

**2024**

# **Sault Area Hospital Annual Reports**





## President and CEO Report

Ila Watson, President and CEO

Madam Chair, Corporate members, colleagues and guests;

Welcome back to the SAH Auditorium. Do you know that the last time we held our annual meeting in this room was in 2019? We could not have known then, all that would happen in the next few years. Last year, we were able to meet in person and did so at the Water Tower. This room was used for several years for clinical training, and we pivoted to having virtual meetings for many events; just one of the many examples of how we had to act quickly, make changes, be creative and change again. It is good to be back here

in this room together.

During much of the last year, our focus was on normalizing our operations post-pandemic, getting out of an often reactive, crisis mode of decision-making and contending with continuing and new challenges. Health Human Resources availability has continued to be challenging in the Ontario health sector and at home. For much of the year, we anticipated a deficit, driven by funding not matching increases to costs due to inflation, continuing supply chain challenges and, of course, the overturning of Bill 124 and the challenge of understanding how we would be funded for these substantial and important changes in compensation. Not too far into this past fiscal year, we learned of difficulties some other hospitals faced with cash flow and the continuing challenges of having sufficient people with the right expertise to maintain operations. As a community, we have also been increasingly impacted by issues such as access to primary care.

It is easy to focus on the many challenges in the health system. I sometimes worry that our good work and successes get a bit lost. I want to start my report today by sharing some of our accomplishments from last year.

- September opening of Northway Wellness Centre

- Replacement of the MRI
- Focused work in the ED, including safety improvements and collaboration with partners like DSSAB to improve ambulance offload times
- Readiness to open the second cardiac catheterization lab
- Replacement of the linear accelerator underway
- Achievement of Accreditation with Commendation through Accreditation Canada
- Recognition from Trillium Gift of Life
- Work to rebuild Obstetrics services
- Seamless MD
- Movement toward a shared health record with hospital partners in Northeastern Ontario, with 23 hospitals now on a shared instance of Meditech Expanse
- Continued collaboration on system integration as an active member of the Algoma Ontario Health Team

We achieved results in priority hospital goals, including employee and physician experience, reduction in sick time, medication reconciliation at discharge, and our Alternative Level of Care Days rate. Due to the complexities of funding, we ended the year in a financial surplus position despite forecasting a deficit.

Key areas of improvement and

where we have more work to do include some key performance measures in the Emergency Department, which are impacted by overall system challenges, and recruiting and retaining specific skills and professions. Unlike many hospitals, we did not have a significant deficit last year and have not relied on third-party staffing agencies.

Along with our many achievements, we have cause to be deeply concerned about the health of the health system.

Vulnerability is a word and a concept we are seeing more and more. In the last several years, we have seen how vulnerable aspects of our health and social systems have become. As conditions have become so difficult for people working in these systems, we have seen a greater willingness to show emotion and speak more openly about fatigue, burnout, and system sustainability.

As we have begun our early days and efforts at truth and reconciliation and learning how to be better with our Indigenous partners, we have taken a few earnest steps toward understanding the seven sacred teachings. Along with respect, courage, honesty, wisdom, humility and truth - One of these is love. I am sure for many, love was not a word used much in professional training or business school, and we do

not usually talk about it at an Annual meeting- but perhaps we are learning to look at this a little differently.

With the constant public narrative about a failing health system - love seems highly relevant. Health care is so important to all of us - we want to be sure our loved one's needs will be met, and we care about others in our community and those with whom we work and practice. We all have a high interest in the ability to access health services. We know that when other parts of the system cannot meet all the needs, people look to the hospital. We have a supportive community, yet it is clear that people are aware of the strain we are under, and they still need and expect us to be resilient and have solutions. No one wants to wait, but in many situations, waiting has become an unwelcome expectation and reality for many aspects of care and individual interactions. Concerning, for those we love.

We know that very often, when people are not their best selves in places like the Emergency Department, their behaviour can be driven by a desire to help or protect a loved one or a sense that they are not being seen or heard.

