



*Exceptional People.  
Outstanding Care.*



SAULT AREA  
HOSPITAL  
HÔPITAL DE  
SAULT-SAINTE-MARIE

*Together We Make A Difference*



# Sault Area Hospital 2013/2014 Annual Report

## VISION

We will be recognized as the best hospital in Canada and an active partner in the best community health care system in the country.

## MISSION

Exceptional people working together to provide outstanding care in Algoma.

## VALUES

**Integrity** ~ We say what we mean and we mean what we say.

**Compassion** ~ We show concern and care for others.

**Collaboration & Partnership** ~ We promote teamwork.

**Accountability** ~ We are answerable for our actions and decisions.

**Respect** ~ We care about the well-being, dignity and uniqueness of everyone.

**Excellence** ~ We deliver our best every day and encourage innovation to continuously improve.

Front Cover:

*Exceptional People. Outstanding Care.*

(Front Row- left to right): Gigi Farrell, Dietitian ~ Patti Leonard, Personal Support Worker ~ Jane Celetti, Physiotherapist ~ John Stephen, Former Stroke Patient  
(Back Row – left to right): Lawson Rains, Registered Nurse ~ Kathy Nelson, Occupational Therapist ~ Dr. Danny Hill, Chief of Internal Medicine

Former stroke patient, John Stephens, is shown with some of his many care providers during his four-month stay and recovery at Sault Area Hospital (SAH). John was grateful to his doctors, nurses, personal support workers, physiotherapists, occupational therapists, dietitians and many more health care professionals and support staff who rallied around him during his long road to recovery. His hospital experience was very positive and all the staff, physicians and volunteers he encountered were excellent. John's experience inspired him to become a hospital volunteer, assisting with the development of a Volunteer Stroke Patient Support Program. John now visits, listens, provides guidance and supports SAH stroke patients through their recovery processes.

SAH is proud to have exceptional people delivering outstanding care!

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

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Photos throughout by Neil MacEwan.

The hospital is grateful to the Sault Area Hospital Foundation is a major source of funding for much-needed medical equipment. To view a copy of the Foundation's Annual Report 2013/2014, please visit [www.sahfoundation.on.ca](http://www.sahfoundation.on.ca).



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# Message From Our Leadership

**Mission** – “a journey with a purpose; a duty, vocation or work, esp. that enthusiastically accepted or assumed.”  
- Canadian Oxford Dictionary

Looking back on the past year and looking forward to the future, there is no doubt that we are truly on a mission to improve the health and well-being of the residents of the District of Algoma and everyone we serve.

It has often been said, and bears repeating, that our people are the heart, soul and very essence of Sault Area Hospital (SAH). The culture of service and excellence begins and ends with all those who come to SAH every day to do their part with pride, dedication and commitment. The strides we have made in cultivating this culture are becoming more and more apparent and we will continue to work hard to ensure that SAH is an excellent place to work, practice medicine, volunteer and receive care.

We will continue to invest heavily in our leaders of today and tomorrow through our Best Leadership and Emerging Leaders Programs. We have made a concerted effort to involve front line staff in enhancing the overall workplace environment and have dedicated more resources to education and training opportunities for all staff in support of their career and professional development needs.

In working together, we have also made a positive difference when it comes to the safety of the work environment. This past year, for the first time ever, we received a rebate from the Workplace Safety and Insurance Board. This rebate is a significant milestone and reflects just how far we have come in improving the safety of our workplace. We are investing this rebate into staff education and safety initiatives and will continue to do so with future rebates.

Our continuous improvement philosophy (Lean) has taken hold and our people are more involved than ever in spearheading change at SAH. Since embarking on our Lean journey, more than 40 formal projects have been completed throughout the hospital, involving approximately 300 individuals, and there have been countless other improvement initiatives taking place as a result of the knowledge and enthusiasm being built. As an organization, we are well on our way to our iCare Management System being a reality - one where 80% of all changes are made daily at the front line based on the principle that those who do the work should change the work.



Left to right: Jamie Melville, SAH Board Chair, Dr. Heather O'Brien, Chief of Staff and Medical Affairs and Ron Gagnon, President & CEO.

We continue to celebrate the success and accomplishments of our staff, physicians and volunteers in our internal newsletters, on our website, in the media, features in publications such as the Northern Ontario Medical Journal and through numerous provincial and national speaking opportunities where the successes of our hospital are being recognized and modeled. Most importantly, we recognize those who embody and live our values of integrity, compassion, collaboration & partnership, accountability, respect and excellence with our highest honour – the annual iCcare Awards.

Physician recruitment success in the past year has allowed us to fill many key vacancies, especially in Mental Health, the Algoma District Cancer Program and the Internal Medicine Program. Three new psychiatrists, two oncologists and a new interim Chief of Internal Medicine joined the SAH team in 2013/14 and have had immediate and significant impact on reducing workloads for their colleagues in those areas and improving access to care for our patients.

But the past year was not without challenges. We have had to deal with significant overcapacity issues this past year as a result of an excessive delay in the approval of 50 interim long-term beds in the community. This affected nearly every aspect of hospital care. We are confident that final Ministry of Health and Long-Term Care approvals will be received in the next several weeks and the beds will be open and available to our community shortly thereafter. In addition, we will continue to work internally and with our partners to ensure that patients are not having to stay in hospital any longer than they want or need to and that they are able to receive the care they need elsewhere in the community when that is more appropriate.

Overall funding to hospitals has been frozen over the past three years and we do not see this changing in the foreseeable future. Health System Funding Reform (HSFR) will continue to have a significant impact on the way we are funded and how services are organized and delivered. We have been working diligently to fully understand the implications of HSFR for each program/department and the hospital as a whole. Rather than focus on perceived flaws or inequities in the new system, we have devoted our energies positively to looking for ways to work most effectively within the system, and to identify and seize opportunities to not only protect, but to grow the services (and funding) that our communities need.

We will continue to work on developing our relationship with our physicians and have made a commitment to involving individual physicians and medical leaders earlier and more significantly in strategic development and decision-making for the organization. This includes, but is not limited to, regular meetings between Medical Staff leadership and the Senior Management Team to identify areas of opportunity and solutions.

We have worked extremely hard to attain an improved financial position - one where we continue to deliver services within the funding we receive and are now able to invest in innovative initiatives to improve hospital and health care.

