiatives included increasing physician and nursing hours and implementing a number of medical directives to expedite diagnostic tests and provide quicker treatments. For example, SAH has developed medical directives for the administration of pain medications such as Tylenol or Motrin in situations where Emergency Department patients are experiencing fever or discomfort. A dedicated clinician was hired to implement the new medical directives.

These strategies resulted in an improved wait time ranking in the NE LHIN's Emergency Department P4P (Pay for Performance) ranking system which measures 73 Ontario hospitals according to their wait times. SAH improved its ranking in the province from 50 in 2011/2012 to 44 in 2012/2013.

"Our efforts resulted in a significant improvement in wait times over the last fiscal year thanks to the great work of our entire Emergency Department team," says Vanda Cooper, Director of Emergency Department, Critical Care and Access. "These key strategic investments allowed SAH to reduce wait times despite a significant increase in patient volume over the last year."



*Dr. Derek Garniss, Medical Director of Emergency, Vanda Cooper, Director of Emergency, Critical Care and Access, and Dolores Cowan, Manager of Emergency Department.*

## Electronic Occurrence Reporting System Launched

Last fall, SAH launched the easy-to-use Electronic Occurrence Reporting System (eORS). The eORS system replaced the 'paper-based' occurrence reporting process that was previously used at SAH, helping to improve the monitoring, analysis and communication of occurrence reports.

The eORS system has the ability to streamline reporting and modify the previous occurrence levels of harm. The

occurrence levels range from 1-5 with level 1 causing no harm and level 5 resulting in death. The system used by eORS matches the levels of harm used by the Canadian Institute for Health Information's National System for Incident Reporting, which are based on the World Health Organization's International Classification for Patient Safety.

"By using a similar system as the World Health Organization's International Classification System, SAH is joining other hospitals across the country in adhering to best practice in occurrence reporting. These new levels of classification provide staff with the necessary tools to identify areas for quality improvement," says Rebecca Keown, Manager of Planning, Quality and Risk.

The eORS system features a user-friendly icon wall creating effortless navigation of the program. The different icons on the wall represent the various categories of occurrences that can take place, making the system very clear and mitigating any potential for confusion. The system has made it easier for staff to report occurrences. "Prior to eORS, occurrence reports averaged 1,800 per year, however, since debuting eORS in October of last year, SAH has already logged 2,100 occurrence reports," explains Rebecca.

The eORS system has been successful in providing its users with a quick and efficient method of documenting occurrence reports while improving administrative efficiency and promoting a culture of safety, which is a key priority at SAH.

## Excellence in Nutritional Care

The value of a nutrient rich diet is a key component to the healing process. SAH, in partnership with Compass Group Canada, strives to offer the best possible food and customer support service for patients. Compass Group has become the 'global leader' in contract food and support services through a simple recipe of great people, great service and great results.

As part of the continual improvement process, Compass and SAH perform an annual patient satisfaction survey. This year, the survey results were 89% for overall patient satisfaction and 96% for friendliness/ courteousness of the food service staff. The study also indicated a 99% satisfaction with cleanliness of dishes and 88% satisfaction with patients' food preferences being respected.

The Compass survey provides a barometer for overall patient satisfaction. It also provides SAH with valuable feedback which staff can use in the future to ensure the best nutritional care. Measuring opinions on customer service reflects the core values of an organization. High scores demonstrate an organization that values patient feedback and reflects a patient-oriented philosophy where the concerns of the patient are always a priority.

SAH acknowledges the excellent work of Compass Group and all of the hospital food services staff who strive for excellence each day.

# Together We Make A Difference

In June 2012, Kevin Fleming, 44, was having difficulties swallowing and was experiencing symptoms of gastroesophageal reflux disease (GERD). Following a visit to his family physician, a blood test was ordered and it subsequently revealed significant irregularities.

“My blood work was abnormal so my doctor ordered a gastroscopy to take a closer look at my esophagus,” recalls Fleming. “The doctor found a tumour and I was diagnosed with esophageal cancer.” The news was devastating to Kevin and his family, especially since it came at a very difficult time in his life. His 6-year old son, Connor, was in the midst of being treated for Leukemia.