In this hospital, love is evident all the time - when we see people advocating for a loved one (even

if it does not meet an acceptable standard of behaviour), when we see people with the joy of welcoming a new baby, when we encounter families where there is terrible news. Even those of us in non-clinical roles like me - we have a chance to see and experience the love that is in our halls every day - we have all become fond of particular patients or see the same family member regularly coming to visit, despite their own struggles. When I'm rounding with people in various parts of the organization, I get to know very important stories - often shared in a vulnerable and loving manner - like the Porter who sings to patients, like the improvement ideas that start with the phrase, "If that was my mom or dad...", occasions (not infrequent) when people in our organization come together to support one another or their colleague's family, or a patient, when the worst happens. People here do very hard work, often in very difficult circumstances - and they save lives, know where the warm blankets are, have traumatic days at times, lose sleep, and keep coming back to do the work they know has extreme value and where they can make a difference. Our volunteers give their precious gifts - including their time, out of the generosity of their loving hearts. We are grateful for the many people who could practice anywhere but choose to do it

here. People in our organization support and facilitate things like organ donation – Shauna Hynna, James Chan, and I recently heard a presentation from an organ donation recipient describing donation as “the ultimate act of love.” Stories like these happen here every day.

We know there is a lot wrong with the health system. We should not let that diminish the tremendous work of people in this organization and our work with our partners. This year, we made improvements in many of our results. We have more work to do - work to anticipate continuing and new demands on the hospital. In a system with many challenges, there is a need to find ways to accelerate work toward integration and address rising costs. We know that many of the economics of the health system have to

shift. We are due to undertake work to update our strategic plan in the coming year - this will require us to study the environment, confront stark realities, imagine possible futures, consider different approaches and models and find ways to innovate, ensuring those innovations support equity. In these times of system vulnerability and volatility, we will need to be decisive, potentially take different risks and continue to be strong collaborators.

I have recently had several longer-stay patients at SAH tell me about their patient journeys. Despite all of the challenges, the message they gave me was the same, and it can be summarized by what one patient said: ‘If anyone says the health system is broken—tell them to call me.’ This is a testament to the

care we provide despite the challenges.

I am grateful to our Board of Directors, Senior Leadership Team, Executive and Administrative Assistants, and community and media partners. Thank you to those who nominated people for awards and the award recipients. These are great examples of what makes our work so rewarding and why we persevere and are privileged to do so.

What makes me optimistic is the depth and breadth of talent we have in this organization, the capacity and commitment to compassionately caring for our patients and one another, and the determination of our community partners and citizens at large to improve the health system.

Thank you.

**“We are proud of our many accomplishments over the last fiscal year including the opening of Northway Wellness Centre, the replacement of our MRI, safety improvements and collaboration with partners in the Emergency Department, readiness to open the second cardiac catheterization lab, replacement of our radiation therapy equipment that is underway, receiving Accreditation with Commendation through Accreditation Canada, and many more. This work could not have been possible without the tremendous work of our people in our organization, and our collaborative efforts with our partners.”**

**– Ila Watson, President & CEO**



## Chief of Staff Report

Dr. John Heintzman, Chief of Staff

I am John Heintzman, the fairly new Chief of Staff at Sault Area Hospital. I am told that I can keep saying “new” for a year, but no longer. I started in my role on January 2nd and am very pleased to be with you at our SAH Annual Meeting today.

For a few minutes, I am going to attempt to describe for you what a Chief of Staff does. I will use this to highlight some key accomplishments of our medical staff, strengths that I see here, opportunities and challenges that we face, and say

a few “thank yous.”

A Chief of Staff is a physician who has active privileges (permission) to practice their medical specialty at the hospital in which they serve. I am a child & adolescent psychiatrist, and in my clinic, one day a week, I see the most urgent or complex youth that the adult psychiatrists refer to me. In this capacity, I report to a most excellent Department of Psychiatry Chief, Dr. Curtis Obadan, whose support in helping me get settled in my new clinical role I am grateful for.

The Chief of Staff is primarily responsible for supervising and supporting the credentialed staff (physicians and midwives) to ensure the highest quality of medical care across the organization’s clinical services. To accomplish this, I have many partners, four (4) of whom I will comment on.

First, the department Chiefs and Medical Directors whom I meet with on a regular basis individually and assemble together monthly at our Medical Advisory Committee (MAC). There, we discuss, advise and decide on important issues related to quality of care. Some of the accomplishments for the MAC this year include a sequential monthly review of each department’s physician human resource needs to

inform & guide our recruitment efforts. Recruiting at SAH is both a strength and a challenge. Our community is indeed fortunate to have a physician recruiter extraordinaire, Ms. Carrie Stewart and a tripartite collaborative model between SAH, GHC and the City of Sault Ste. Marie. The support of Mayor Shoemaker & Mr. Vair from the City is much appreciated and exceeds anything I have seen elsewhere in my career.