Partnerships, more than ever, are critical to the success of our vision. If we are indeed going to be “an active partner in the best health care system in the country,” we will need to work not only on improving as a hospital, but also by playing a vital role in developing and working within that system. This means reaching out and working even more closely with other providers in the community and region.

The new Algoma Geriatric Clinic (AGC), located at SAH, is a shining example of this philosophy in action. The AGC’s work extends beyond our walls, working in partnership with community agencies to coordinate care of the geriatric population and identify service gaps (refer to the feature article in this report for more details).

In addition, the hospital has teamed up with Algoma Public Health, the Group Health Centre, the North East Community Care Access Centre, primary care providers and other local partners to submit a proposal for the creation of a community Health Link in Sault Ste. Marie/Algoma. This Health Link will encourage greater collaboration between existing local health care providers, including primary care providers, specialists, hospital, long-term care, home care and other community supports. Patients with the greatest health needs will receive faster, more coordinated care and will be supported by a team of health care providers at all levels of the health care system.

This past year, we also benefited from the insight and input of the Patient and Family Advisory Council (PFAC) in the Algoma Regional Cancer Program. As a result, we will now be implementing a Corporate (hospital-wide) Council as a first step to having patients and family members more involved in all key decisions across the hospital.

Under the Board’s leadership, we have been working on the development of a new five-year Strategic Plan, taking us through to 2020. This has been a large undertaking, commensurate with its importance to the long-term future of SAH and health care services for the people we serve. A comprehensive consultative process was undertaken which included public input through an online survey, public consultation session, more than 25 meetings with individual stakeholder groups and multiple internal focus groups with staff, volunteers and physicians. The strategic plan will provide the blueprint for the hospital’s goals, priorities and actions over the next five years.

As part of this important work, we have recognized that it is now time to chart a new course, a course focused on thriving as opposed to merely surviving. To guide us on this course, and having received input from many internal stakeholders, the Board has adopted a new mission statement for SAH – one that succinctly conveys who we are and why we exist...

***Exceptional people working together  
to provide outstanding care in Algoma.***

At SAH, our mission is indeed “a journey with a purpose” and a “duty, vocation or work which is enthusiastically accepted or assumed” and one which we are proud to take together for the benefit of our patients.

# Highlights From 2013-2014

## SAH Hosts Second Annual Lean Expo

SAH introduced Lean methodology in late 2012 and the hospital and patients are beginning to reap the benefits. The Lean philosophy focuses on improving the delivery of patient care while minimizing wasteful processes, with a particular focus on "those who do the work change the work."

Since late 2012, SAH has trained 3 Lean Green Belts and 25 Yellow Belts and there are 6 more under way. A number of departments including Nutrition and Food Services, the Intensive Care Unit and the Operating Room have implemented changes to make processes more efficient, thereby resulting in improved patient care.

To celebrate and highlight the organization's Lean projects over the last year, SAH hosted its second annual Lean Expo in April 2014. The purpose of the Expo was to create awareness of the Lean improvements made by front-line staff. It was an opportunity to share the great work, reinforce Lean concepts and tools and recognize employees for driving improvement in support of the hospital's vision of being 'best'.

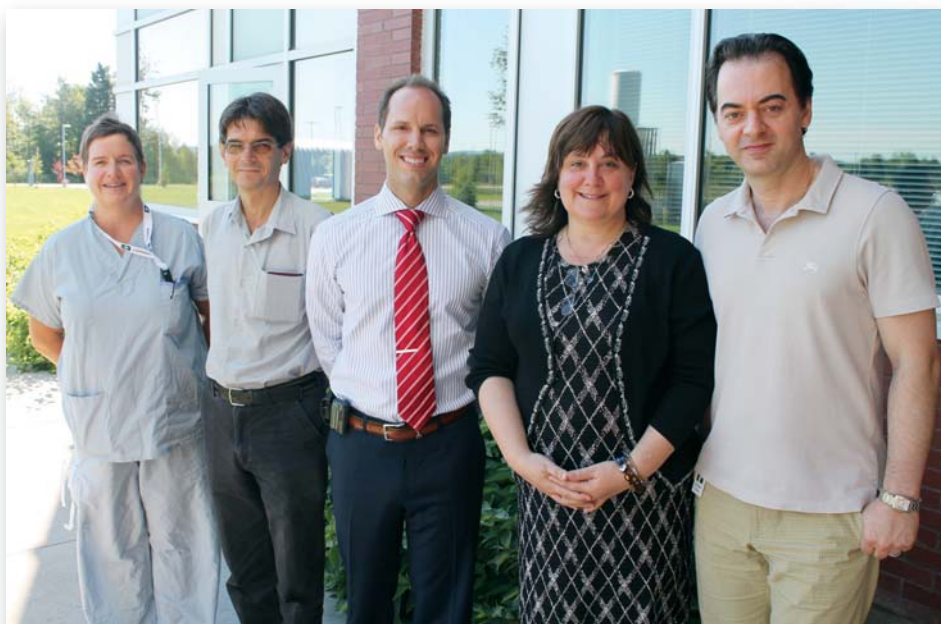


Staff, physicians and volunteers take part in a staff-directed flash mob to celebrate Lean success at SAH.

The Expo was interactive, offering staff, physicians, volunteers, patients and visiting members of the public 'hands-on' learning. A staff-directed flash mob closed this exciting event. Congratulations to all the candidates and everyone involved in the Lean initiative.

## Welcome New Oncologists

2013/2014 saw the much-anticipated arrival of two new full-time medical oncologists - Dr. Mohammed Rassouli and Dr. Ionnis Voutsadakis - and haematologist Dr. Danny Hill to the Algoma District Cancer Program (ADCP) team.



Left to right: Dr. Heather O'Brien, Chief of Staff, Dr. Ionnis Voutsadakis, Dr. Danny Hill, Dr. Mohammed Rassouli and Dr. Silvana Spadafora.

Since 2012, the ADCP had been working in affiliation with Health Sciences North Regional Cancer Program (HSNRCP) in Sudbury through a truly unique partnership for the provision of patient care during a time when SAH only had one full-time local oncologist - Dr. Silvana Spadafora. This professional partnership allowed the local team to continue to provide the highest level of cancer care for patients in the Algoma Region while physician recruitment efforts were undertaken.