“My fiancée was busy taking care of Connor so I relied on other family members for help, especially Debbie, my sister-in-law,” says Kevin. Debbie Fleming is a registered nurse in the maternity unit at Sault Area Hospital (SAH). “Kevin needed both radiation and chemotherapy treatments and he began radiation on Christmas Eve last year,” says Debbie. “The goal was to shrink the tumour so that he could have surgery to remove it.”

When Kevin was told that he could begin his radiation treatments at SAH, he remembers feeling a great sense of relief. “I was so grateful that I could stay home and be with family during my treatments instead of having to leave town. Our hospital offers most of the cancer services that are provided in larger centres.”

*Dr. Silvana Spadafora reviews test results with Kevin using the ADCP's iPad technology.*



*“Each of the 16 chemotherapy treatment stations are now equipped with an iPad so we can access information, perform documentation and enter orders right at the point of treatment,” says Dr. Spadafora. “Mosaïq is also used at Health Sciences North in Sudbury, allowing care providers to share information quickly and efficiently.”*



*(l-r) Dr. Silvana Spadafora, Debbie Fleming, Kevin Fleming, John Nardo, RN and Shauna Van Boerdonk, RN.*

SAH began providing radiation treatment services in April 2011 with the opening of the new hospital. “The program is a result of a truly unique partnership between SAH and Health Sciences North Regional Cancer Program in Sudbury,” says Brenda Lynn, Director of Oncology and Renal Programs. “With approximately 400 to 450 patients from the Algoma District requiring cancer radiation treatment each year, there is no question that residents of Algoma have benefitted by having this essential service closer to home.”

Kevin completed both his radiation and chemotherapy treatments in February. He received his chemotherapy treatments through SAH’s Algoma District Cancer Program (ADCP). “I received great care in both the radiation and chemotherapy suites,” says Kevin. “From Dr. Silvana Spadafora, my oncologist, to the many nurses, radiation technicians, social worker, lab and diagnostic crew, everyone was cheerful, friendly, knowledgeable and always willing to help.”

What struck Kevin about his overall hospital experience was the coordination of services and the teamwork approach in the ADCP and throughout SAH. “Physicians and staff work with the patients and their families together as a team. If someone doesn’t have an answer, they try to find someone who can help.” In addition to the quality of care and expertise of health providers at SAH, Kevin attests to the benefits of a new facility and equipment. “It’s nice to walk into a bright new building with all modern equipment and technology.”

When it comes to technology, new developments in the ADCP over the last year include the implementation of Mosaïq, a new electronic health record for the medical

oncology and radiation therapy programs. Mosaïq allows nurses to perform electronic patient assessments, while physicians can now enter patient orders electronically.

“Each of the 16 chemotherapy treatment stations are now equipped with an iPad so we can access information, perform documentation and enter orders right at the point of treatment,” says Dr. Spadafora. “Mosaïq is also used at Health Sciences North in Sudbury, allowing care providers to share information quickly and efficiently.”

On March 20, Kevin had his surgery at Toronto General to remove his tumour. Dr. Spadafora and the ADCP team worked collaboratively with the team at Toronto General to organize Kevin’s surgery and follow-up care in Sault Ste. Marie. “The surgery went well,” says Kevin. “I have some physical and dietary restrictions and I will require another round of chemotherapy, but otherwise I am on the road to recovery.”

Kevin credits his health providers and family for his recovery. “I am grateful for the support of my family and all the health care providers both at SAH and Toronto General,” he says. “Now, I am looking forward to completing my treatments so I can take a well-deserved vacation with my family.”

Dr. Spadafora attests to the power of working together and the value of each and every member of the SAH team. “It has been a true pleasure to be a part of Kevin’s recovery and knowing that together, our entire team at SAH has made a positive difference in his life.”

# Highlights From 2012-2013

## First Class Wound Care

SAH's Minor Procedures Clinic provides treatment of post-operative wounds, follow-up care and minor surgical procedures such as treating abscesses and wound drainage.