The MAC has worked with provincial partners on important quality of care initiatives through the GeMQIN network, which provides aggregated physician data on key quality metrics such as the hospital standardized mortality ratio and delirium care initiatives, which we can use to compare the performance of our physician groups across provincial norms to help improve our practice. We also participate in the CPSO group quality initiative projects associated with Choosing Wisely Canada to help guide effective and efficient lab ordering and infection prevention efforts such as timely removal of catheters (loose the tube). Our surgical program has continued the extremely progressive work of Remote Care Monitoring through the Seamless MD program. This allows patients to return home much sooner after surgery, often even the same day. This is truly amazing

work as it not only improves outcomes for patients but helps make better use of hospital resources (beds) for more complex or acutely ill patients. Dr. James Chan, our Director of Medical Affairs & Research, coordinates work on these and other projects. Much of this was initiated prior to my arrival under the leadership of our past Chief of Staff, Dr. Silvana Spadafora, and interim Chief of Staff, Dr. Mohammad Rassouli. I am very appreciative of their wisdom and leadership, but also for the kindness they have shown to me in helping me get settled in my new role. I met Dr. Heather O'Brien, an anesthesiologist and former Chief of Staff, and Dr. David Berry, a nephrologist and Chief of nephrology, during my first week here. I also appreciate the support they have provided. I feel very privileged to work with a dedicated group of medical leaders. I am confident that with the addition of Dr. Stephen Smith, our new Vice President of Medical Affairs, we will continue to innovate, adapt and lead further advances in quality care.

My second group of partners is our hospital Senior Leadership Team (SLT). Led by our CEO, Ila, this group of Vice Presidents and myself meet every Wednesday morning for three (3) hours. My understanding of our work at SLT is to efficiently and effectively ensure that all

aspects of the organization, from parking to laundry to staffing, are in place and well-functioning so that the clinical teams can focus on what they enjoy and do best, providing the highest quality of care to our patients. The SLT also sets and models standards for the organization, which I am most impressed with, and I see it being lived out every day. Smile & greet people when walking down the hall, help people find their way by walking with them to their destination, and keep the facility clean by picking up debris. This is the cleanest and most welcoming hospital I have ever worked in. The SLT also sets a high standard for an organized and detail-driven approach to our work and is well supported by extremely well-organized project management & data analytics teams.

This is also the most organized hospital that I have worked at. The SLT also believes strongly in 'rounding,' going out to meet and listen to the staff who do the work, not just clinical staff, but all staff. So with my colleagues Greg & Shauna and facilities Director Devon Clark, I have toured the hospital and spoken with staff from laundry in the basement to heating & cooling on the 4th floor, as well as Human Resources, the lab, pharmacy, Diagnostic Imaging, the ED, OBGYN, Paeds, Renal, ICU, as well as medical and

surgical floors. One very sad day a few weeks ago, I went to the OR as they grieved the unexpected passing of Dr. Scott Morrison, a greatly missed colleague.

Other SLT members include Sue, our VP and Chief Nursing Executive, and Mindy, our VP of Clinical Operations, whom I spent much time with as I began my work here. They have had key roles in large and important patient care projects such as the opening of our second cardiac cath lab (an impressive accomplishment to provide state-of-the-art and often lifesaving cardiac care for our community) and the replacement and updating of our linear accelerator in our Cancer Centre so that we can continue to provide high-quality radiation therapy locally. They also work tirelessly each day to help us meet the daily challenge of providing care in a very busy emergency department.

The ED is truly the front door of the hospital, and understandably, its performance is of great interest and importance to our community. I am impressed with the dedication to patients and the kind & friendly manner that I have seen and heard about in our ED manager, Sharon, and the nursing and support staff there. Although wait times can be long, which is a challenge and

opportunity that we will work toward improving, we receive so many appreciative comments from patients and families regarding the compassionate and knowledgeable care provided to them. I also note the excellent work of the ED Chief, Dr. Smith, and soon-to-be interim Chief, Dr. Solomon. Not only have they kept our ED fully staffed, but their group often assists in other regional EDs, and they have worked with provincial partners to secure additional temporary funding to increase physician capacity in anticipation of possible increased patient visits secondary to the primary care challenges facing our community.