"The addition of these physicians and the specialist skills and training they bring with them are a boon to the ADCP and SAH as a whole, and of course, to our patients," states Dr. Heather O'Brien, SAH Chief of Staff and Medical Affairs. "At the same time, it's imperative to recognize the truly extraordinary dedication and devotion of Dr. Spadafora, who went above and beyond as the sole permanent oncologist in the

SAH also wishes to acknowledge and thank its partners at the HSNRCP for their support and ongoing commitment to the ADCP.

## SAH Congratulates iCare Award Recipients

The Annual SAH iCare Awards recognize an outstanding employee, volunteer and physician who consistently demonstrate the values of the hospital – Integrity, Compassion, Collaboration and Partnership, Accountability, Respect and Excellence.

The deserving winners of the 2013 iCare Award recipients were:

### Employee

**Marsha DeFrancesco** - Marsha DeFrancesco began her work at SAH 38 years ago with most of her time spent in the Renal Department in a variety of positions, most recently as the Independent Dialysis Coordinator. Marsha goes above and beyond the requirements of her role, turning her patient's challenges into victories. Marsha was the 2013 recipient of Cancer Care Ontario's Human Touch Award which recognizes a health care professional who consistently demonstrates exceptional and compassionate patient care. Marsha is highly regarded by patients, physicians and staff alike for all her efforts and dedication to her profession.

### Volunteer

**Arlene Pearce** - Arlene Pearce has been a dedicated volunteer with SAH for 30 years, including more than 10 years as a member of the Volunteer Association Executive. In 2004, Arlene received her Provincial Life Membership Award from the Hospital Auxiliaries Association of Ontario. She currently volunteers in the Gift Shop, sells Nevada Tickets and acts as treasurer for the Nevada Ticket Lottery, but has taken on many different roles and responsibilities over the years. Arlene is described as "Amazing, articulate, always able to pitch in, friendly, warm-hearted and she makes you feel like family."

### Physician

**Dr. Joseph Reich** – Dr. Joseph Reich has been the Medical Director of the Surgical Program for the past 13 years. He completed his residency in General Surgery at Dalhousie University and has a special interest in thoracic surgery. Dr. Reich consistently



Left to right: Dr. Joseph Reich, Marsha DeFrancesco and Arlene Pearce.

applies and demonstrates the iCare values of SAH while striving for excellence, constantly looking for opportunities to improve all aspects of the Surgical Program and hospital operations in general. He is very engaged at SAH and demonstrates the values by holding himself and others accountable at all times, while remaining open-minded with strong and objective listening skills.

Congratulations to all the Award recipients for their dedicated service to the residents of Sault Ste. Marie and the Algoma region!

## Innovation Fund Established

SAH was successful in generating a surplus of \$1.3 million for fiscal 2012/2013 which will be reinvested back into hospital programs, people or services in the form of an Innovation Fund. This surplus is in addition to the mandated annual \$1.5 million surplus which is used to pay down debt.

The objective of the SAH Innovation Fund is to support Board-approved innovation opportunities, including education and capital investment proposals that will continuously improve the quality of care and patient experience at SAH. The Innovation Fund is non-recurring and will support one-time expenditures.

In order to determine a process for allocating these funds, an Innovation Fund Committee was developed in 2013. Consisting of hospital staff, physicians, volunteers and community members, the group represented a cross-section of both the hospital community, as well as providing a perspective from the community at large. The Committee was fittingly chaired by the Executive Director of the Sault Ste. Marie Innovation Centre.

SAH staff, physicians and volunteers, along with any organization or individual in the Algoma District were invited to submit a proposal/application to access the Innovation Fund. A total of 42 applications were received.

The Innovation Fund Committee will review, evaluate, rank and prioritize all submissions, with final recommendations expected later this summer.

Born and raised in Sault Ste. Marie, Elaine served on the SAH Board of Directors for ten years, and five as Chair. Her years as Chair were arguably the most challenging and pivotal in the history of the hospital.

Under Elaine's stewardship, the Board and SAH management team developed operating and financial plans to eliminate long-standing deficits, implemented best-in-class approaches to governance, developed a strong vision and strategic plan and built a stronger community presence.

During this same time, Elaine and the Board oversaw the largest public sector construction project in the history of Sault Ste. Marie, culminating with the opening of the new SAH on March 6, 2011 – on budget and a month ahead of schedule.

Elaine was recognized for her leadership strength, relationship-building skills, extensive knowledge of – and contributions to – health care in Sault Ste. Marie and the Algoma District. Elaine also served as Chair of the North East Local Health Integration Network from August 2012 to February 2014, using her skills to benefit an even larger geographic region and resident population.

In recognition of her leadership and lifelong contributions, Elaine also received a Queen's Diamond Jubilee Medal, the Provincial Leading Women/Building Communities Award and the Algoma District Law Association's Harry Hamilton Award for Community Service.

"The Hutchinson Award is particularly special to me because it was presented by the SAH family," says Elaine. "It is humbling to be included among so many wonderful people who have impacted the health and lives of the people in the Algoma region."

SAH salutes Elaine Pitcher!



## Wellness Committee Promotes Employee Health



Left to right: Wellness Committee members Melissa MacDonald, Carolle Manzo and Patti Armstrong deliver snacks to staff.

The role of the Employee Wellness Committee is to promote, support and provide education to all staff in making healthy choices in their work and home lives.

During 2013/2014, the SAH Wellness Committee organized a number of activities and events including the third annual Health and Wellness Fair, which was a resounding success.

SAH also hosted a Kids Career Day for sons/daughters of SAH staff. Twenty students participated in a general facility tour, attended various speaker presentations and actively participated in workshops.

Additionally, in partnership with Jade Yoga and Wellness, the Wellness Committee introduced Wellness Moments. The purpose of the Wellness Moments was to provide front line staff with education and coaching on how to appropriately incorporate simple, effective posture and de-stressing tips into day-to-day work tasks.

A "Take Your Break" blitz reminded staff about the benefits of taking breaks. A few members of the Wellness Committee visited each department/unit with a snack cart, offering staff free healthy snacks, including fruit, granola bars and water.

SAH is proud to be a community leader in employee wellness, thanks to the hard work and commitment of the Employee Wellness Committee.