Vascular Surgeon, Dr. Sam Fratesi, has a keen interest in wound care management and works alongside a team of health care professionals to provide wound care one day each week in the clinic. "We work as a multidisciplinary team and the people that work in this area have extended skills in wound care management," he says. "Our entire team, including Elaine Angelic, Occupational Therapist; Dr. Woolner, Plastic Surgeon; our ostomy nurses and the rest of the staff and volunteers, contributes to providing a much-needed service to our patients."

According to Dr. Fratesi, the focus of the clinic is on the diabetic foot. "We see an average of 65 patients in a day, many of whom have complex medical conditions such as diabetes, leg ulcers, pressure sores and wound healing issues," he explains. Treatment in the clinic may include procedures such as toe amputations. "The work that is being done in the clinic significantly minimizes both visits to the Emergency Department and admissions to the hospital. Most importantly, it provides relief to our patients who are suffering from wound-related issues."

The clinic provides seamless care by assessing the patients and providing the necessary treatment and referrals. "We work closely with other health care organizations such as the chiropodists and especially the Community Care Access Centre (CCAC)," says Dr. Fratesi. "Following treatment, if a patient requires home care, our team contacts the CCAC, which then sets up this service for that patient."

SAH recognizes this extraordinary team for the part they play in providing first class wound care and making a difference to the patients of the Algoma District.



*Some members of the multidisciplinary wound clinic team (l-r): Barb Armstrong, RN, Dr. Douglas Woolner, Plastic Surgeon, Dr. Sam Fratesi, Vascular Surgeon, Brian Harvey (patient) and Elaine Angelic, Occupational Therapist.*

## Minister Sings the Praises of SAH

The Honourable Deb Matthews, Minister of Health and Long-Term Care, visited SAH on March 1, 2013. Her previous visit had been on February 15, 2011 when she attended the dedication and ribbon cutting ceremony for the new facility.

During her recent visit, Minister Matthews had the opportunity to visit the Algoma Regional Renal Program and the Algoma District Cancer Program chemotherapy suite where she received a demonstration of the new Renal Unit electronic medical record (Nexadia) and the recently-introduced iPads at in the chemotherapy patient station/bedside. Minister Matthews also met and spoke with staff and patients in both of these busy outpatients units.

As part of her visit, the Minister also asked to personally address SAH staff, physicians and volunteers, where she stated, "Sault Area Hospital is a shining example of what can be accomplished when we work together." Minister Matthews went on to praise and thank everyone at SAH for their hard work in providing quality patient care, reducing alternate level of care numbers and overcoming large and stubborn budget deficits - all challenges that continue to plague many Ontario hospitals today. She made a special point of acknowledging the extraordinary contributions of "those individuals in the red vests" - SAH's volunteers, extending a huge thank you to them for making a difference every day.

Overall, the visit served to showcase SAH, and especially the people who left a positive and lasting impression on the Minister.



*(l-r) Amelia Pitcher, renal dialysis patient, Elaine Pitcher, former SAH Board Chair, and The Honourable Deb Matthews, Minister of Health and Long-Term Care.*

## New Home on the Horizon for the Residential Withdrawal Management Program

In April 2013, the Minister of Health and Long-Term Care announced the approval of a capital funding request of up to \$1,079,000 for leasehold improvements to provide a modern, safe and suitable environment for SAH's Residential Withdrawal Management Program.

This new facility will be a tremendous improvement to the Program and, more importantly, to the vulnerable patients that it serves. After more than a decade of relentless advocacy by SAH staff and physicians, and support from the North East Local Health Integration Network (NE LHIN), the new headquarters for this Program will be in close proximity to the hospital in the City's North end.

This announcement is a credit to the program management, staff and physicians for continuing to provide exceptional, compassionate care to these residents in what has been an extremely challenging physical environment over a number of years.



*Staff and fellow colleagues of the Withdrawal Management Program celebrate funding news.*

## Plummer Site Transitional Care Unit Closes



*Transitional Care Unit staff at the Plummer site gathers for a farewell event.*

March 31 was a bittersweet moment in the history of SAH, marking the last official day of operation of the Plummer site.