My third group of partners is the Medical Affairs team. Led by our Director Dr. James Chan, this is a collection of individuals with very specific skill sets. Carrie, our physician recruiter; Stephanie, our Locum Coordinator, who almost literally brings us physicians from southern Ontario and elsewhere to help fill schedule gaps so important services are maintained on weekends and holidays; Lydia in credentialing, who helps our Credentials Committee and the MAC ensure that we are bringing physicians to SAH that have appropriate knowledge, skills, experience and are also good human beings; and Ian our medical

student/NOSM coordinator as training our doctors of the future is vital to the health of this hospital and community. An example of this good work is that we matched all of our five (5) family medicine residency positions with local medical students this spring. Finally, Alison, my Executive Assistant, is one of the most capable and efficient people I have ever met in health care, without whom I would have accomplished very little in my first six (6) months. Our Medical Affairs team will continue to work together to support our physicians and advance new initiatives of importance to them, such as a physician mentorship program & research activities. We will continue our work in developing and refining processes and policies to help set the standard for medical care delivery. We will set the bar high, but we will approach working with our physicians with humility and fairness, as well as firmness when required.

My fourth group of partners is the medical staff. At SAH, we have 177 active/associate medical staff and 126 locum staff. Many of our physicians routinely travel from southern Ontario in all kinds of weather to provide care to our community. Some, such as Dr. Kutryk (Chief of Cardiology) and his group from Toronto's St. Michael's Hospital, have been doing this

for years, and we could not maintain our comprehensive cardiology services without them. The medical staff has an association – the MSA, led by President Dr. Russell Tull, Vice President Dr. Lorraine Sharp, Secretary Dr. Brynlea Barbeau and Treasurer Dr. Jim Boseovski. I have enjoyed getting to know this enthusiastic group and look forward to working with them this upcoming year on projects important to physicians, such as leadership development, physician mentorship & wellness activities.

The Sault is fortunate to have such a talented and committed group of physicians at SAH and at GHC under the leadership of Dr. Jodie Stewart and the Superior Family Health Team led by Dr. Al McLean. I appreciate the opportunity to build connections with these two leaders and their teams. Continued collaboration between hospitals and primary care services is a must to lead our community through a myriad of healthcare challenges. MPP Romano deserves special note for his involvement and advocacy. Later in our program, we will recognize the accomplishments of two (2) physicians at SAH. The accolades you will hear are well deserved, and I thank them for their high-quality work.

I spent my first-month eating

lunch in the physician lounge every Wednesday and met many physicians there. Many commented on how well they work together and help each other. One told me, "This is the best hospital I have ever worked at." I think we should all be proud of that.

One physician I met was Dr. Bob Maloney, a family physician who now works in addiction services. I have toured several of our addiction treatment sites, including our Northway facility, which, as I said at a recent Board meeting, is a facility second to none. I was so impressed with the welcoming, respectful environment and the dedication of the staff to working with patients and their families when

and how they are ready.

Despite taking more time than planned, I have barely scratched the surface of what and whom I could acknowledge. To those that I did not have time to mention, you also have my admiration and respect for the work you do at SAH.

As a child & adolescent psychiatrist, I will conclude by thanking Katherine George, the mental health outpatient Manager and all the members of the outpatient team who helped me start my Monday clinic. I love being a child psychiatrist, and I am grateful to be able to practice in my hometown.

My final thanks go to Ms. Lisa Bell-Murray, our Board Chair.

**"Our community is fortunate to have such a talented and committed group of physicians not only at Sault Area Hospital but the Group Health Centre and the Superior Family Health Team. I appreciate the opportunity to build connections with their leadership and their teams. Continued collaboration between hospital and primary care services is a must to lead our community through a myriad of health care challenges."**

**- Dr. John Heintzman, Chief of Staff**

Lisa, thank you for giving me this opportunity and for setting a tone of mutual respect with our hospital Board as we work together to lead healthcare in our community. I very much enjoy being the Chief of Staff, and my wife Heather and I are so glad to be back home in the Sault with our families and all of you.

Thank you.



## Board Chair Report

Lisa Bell-Murray, Board Chair

It is my distinct pleasure to welcome you to the Annual Meeting for Sault Area Hospital, covering the period from April 2023 to March 2024. As the Chair of the Board of Directors, I cannot express enough to you the immense pride and gratitude I and our board have for our entire hospital community's collective efforts and accomplishments over the past year. You will hear from everyone tonight about the numerous and meaningful accomplishments over the past year.

Our board is a committed, skills-based entity steadfast

in our dedication to Sault Area Hospital's mission and vision. In today's healthcare landscape, governing a public hospital board in Ontario presents numerous challenges. The constant flux in policies, funding uncertainties, and our community's evolving needs have required us to be adaptable and resilient. Despite these challenges, we have expanded our understanding of hospital operations and their inherent complexities.