## Task Force Groups Engage Staff

The results of the 2012/2013 Employee Engagement survey revealed trust as one of the key areas for improvement. As a result, after professionally-facilitated follow-up focus groups were held to more thoroughly explore some of the key underlying issues, five task teams were created to address each of the individual themes/issues: involve staff in problem solving and decision making; ensure all staff comply with the SAH standards of behaviour/ICcare values; ensure communication is consistent and transparent with feedback to staff; find ways to bring SAH together as one team; and review and improve the Attendance Improvement Plan.

Throughout 2013/2014, these groups of dedicated SAH individuals worked tirelessly to develop strategies/initiatives to improve trust and make SAH a better workplace. Each of the five teams presented their findings and recommendations to the Senior Management Team.

Implementation of a number of recommendations is ongoing, along with additional work on those requiring additional analysis and investigation. The task groups have agreed to stay together and continue working to lead this process.

SAH thanks all task team members for their commitment and determination to make a positive and lasting difference.

## Patient Post-Discharge Calls Improve Quality

An initiative of the 2013-2014 Quality Improvement Plan, post-discharge phone calls are being made across the organization to improve clinical outcomes, prevent adverse events and readmissions, and improve the patient's overall experience.

The purpose of the discharge follow-up call is to evaluate the patient's hospital experience and/or progress following their discharge to ensure that their recovery is proceeding as planned.

Follow-up phone calls are made to a targeted number of inpatients, outpatients, and Emergency Department patients once they are discharged or complete a visit. SAH follows best practice guidelines which recommend that follow-up calls be made within three days following discharge or a visit.



Brittany Butcher, RN in the Maternal Child Program uses Patient Call Manager software to make post-discharge calls to patients.

The goal is to call a minimum of 40% of patients, with a focus on those who may be at higher risk. SAH is continually working to increase the number of completed calls. The questions that the caller asks are customized for each unit/patient population and are tailored to specific departments. Patients will be asked if they are taking their prescribed medications and if they have made a follow-up appointment with their family doctor as outlined in their discharge instructions.

During the call, there are both opportunities to acknowledge health care providers for their work and to identify opportunities for improvement. To date, patients have provided numerous 'rewards and recognitions' and doctors and nurses are thrilled to receive such positive feedback. Patients have also provided valuable suggestions for changes and have indicated areas for improvement.

Making post-discharge phone calls is one of the ways SAH can improve a patient's satisfaction and overall hospital experience.

## Former Hospital Properties Sold

In May 2013, the SAH Board of Directors approved the sale of the Queen Street properties to The TVM Group for \$65,000. The land and buildings were sold as one parcel on an "as is, where is" basis.

The land and buildings were officially listed since July 2011. While there was some interest expressed by other potential purchasers, it was contingent on demolition of the old buildings and any related clean up being borne by SAH. Costs for demolition alone were estimated at between \$2.5 and \$5 million.

Based in Toronto, The TVM Group is a multi-faceted property developer that owns and manages 25 different properties within the Province of Ontario. The former Plummer hospital site is currently being redeveloped into 40 luxury condominium units. Plans for the previous General Hospital have not yet been finalized.

## Feature Story

# *Exceptional People. Outstanding Care.*

SAH celebrated the official opening of the Algoma Geriatric Clinic (AGC) on November 29, 2013. The first local clinic of its kind in the Northeast, the AGC offers specialized assessment and treatment to medically complex and frail elderly in an outpatient setting.

The clinic is designed to optimize the level of independence in the lives of geriatric patients living in the community. "The AGC is unique because we focus on providing the elderly with holistic care which not only includes the physical/functional needs of the patient, but all aspects of their health including emotional, environmental, social factors and even personal safety issues such as reducing falls," says Mary Ellen Luukkonen, Administrative Director.

"The AGC is different from other assessment services available in the community," says Dr. Frank Ianni, Medical Director of the AGC. "We do not focus on a single problem, but rather we look at all medical problems and make suggestions regarding treatment, initiate treatment and follow the individual until treatment has been optimized."

Patients access the clinic through a referral system which is prioritized according to urgency and specific criteria. Examples of individuals who may benefit from the services of the AGC include elderly patients with multiple co-existing medical conditions, those with chronic conditions requiring frequent hospitalizations or emergency department visits and individuals suffering from dementia. Physicians or nurse practitioners can refer to the program and approximately 20-30% of referrals come from SAH discharged patients.

"Every new patient will receive a comprehensive, 2½ hour assessment by a geriatric assessor, followed by a second visit with a physician," says Patty Greve, Patient Care Manager. "Once these are complete, a plan of care will be created and shared with the patient/family, the patient's primary care physician and the community agencies that are enlisted to support the patient."

According to Dr. Ianni, this assessment consists of an in-depth review of past medical records and a "head-to-toe" physical examination of each patient. "This type of assessment is very time



Sandra Mossa, Nurse Practitioner exams Gordon, ensures he maintains a healthy blood pressure and reviews his medications.

intensive and not able to be done in the primary care practitioner's office," explains Dr. Ianni. "By providing this service to them, they will be better able to look after the health care needs of their patients."

The AGC inter-professional care team includes a nurse practitioner, social worker, registered nurse, physiotherapist, occupational therapist, manager, administrative director, medical director, clerical support and a team of physicians. Staff members are cross-trained as geriatric assessors, providing timely, comprehensive assessments and management plans for the geriatric population.

"Our goal is to not only provide treatment and support to the patient, but also to assist the caregivers by supporting them and connecting them with the appropriate community resources and services," explains Greve. "In fact, we strongly urge that patients have their families/caregivers present during their appointments."

Patients speak highly of the AGC as a vital service for the community. "I've never had anyone spend so much time listening to me," says one of AGC's inaugural patients, Gordon Stone. "The staff is compassionate, attentive, supportive and they truly care about their patients."



Rachel Parisien, Physiotherapist (left) and Tanya Mick, Occupational Therapist assist Gordon with his exercises during a Frail to Fit exercise class.



Gordon relies on Robert Rawn, Social Worker, for information, guidance and advice.

The AGC's work extends beyond their walls, working in partnership with community agencies to coordinate care of the geriatric population, maximize patient health and quality of life, and identify service gaps. "One of the gaps we identified was a fitness program tailored to the geriatric population," says Greve. As a result, the AGC developed the Frail to Fit Exercise Program. The purpose of the program is to provide geriatric patients with individualized exercises that will improve balance, strength, coordination and maximize their independence.