Throughout its history, the Plummer served the needs of residents of Algoma and over the past two years, it served as SAH's Transitional Care Unit. From March 2011 to March 2013, transitional care patients continued to receive excellent quality care at the Plummer site, while enabling the Great Northern Road site to focus on providing acute care services.

As a result of hard work on the part of the Plummer site care team, the main site was able to focus on initiatives and strategies which have streamlined operations and resulted in improvements in conservable days and the overall number of Alternate Level of Care (ALC) patients.

## Providing Our Community with Quality Care

It has long been recognized that physician shortages affect the quality of life for residents in any community. Christine Pagnucco, Manager, Sault Ste. Marie Physician Recruitment & Retention Program says, "We consider quality health care fundamental to maintaining a high quality of life, which is why we're committed to physician recruitment and retention for the residents of the Sault Ste. Marie."

To date, the Sault Ste. Marie Recruitment and Retention Program has successfully recruited almost 90 physicians to the community. Last year alone, the program was fortunate enough to recruit twelve new physicians with six of them being from Sault Ste. Marie. This year, the program has already signed four new physicians and received a verbal commitment from three other physicians. "Our goal is to recruit eight new physicians every year and we are proud to report that this year, we will most likely surpass this goal," says Christine.

Much of the success of the program is due to the hard working team members that make up the Sault Ste. Marie Recruitment and Retention Program. Program staff is dedicated to providing physicians and their families who are relocating to Sault Ste. Marie with all of the necessary resources. "We want to lessen the burden associated with moving to a new city so we assist new physicians in securing housing, child care and even in assisting with job hunting for their partners," explains Christine.

SAH appreciates the work of the Physician Recruitment Program in both their recruitment and retention efforts and welcomes all new physicians and their families to Sault Ste. Marie!



*New recruit, Dr. Bahaa Awwad, Obstetrician/Gynaecologist is shown in one of SAH's Operating Rooms.*

## Accredited with Commendation

In April 2012, surveyors from Accreditation Canada were on site reviewing the hospital and comparing practices to national quality standards. SAH was granted *Accredited* status.

Since April, SAH worked hard on addressing a number of the standards that remained outstanding. As a result, SAH was upgraded to *Accredited with Commendation* after having successfully met 98.2% of 2,243 applicable national standards. In 2011, only 25% of almost 1,000 surveyed organizations in Canada achieved this status.

SAH credits the numerous individuals at all levels of the organization who worked tirelessly to further improve the initial results. This recognition from Accreditation Canada clearly demonstrates the remarkable people at SAH and their commitment to patients and the community.



## SAH Goes Lean

In 2012/13, SAH invested in implementing Lean methodology across the organization. The philosophy behind Lean is to improve the delivery of patient care while minimizing wasteful processes or steps that do not add value to the patient experience.

The key principles of a Lean project are that it has a positive impact on patient care, is employee driven and identifies and eliminates waste. This past year, a total of 18 staff members received their Lean yellow belt certification with each responsible for leading a significant change project.

This continual improvement of processes requires the involvement and empowering of every staff member at every level. More than 150 staff, physicians and volunteers participated in the first round of Lean projects at SAH. Projects included improving processes, organizing supplies and creating tools to enhance the patient experience. For example, one project focused on the creation of discharge instructions for Emergency Department patients to alleviate stress and ensure that they understand how to care for themselves at home.

SAH is committed to the Lean philosophy and staff looks forward to continuous improvement through ongoing efforts in the future.



SAH's Lean team.

## Renal Program First in Canada to Implement Nexadia



(l-r) Anand R. Singh, Chief Medical Supplies, Christine Morton, Chief Medical Supplies, Dr. David Berry, SAH Nephrologist, Judith Hieronymi, B Braun, and Rob Rock, SAH Biomedical Engineering.

SAH's Algoma Regional Renal Program launched an Electronic Medical Record (EMR) for renal patients this past year, being the first hospital in North America to implement the Nexadia System by B Braun.

Although some hospitals in Canada and the United States are using other EMR applications, many in Canada are still using manual processes and paper charts. Nexadia is an EMR or data management system which replaces the manual calculation of dialysis treatments and charting of vital signs such as weight, blood pressure, pulse, blood flow, oxygen saturation, etc. It is also a monitoring system, allowing nurses to see the patient's progress right from the nurses' station.

"By automating the extensive, time-consuming, yet essential collection of data, we allow nurses and physicians to focus on our primary task - that of caring for the patient," says Dr. David Berry, Nephrologist and Medical Director of the Renal Program. "It also provides us a more accurate, detailed and robust database from which we can analyze trends, review problems, and come to solutions more quickly, based on accurate and up-to-the minute information. The flexibility of this platform to



operate on mobile devices also allows for real-time review of patient information between team members regardless of their physical location, which will improve the overall delivery of care.”

The next step in improving technology in the Renal Program is to interface the Nexadia System with the hospital’s information system. This will allow care providers to access diagnostic and lab work directly from Nexadia.

### **SAH: The Best It Can Be**



*Dr. Darren Costain, Orthopaedic Surgeon instructs teens on how to apply a cast.*

SAH’s Health and Wellness Committee ended its second successful year of operation in 2012/13. Comprised of 17 members, the goal of the committee is to promote, support and provide education to all staff in making healthy choices in their workplace and home lives. Promoting health and wellness is an integral part of creating a productive and proficient work force. Ultimately, encouraging staff to be the best they can be will ultimately result in enhanced patient care.

The committee has established interactive health-related activities that take place throughout the year. This includes a number of fitness programs, as well as a series of Lunch and Learn sessions which cover a range of topics including nutrition and sleep strategies.

Another initiative that attracted positive feedback from staff and employees was Kids Career Day. The program invited high school students (children of SAH employees) to participate in a day of lectures and interactive demonstrations including 15 presentations from a variety of hospital departments including Finance, Emergency and Human Resources. The goal was to promote careers in the health care field by exposing adolescents to various aspects of hospital operations. A total of 20 students participated.

The Wellness Committee at SAH also provides a platform for staff to participate in, and interact with, industry leaders in the field of health and wellness. The initiatives of the Wellness Committee will not only result in benefits for staff and patients, but for the community as well. Together, the members of this team truly make a difference!

## Satellite Facilities Transferred to Blind River District Health Centre

The operation of the Thessalon and Matthews Memorial Hospitals was transferred from SAH to the Blind River District Health Centre (BRDHC) effective April 1, 2013.

The relationship between the satellite facilities and SAH originated in 1984, when the two then-Red Cross hospitals came under the stewardship of the Plummer Memorial Public Hospital. With the formal amalgamation of the Plummer Memorial and General Hospitals in 2002, the Thessalon and Matthews Memorial Hospitals became satellite facilities of what is now Sault Area Hospital.

In recent years, there has been a growing awareness of the economic, cultural, geographic and social differences between rural and urban communities and the recognition that health care delivery needed to be better tailored to reflect those realities. This was echoed in public consultations held with residents in these communities and it was reaffirmed with the release of the Rural and Northern Health Care Framework/Plan.

Given the Blind River District Health Centre's long and distinguished delivery of health care services in a rural setting, the North East Local Health Integration Network (NE LHIN) and representatives of the Matthews Memorial Hospital Association, Thessalon Hospital, BRDHC and SAH formed a committee to investigate the possible integration of the two satellite facilities under the umbrella of the BRDHC. After extensive discussions, an agreement was reached to make this a reality.

SAH thanks and salutes all the staff and physicians of both the Thessalon and Matthews Memorial Hospitals for their dedication to patients throughout the years and wishes them continued success in their future as part of the BRDHC family.

### Volunteers Make a Difference

SAH recognizes the essential role volunteers play in assisting patients, families, friends and visitors. The volunteers at SAH come from all walks of life but share the common desire to improve the quality of life for others.

SAH has an active Volunteer Resources Department which is responsible for organizing the services that volunteers provide to various departments at the hospital on a daily basis. The department is extremely fortunate to have more than 400 volunteers who contribute over 65,000 hours per year. On any given day, there are 60 or more volunteers carrying out various assignments throughout the hospital. Tasks include anything from providing directions and information, to escorting patients to their appointments or spending time with inpatients who may be alone and looking for some company.