The program is led by the physiotherapist and occupational therapist, with classes available twice per week for groups of eight patients. "I enjoyed the exercise classes and I feel patients can benefit from this type of physical activity," says Mr. Stone. "Rachel and Tanya are excellent class leaders and they spent a great deal of time with me."

As one of the clinic's first patients, Mr. Stone has relied on the staff and services to manage through some difficult challenges. In addition to coping with his own medical issues including chronic back pain, he was his wife's caregiver and support person during her transition to a long-term care facility. "Talking with Rob (AGC Social Worker) provided me with great comfort and any time I called the clinic to make an appointment to see Sandra (Nurse Practitioner) the office staff, Karen and Rita, were always so accommodating," he explains.

According to Luukkonen, the AGC is filling a much-needed void in the community. "We are proud of the progress we have made in such a short period of time, and we look forward to continuing to make a positive difference in providing holistic care for geriatric patients and their families in the district of Algoma."

"I have been bragging to everyone I know about this clinic and the exceptional people who work there," says Mr. Stone. "The Algoma Geriatric Clinic is one of the best things that has happened to Sault Area Hospital and this community."

# Highlights From 2013-2014

## Algoma Geriatric Clinic Opens

The Honourable David Oraziotti, Member of Provincial Parliament for Sault Ste. Marie and Minister of Natural Resources, joined Elaine Pitcher, former Chair of the North East Local Health Integration Network (NE LHIN), SAH representatives and health care partners from throughout the region to celebrate the official opening of the Algoma Geriatric Clinic (AGC) on November 29, 2013.



Official opening of the Algoma Geriatric is marked with a ribbon cutting ceremony.

The first local clinic of its kind in the Northeast, the AGC offers specialized assessment and treatment to medically complex and frail elderly in an outpatient setting. It is designed to optimize the level of independence in the lives of geriatric patients living in the community.

The AGC sees an average of 90 patients per month. This service is unique because the team focuses on providing the elderly with holistic care which not only includes the physical/ functional needs of the patient, but all aspects of their well-being including emotional, environmental, social and personal safety issues.

Every new patient receives a comprehensive, 2½ hour assessment by a geriatric assessor which includes an in-depth review of past medical records and a “head-to-toe” physical examination.

This clinic fills a void in the community and looks forward to making a positive difference in providing holistic care for geriatric patients and their families in the District of Algoma.

## Restorative Care Initiatives Keep Patients Moving

In early 2014, a Restorative Care Team was established with staff representatives from patient care units and allied health to keep patients as mobile and independent as possible in order to prevent functional decline while in hospital.

SAH has invested in many different types of equipment including safe footwear (eg. grip socks) to help reduce slip hazards, walkers and canes to facilitate mobility, and therabands for patient exercise programs. Additional pocket talkers have been acquired to aide with communication for the hard of hearing, allowing them to be full participants in their own care.

Some of the many benefits of keeping patients mobile while in hospital include reduction of skin issues and bed sores, falls and length of stay. In addition, these patients may be able to maintain or increase their functional ability and return home sooner.

The Restorative Care Team visited and interviewed patients in the hospital and received first-hand information about their perspectives on maintaining mobility. Patients said that keeping mobile encourages them to be more engaged in their recovery. They also want to be involved, along with their families, in planning their care and setting goals. Knowing their goals motivates them to keep mobile and active, allowing them to get better and return home sooner.

SAH acknowledges the work of this team for their efforts in improving care.

## Inaugural Patient and Family Advisory Council

This past year, the Algoma District Cancer Program (ADCP) piloted the first Patient and Family Advisory Council (PFAC) at SAH. The purpose of a PFAC is to engage patients and their families, gather their advice on advancing a patient-centred approach to health and improve the patient experience across the cancer journey.

The PFAC is comprised of four patient advisors, four ADCP staff members and one member from SAH's Transformation office. Its mandate is to share ideas based on patient/family experiences, develop a collaborative vision of patient-centred care, improve the patient experience, improve communication between patients, families and staff, and provide input and feedback on programs, services and policies.

"The PFAC provides an excellent opportunity for staff and physicians to listen to patients and their families and respond to their feedback," says Medical Director of the ADCP, Dr. Silvana Spadafora. "This patient-provider relationship also enables patients and families to add their valuable input into shaping the future of the oncology program."

"I am really enjoying working with this cohesive group and I feel I am making a valuable contribution," says Mary Coulas, Patient Advisor. "As both an ADCP patient and caregiver, I think that hospital users offer a unique perspective that is very valuable in shaping the overall patient experience."

By working together, better health care outcomes, wiser allocations of resources and greater patient and family satisfaction can be achieved. The ADCP Patient and Family Advisory Council will be the model for the ultimate introduction of PFACs in other areas of the hospital.



Left to right: Sheila Hamilton, Laura Tenhagen, Tess Zanatta, Norbert Burgdorf, Paula Pigeon, Mary Coulas, Barry Lyons, Sarah Dunlop, Brenda Lynn and John Nardo.

## Enhancements to Surgical Program



Dr. Joseph Reich, Medical Director Surgical Program.

Thanks to the successful recruitment of surgical specialists and the new state-of-the-art hospital and equipment, the SAH Surgical Program now provides more services than ever. Many patients who would have previously travelled to other centres are now able to get the surgeries they require locally.

"We have been successful in recruiting extremely skilled specialized surgeons over the past few years, and with the move to the new hospital, we've acquired the sophisticated equipment required to allow them to fully employ their talents for the benefit of our patients," says Dr. Joseph Reich, Medical Director of the SAH Surgical Program. "This means more patients than ever can have their surgeries done right here in the Sault and, just as importantly, have easy access to follow-up care with their surgeon."

Thanks to the efforts of the Sault Ste. Marie Physician Recruitment and Retention program and medical leadership at SAH, a number of new surgeons have joined the Surgical Program, bringing with them the expertise to perform a number of new procedures. Some of these surgeries include laparoscopic hysterectomies (removal of uterus), nephrectomies (removal of kidneys), prostatectomies (removal of prostate) and percutaneous nephrolithotomy (removal of kidney stone through abdominal wall) to name a few.

None of this would be possible without the myriad of staff members who support the surgical program, the SAH Foundation and the generosity of area residents and businesses whose contributions help purchase much-needed equipment to perform these new surgeries.