The motivation for volunteering varies from person to person. Many volunteers have an innate desire to help

others, while some find fulfillment in the socialization aspect and/or skill development that the volunteer experience offers. Whatever the reason, volunteers at SAH provide compassion and support in many ways, offering a listening ear, a warm smile and a helping hand.

Regardless of their roles, volunteers generously contribute countless hours of their time and share their talents and experiences for the benefit of our patients. SAH thanks all of its volunteers -past and present - for their time, talent and dedication to the residents of Sault Ste. Marie and the Algoma District.



*John and Carol Chouinard.*



*(l-r) Joan Buconjic, Farah Barnard and Jane Rogers are some of SAH's Information Desk volunteers.*



*Dora and Vincent Plastino.*

# Financial Report

## Condensed Statement of Financial Position

As at March 31, 2013 with comparative figures for 2012 (Thousands of dollars)

### Assets

Current assets	2013	2012
	\$29,720	\$17,940
Long-term receivables and restricted cash	3,050	4,736
Capital assets	340,182	354,061
	<u>\$372,952</u>	<u>\$376,737</u>

### Liabilities, Deferred Contributions and Net Assets

Current liabilities	2013	2012
	\$55,381	\$73,511
Long-term liabilities and deferred contributions	363,001	361,673
Net assets	(45,430)	(58,447)
	<u>\$372,952</u>	<u>\$376,737</u>

## Condensed Statement of Operations

As at March 31, 2013 with comparative figures for 2012 (Thousands of dollars)

### Revenues

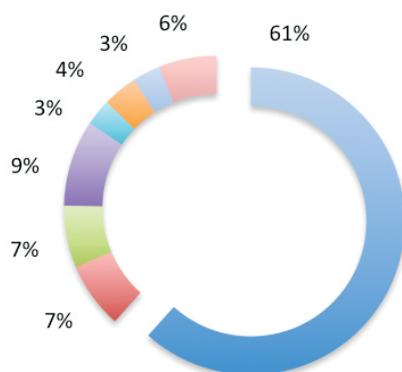
Ministry of Health and Long-Term Care and Local Health Integration Network	2013	2012
	\$192,363	\$188,065
Other	35,103	37,121
	<u>\$227,466</u>	<u>\$225,186</u>

### Expenses

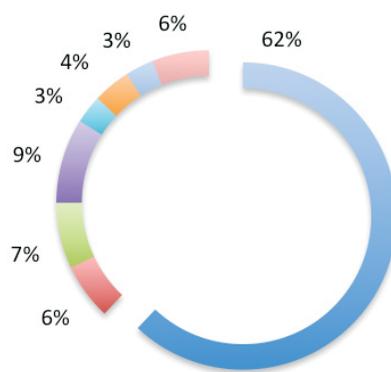
Compensation and benefits	2013	2012
	\$118,104	\$118,264
Other	96,345	97,498
	<u>\$214,449</u>	<u>\$215,762</u>
<b>Excess (deficiency) of revenues over expenses</b>	<u>\$13,017</u>	<u>\$9,424</u>

### Revenues (%)

2013

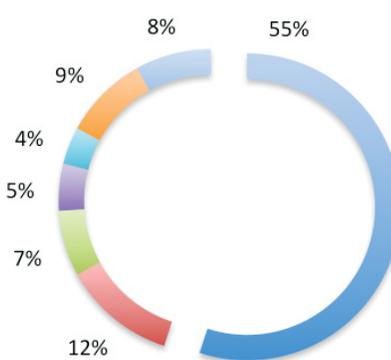
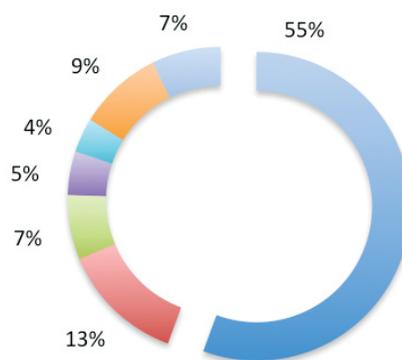