## SAH Selected for Two Studer Awards

SAH was selected to receive both an Excellence in Patient Care and an International Health Care Organization of the Quarter Award by the Studer Group. The Awards were presented to SAH at the 11th Annual What's Right in Health Care® Conference last October in Atlanta, Georgia. The conference included industry experts, speakers, authors and representatives from top-performing organizations from across North America.

The Excellence In Patient Care Award is given to select partners based on excellent performance in a variety of categories. SAH was selected based on significant improvements in Physician engagement scores over the years. The International Health Care Organization Award is presented quarterly to a Studer partner demonstrating overall performance as an organization in the delivery of health care, across all areas.

According to Quint Studer, "It seems like all we do is pick up news and reports about what doesn't work, but it's so nice to find an organization where it does work. So thank you Sault Area Hospital for what you do."

"While we recognize that we still have much work to do on our journey to being best, we have made significant strides in staff engagement, patient satisfaction, reduction in hospital acquired infections, diagnostic wait times, lost time injuries and a number of other measures of excellence," says Ron Gagnon, SAH President & CEO. "These awards are recognition of the remarkable work done by all our staff, physicians and volunteers over the past several years in getting us to where we are today."

## Mental Health Program Gets a Boost

A combination of successful physician recruitment, investments in training and education, and an integrated approach has resulted in more timely access to quality care for Mental Health and Addictions (MH&A) patients at SAH.

In 2013, SAH welcomed four new psychiatrists to the team - Dr. Chinedu Ogbonna, Dr. Hesham Desouky, Dr. Manar Elbohy and Dr. Akinade Adebowale. The program saw a 30% reduction in patients who did not have a primary care physician and a 10% reduction in readmissions to the inpatient mental health unit in 2013. Since September 2011, there has been a 40% reduction in visits among those patients who make frequent trips to the Emergency Department. These improvements are a result of patients receiving more timely access to care.

A number of processes have been implemented to achieve this success, including the introduction of a central triaging and assessment process, patient post-discharge phone calls and cross-training of staff. The triage team assesses patients and connects them with the appropriate service and the multidisciplinary, cross-trained team ensures that patients get quality, evidence-informed care. The ultimate goal is to create a central point of contact and triage system across the program so that patients who require immediate services can be seen on a priority basis.

The many improvements in the MH&A Program over the last year could not have been possible without the dedication of the physicians and staff and the collaborative working relationships established with community and regional partners.

## Physician Leadership in the North

The skills, dedication and commitment of the SAH physician team was demonstrated by the appointment of two hospital physicians to provincial leadership roles:



**Dr. Silvana Spadafora**, Medical Director of the Algoma District Cancer Program, was appointed the Regional Clinical and Quality Lead for Systemic (Oncology) Treatment for the North East. Dr. Spadafora completed her Medical Oncology training at the Ottawa Regional Cancer Centre and has been practicing in Sault Ste. Marie for the past 19 years. Dr. Spadafora's extensive knowledge of how cancer services are delivered within the North East and her understanding of the Cancer Care Ontario model for improving cancer services will be a great asset to the North East Cancer Centre's regional team.



**Dr. David Berry**, Medical Director of the Algoma Regional Renal Program was appointed by the Ontario Renal Network (ORN) as one of 14 Regional Medical Leads, representing the North East region. The ORN was established in 2009 to provide overall leadership and strategic direction to effectively organize and manage

the delivery of renal services in Ontario in a consistent and coordinated manner. Dr. Berry's position is vital to providing leadership and strategic guidance in the regional implementation of the overall Ontario Renal Plan.

SAH salutes these physicians who will represent the diverse and unique interests of the North East region.

## Outstanding Lab Accreditation Results

As part of a mandatory accreditation review, assessors from the Ontario Laboratory Accreditation Program performed an extensive appraisal of the hospital lab in October, 2013.

This comprehensive assessment revealed an exceptional 97% compliance rate against provincial standards, placing SAH at the forefront of laboratories in the province. In addition, the SAH lab scored 100% compliance rate in point of care testing. This a testament of the great work of both lab and nursing staff at SAH.

The SAH Lab consists of medical laboratory technologists and assistants, pathologists, pathology assistants and phlebotomists. Services include chemistry, hematology, transfusion services, microbiology, histopathology, cytology, phlebotomy, point of care testing and autopsy services, performing approximately 1.5 million procedures each year.

## The Spirit of Love, Winter and the Olympics at SAH!



SAH staff, physicians and volunteer pose for a special team photo, capturing the spirit of love, winter and the Olympics.

SAH celebrated Valentine's Day, the Bon Soo Winter Carnival and our local Olympic athletes with a Red and White Day on February 14, 2014, capturing the moment with a "team photo" of staff, physicians and volunteers.

The hospital congratulates Mac Marcoux – son of SAH employee Lee Marcoux - who finished his first Paralympics with a gold medal in the Giant Slalom event and two bronze medals in the Downhill and Super G events. Mac is the youngest member of the Canadian Paralympic team at 16 years of age. Although unable to compete due to injury, older brother and regular guide, BJ, was on hand in Sochi along with the rest of the family to cheer Mac on to victory.

SAH also salutes Sault Ste. Marie's own Team Jacobs who won the Gold Medal in Men's Curling. The team from the Sault Curlers Association capped off a magical season with their victory in the Olympic final.

SAH applauds Mac, BJ and Team Jacobs for their years of hard work, determination and indomitable spirit. They have made their community and country extremely proud!

## Strategic Planning Development

Last fiscal year, SAH and the Board of Directors embarked on the development of a new Strategic Plan which will set the direction for the hospital through to the year 2020.

The planning began with the development of an environmental scan and a great deal of time was invested in a consultation process with patients and family members, SAH staff, physicians, volunteers, community health partners, community members and many others.

Input was solicited in a variety of ways, including a survey, discussion forums and meetings with stakeholders. SAH consulted with more than 25 stakeholder groups and held engagement sessions for staff, physicians and volunteers, as well as an open public session in the community. The hospital also received approximately 350 responses to the online survey posted on the SAH website.

Next steps include further consultation with stakeholders and identification and development of strategic initiatives and key measures. To keep it as current as possible, the plan will be reviewed and updated annually, always with a five-year time horizon.

SAH plans to launch the new Strategic Plan in fall 2014.

## Employee Receives Prestigious Human Touch Award

Marsha DeFrancesco, Independent Dialysis Coordinator with SAH's Algoma Regional Renal Program, was presented with a Human Touch Award by Cancer Care Ontario and the Ontario Renal Network. "I am humbled by this award," remarked Marsha. "I share this award with all of my colleagues and employees at SAH."

The Human Touch Award recognizes health care professionals, providers and volunteers in the cancer and renal system areas who demonstrate exceptional and compassionate patient care. SAH acknowledges Marsha's colleagues who nominated her for this prestigious award and we pride ourselves on having professional and caring staff members who continually deliver quality and patient-centred care to the residents of Sault Ste. Marie and Algoma District.

Marsha has worked at SAH for almost forty years and personifies the hospital's core values of Integrity, Compassion, Collaboration & Partnership, Accountability, Respect and Excellence. During her almost four decades at SAH, Marsha has worked in different areas of the hospital, including the medical units, the emergency department and the renal dialysis unit.

Marsha has seen the hospital go through many changes over the years and continues to remain optimistic about SAH's bright future. "I have learned that there is good in everyone and I see that each employee at SAH brings a different gift to the table to share in terms of providing patients with the best possible service that they rightly deserve."

"Our people are our greatest resource at SAH. I am so proud that Marsha has been honoured with this prestigious award," says Ron Gagnon, President & CEO. "We congratulate Marsha as a most deserving recipient of this award and thank her for her decades of dedication, compassion and professionalism."



Left to right: Rebecca Harvey, Vice-President, Ontario Renal Network, Shirley Pulkkinen, SAH Nominator, Neil Stuart, Chair, Cancer Care Ontario, Marsha DeFrancesco, Kim Fisher, SAH Nominator, Gord Hundal, Vice President, Not-for-Profit and Public, Royal Bank of Canada and Michael Sherar, President and CEO, Cancer Care Ontario.

## SAH Adopts New Mission Statement

Given the significant change in the hospital's situation since the development of the previous mission statement, and as part of the overall Strategic Plan renewal, the Board undertook to update the SAH mission statement to be more reflective of the hospital's current reality.

In reviewing the literature and mission statements from other organizations – both in the health care field and elsewhere - it was agreed that a strong mission statement must be concise, memorable and powerful, encapsulating who we are and why we come to work each and every day. A mission statement also provides the link between an organization's vision and its values.

The process involved several sessions and discussions at the Board level, leading to a draft which was then taken to staff, physicians and volunteers to solicit input and gauge the response against the stated objectives.

As a result, a new mission statement has been adopted by Sault Area Hospital which reflects our central purpose of providing care, the vital role of our people and the importance of collaboration and partnership in the delivery of that care - "Exceptional people working together to provide outstanding care in Algoma."

The theme for both this year's Annual General Meeting and the Annual Report was born out of the mission statement – "Exceptional People. Outstanding Care."

These words will continue to both define us and challenge us to constantly improve and achieve our vision "To be recognized as the best hospital in Canada and an active partner in the best health care system in the country."



## SAH Joins in Community Day Celebration

Last year, employees, volunteers and physicians joined together to represent Sault Area Hospital in the annual Community Rotary Day parade. Volunteers helped decorate the festive float with the fitting theme, *Together We Make A Difference*.

Social Committee members led this great effort and allowed the hospital to have a presence in the Community Day celebrations. Thank you to these individuals and all the volunteers who helped make this celebration possible!



## Volunteers are Extraordinary People

More than 600 volunteers gave in excess of 64,000 hours of service to enhance patients' experiences this past year. A total of 636 volunteers have a combined 2,754 years of service, led by three volunteers with more than 50 years of service each. The tremendous commitment, talents and dedication of SAH volunteers is a true testament to their giving spirit.



Information Desk volunteers, Doreen Standnyk (left) and Noreen Thibault provide patients and visitors with information, directions and where to find programs and services.

Each day, more than 50 volunteers escort patients, liaise with family members, visit patients, support the staff and physicians and much more. Volunteers are an integral part of SAH operations and without them, the hospital would not be able to provide the support and encouragement patients and families have come to rely on. Whether it's lending a listening ear or a helping hand, or simply wearing a friendly smile, volunteers add that special touch when it comes to supporting patient care and creating a positive hospital experience.

Volunteers can be found throughout the hospital in virtually every department including Emergency, Day Surgery, Cancer Program, Renal Program, Ambulatory Care, Diagnostic Imaging, Foundation and the cafeteria, to name just a few.

In the last year, the Volunteer Resources Department has added two new volunteer programs for stroke and emergency patients. A Stroke Patient Support Program offers patients the opportunity to connect with a volunteer who has suffered a stroke and can speak from first-hand experience. The focus of the Seniors Assisted by Friendly Volunteers in the Emergency Department (SAFE) is to decrease incidents of delirium, minimize falls and functional decline and to enhance the patient experience. Volunteers provide companionship, water and snacks, and assist patients in activities such as walking, crosswords, cards or just conversing.

Volunteers' contributions are far reaching, supporting physicians, staff, inpatients and everyone who walks through the doors each and every day.

# Financial Report

## CONDENSED STATEMENT OF FINANCIAL POSITION

As at March 31, 2014 with comparative figures for 2013 (Thousands of dollars)

### ASSETS

Current assets  
Long-term receivables and restricted cash  
Capital assets

	2014	2013
Current assets	\$39,803	\$29,720
Long-term receivables and restricted cash	4,522	3,050
Capital assets	326,404	340,182
	<u>\$370,729</u>	<u>\$372,952</u>

### LIABILITIES, DEFERRED CONTRIBUTIONS AND NET ASSETS

Current liabilities  
Long-term liabilities and deferred contributions  
Net assets

	2014	2013
Current liabilities	\$48,591	\$55,381
Long-term liabilities and deferred contributions	348,755	363,001
Net assets	(26,617)	(45,430)
	<u>\$370,729</u>	<u>\$372,952</u>

## CONDENSED STATEMENT OF OPERATIONS

For the year ended March 31, 2014 with comparative figures for 2013 (Thousands of dollars)