2012



- Base funding
- One-time hospital grants
- Working Capital Relief funding
- Annual Service Payment revenue
- Cancer Care Ontario funding
- Patient revenue
- Amortization of deferred capital contributions
- Other revenue and recoveries

### Expenses (%)



- Compensation and benefits
- Supplies and other expenses
- Medical Staff Remuneration
- Medical & Surgical Supplies
- Drugs and medical gases
- Interest costs
- Amortization of capital assets

### Selected Statistics

	2013	2012		2013	2012
Inpatient days	104,347	107,230	Clinic Visits	127,844	122,927
Surgical cases	9,647	8,675	MRI Hours of Operation	4,841	5,061
Emergency visits	61,437	61,126	Diagnostic Imaging C.A.T. hours	5,199	5,030

# 2012/2013 Board of Directors and Committees

## Elected Members

Jamie Melville, Chair  
Gregory Peres, 1st Vice Chair & Treasurer  
Lorne Carter  
Joy Haley  
Donna Hilsinger  
Anthony P. Marrato  
Luisa Martone  
Debbie Romani  
Reg St-Amour  
Frank Sarlo  
Pramod Shukla  
Connie Witty

## Ex-Officio Members

Ron Gagnon, President & CEO  
Dr. Heather O'Brien, Chief of Staff and Medical Affairs  
Dr. Doug Bignell, President of Medical Staff Association  
Dr. Anna Rogers, Vice President of Medical Staff Association  
Johanne Messier-Mann, Chief Nursing Officer & Director of Maternal Child Program  
Laurel Young, Volunteer Association

## Senior Management Team

Ron Gagnon, President & CEO  
Marie Paluzzi, Vice President & Chief Operating Officer  
Max Liedke, Vice President & Chief Financial Officer  
Dr. Heather O'Brien, Chief of Staff and Medical Affairs  
Ila Watson, Vice President of Transformation & Chief Human Resources Officer  
Johanne Messier- Mann, Chief Nursing Officer & Director of Maternal Child Program  
Doug D'Agostini, Chief Information Officer/Chief Privacy Officer  
Mario Paluzzi, Director of Communications & Public Affairs  
Kelli-Ann Lemieux, Director of Clinical Support Services and Chief Allied Health Professional

## Medical Advisory Committee

Dr. Heather O'Brien, Chief of Staff and Medical Affairs  
Dr. Doug Bignell, President of Medical Staff Association  
Dr. Anna Rogers, Vice President of Medical Staff Association  
Dr. Peter Meligrana, Secretary/Treasurer of Medical Staff Association  
Dr. Greg Berg, Medical Director of Medicine  
Dr. David Berry, Internal Medicine Representative  
Dr. Heather Blois, Chief of Rural Medicine  
Dr. Mike D'Agostino, Deputy Director of Laboratory Services  
Dr. Phil Dopp, Chief of Anaesthesia  
Dr. Derek Garniss, Medical Director of Emergency  
Dr. Rishi Ghosh, Chief of Intensive Care Unit  
Dr. Jeff Jenkin, Chief of Diagnostic Imaging  
Dr. Marilyn Leahy, Chief of Family Medicine (*until Jan. 2013*)  
Dr. Maxine Lingurar, Chief of Obstetrics/Gynaecology Program  
Dr. Bob Maloney, Chief of Hospitalist Program  
Dr. Lino Pistor, Medical Director of Mental Health Program  
Dr. Joseph Reich, Medical Director of Surgical Program  
Dr. Silvana Spadafora, Medical Director of Oncology  
Fiona Wardle, Chief Midwife, Obstetrics/Gynaecology Program  
Dr. Kirk Zufelt, Chief of Paediatrics  
Ron Gagnon, President & CEO  
Max Liedke, Vice President and Chief Financial Officer  
Marie Paluzzi, Vice President & Chief Operating Officer  
Johanne Messier-Mann, Chief Nursing Officer & Director of Maternal Child Program  
Jamie Melville, Chair, Sault Area Hospital Board of Directors



SAULT AREA  
HOSPITAL  
HÔPITAL DE  
SAULT-SAINTE-MARIE

iCcare

Integrity • Compassion • Collaboration & Partnership •  
• Accountability • Respect • Excellence