### REVENUES

Ministry of Health and Long-Term Care  
Other

	2014	2013
Ministry of Health and Long-Term Care	\$184,564	\$192,363
Other	47,373	35,103
	<u>\$231,937</u>	<u>\$227,466</u>

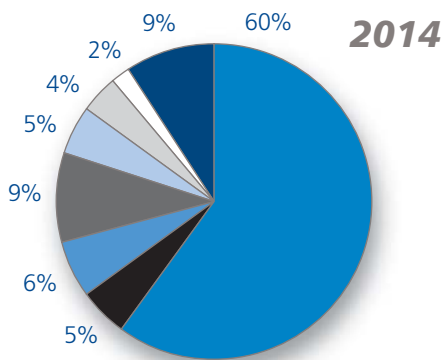
### EXPENSES

Compensation and benefits  
Other

	2014	2013
Compensation and benefits	\$115,835	\$118,104
Other	97,290	96,345
	<u>\$213,125</u>	<u>\$214,449</u>

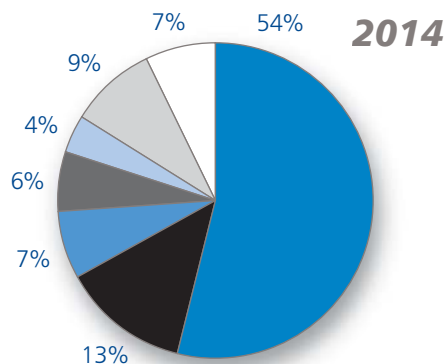
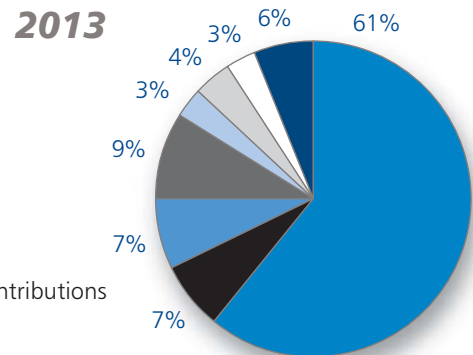
### Excess of revenues over expenses

	2014	2013
Excess of revenues over expenses	<u>\$18,812</u>	<u>\$13,017</u>



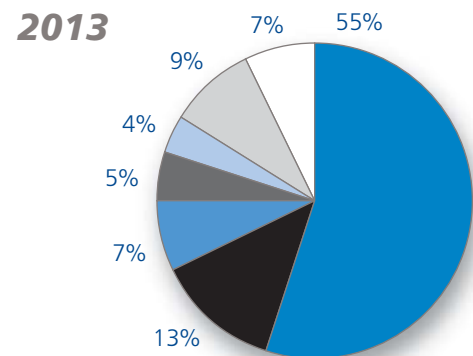
## Revenues

- LHIN based allocation
- 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 and surgical supplies
- Drugs and medical gases
- Interest costs
- Amortization of capital assets



### SELECTED STATISTICS

	2014	2013		2014	2013		2014	2013
Inpatient days	99,042	104,347	Emergency visits	54,360	61,437	MRI Hours of Operation	4,845	4,841
Surgical cases	10,604	9,647	Clinic Visits	126,121	127,844	Diagnostic Imaging C.A.T. hours	5,438	5,199

# 2013/2014 Board of Directors and Committees

## ELECTED MEMBERS

Jamie Melville, Chair  
Gregory Peres, Vice Chair & Treasurer  
Mark Barsanti  
Lorne Carter  
Joy Haley  
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 & 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 (*until Nov. 2013*)  
Lori Bertrand, Interim Chief Nursing Officer & Director of Medical Program (*from Dec. 2013*)  
Laurel Young, Volunteer Association Representative

## SENIOR MANAGEMENT TEAM

Ron Gagnon, President & CEO  
Dr. Heather O'Brien, Chief of Staff and Medical Affairs  
Max Liedke, Vice President & Chief Financial Officer  
Marie Paluzzi, Vice President & Chief Operating Officer  
Ila Watson, Vice President of Transformation & Chief Human Resources Officer  
Johanne Messier- Mann, Chief Nursing Officer & Director of Maternal Child Program (*until Nov. 2013*)  
Lori Bertrand, Interim Chief Nursing Officer & Director of Medical Program (*from Dec. 2013*)  
Doug D'Agostini, Chief Information Officer/Chief Privacy Officer  
Kelli-Ann Lemieux, Director of Clinical Support Services & Chief Allied Health Professional  
Mario Paluzzi, Director of Communications & Public Affairs

## MEDICAL ADVISORY COMMITTEE

Dr. Heather O'Brien, Chief of Staff & 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. Mike D'Agostino, Deputy Director Laboratory Services  
Dr. Phil Dopp, Chief of Anaesthesia  
Dr. Greg Berg, Medical Director of Medicine Program (*until Sept. 2013*)  
Dr. Derek Garniss, Medical Director of Emergency  
Dr. Rishi Ghosh, Chief of Intensive Care Unit  
Dr. David Berry, Internal Medicine Representative (*until Sept. 2013*) and Medical Director of Medicine Program (*from Dec. 2013*)  
Dr. Danny Hill, Chief of Internal Medicine (*from Sept. 2013*)  
Dr. Jeff Jenkin, Chief of Diagnostic Imaging  
Dr. Marilyn Leahy, Chief of Family Medicine (*from Dec. 2013*)  
Dr. Maxine Lingurar, Chief of Obstetrics/Gynaecology  
Dr. Robert Maloney, Chief of Hospitalist Program  
Dr. Lino Pistor, Medical Director Mental Health Program  
Dr. Joe Reich, Medical Director Surgical Program  
Dr. Silvana Spadafora, Medical Director of Algoma District Cancer Program  
Fiona Wardle, Chief Midwife Obstetrics/Gynaecology Program  
Dr. Kirk Zufelt, Chief Paediatrics  
Ron Gagnon, President & CEO  
Max Liedke, Vice President & Chief Financial Officer  
Marie Paluzzi, Vice President & Chief Operating Officer  
Johanne Messier-Mann, Chief Nursing Officer (*until Nov. 2013*)  
Lori Bertrand, Interim Chief Nursing Officer (*from Dec. 2013*)  
Jamie Melville, Sault Area Hospital Board Chair



SAULT AREA  
HOSPITAL  
HÔPITAL DE  
SAULT-SAINTE-MARIE

iCare

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

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