Enhancing our governance practices has been a critical focus. We have rigorously challenged management and ourselves as a Board, ensuring that decisions are made with the highest level of scrutiny and accountability. This has allowed us to learn and sharpen our focus on our role in governance, gaining a comprehensive understanding of the broader healthcare system. Our goal has always been to ensure that, despite the uncertainties, the services provided to our community remain uninterrupted and of the highest quality.

This year has offered many opportunities for board members to witness the unwavering dedication of SAH staff, physicians, and volunteers. Your commitment and hard work have been nothing short of inspiring. We are, however, acutely aware of the ongoing

concerns regarding health human resources. Addressing these challenges remains a top priority, as the well-being and availability of our healthcare professionals is crucial to our communities.

The SAH board also has an opportunity to engage in meaningful, collaborative conversations with other community boards. These dialogues are essential for fostering a unified approach to addressing healthcare challenges and ensuring that our strategies are aligned with the needs of the wider community.

Diversity, Equity, and Inclusion (DEI) have been prominent on our agenda this year. At the board level, we have worked diligently to ensure that our leadership reflects the diverse community we serve. This commitment to DEI fosters a culture of inclusivity and respect, which is crucial for our organization's overall health and success.

The SAH Board's recent recruitment efforts represent a significant initiative to seek new board members from diverse backgrounds. This strategic endeavour underscores our commitment to fostering inclusivity and enhancing the breadth of perspectives of our leadership. By actively reaching out to individuals from varied

professional and demographic backgrounds, we aimed to enrich the board with fresh insights and innovative ideas, ensuring that our hospital continues to grow and thrive in a dynamic and inclusive manner. This inclusive recruitment strategy positions us to better serve our community and stakeholders in an increasingly diverse community.

I want to take this moment to recognize and thank our board committees, including the resource, medical advisory, and quality committees. The work done within these committees is vital, and it is thanks to the dedication of many individuals, we continue to advance our goals.

I would like to extend a heartfelt thank you to Dr. Spadafora and Dr. Rassouli for their exemplary service as Chief of Staff. Their contributions have been invaluable, and we are fortunate to have achieved leadership stability with the appointment of Dr. John Heintzman as our new Chief of Staff. I also want to express our unwavering confidence in Ila Watson, our President and CEO, whose leadership continues to guide us with vision and strength.

One of the most rewarding aspects of this year has been the return to in-person meetings. These interactions have been invaluable in building stronger

relationships and fostering a deeper connection to the essential work of the hospital. The personal interactions have enriched our understanding and allowed us to better align our strategies with the needs of those we serve.

In the face of challenges related to the social determinants of health, the reliance on SAH in our communities is vast and deeply felt. As a board, we recognize that our role extends beyond the confines of the hospital walls. We are committed to supporting integrated healthcare solutions, understanding that our impact must encompass long-term care, home care, and community services. Our decision-making processes are informed by a community perspective, ensuring we are responsive to immediate needs and proactive in addressing system issues.

We are incredibly proud of our iCcare and Hutchinson Award winners. These awards highlight the dedication and excellence of our staff, and we look forward to learning more about the individuals nominated and awarded. Our hospital is nothing without its people, and their commitment to excellence drives us forward.

I want to thank our senior leaders, Sue Roger, Mindy Lindstedt, Greg Zambusi, Shauna Hynna, and our executive

assistants, Jennifer Doyle, Alison Pook, and Patti Armstrong. Your work researching, preparing, facilitating, and supporting our board members and committee meetings is invaluable and deeply appreciated. A special thank you to our board committee chairs, Johanne Messier Mann and Armand Capisciolto, for their leadership and dedication.

To the entire Board, thank you for your unwavering commitment and dedication to SAH.

A heartfelt thank you to the Sault Area Hospital Foundation Board and staff for your significant role in fundraising for the essential capital equipment needed for patient care.

Lastly, to our staff, physicians, and volunteers, your relentless pursuit of providing quality, safe care is genuinely commendable.

It takes a village, and indeed, it is this collective effort that drives us toward achieving our vision:

Trusted Partner. Outstanding Care.

And advancing our mission:

Exceptional people working together to provide outstanding care in Algoma.

Thank you.

**“Enhancing our governance practices has been a critical focus. We have rigorously challenged management and ourselves as a Board, ensuring that decisions are made with the highest level of scrutiny and accountability. This has allowed us to learn and sharpen our focus on our role in governance, gaining a comprehensive understanding of the broader healthcare system. Our goal has always been to ensure that, despite the uncertainties, the services provided to our community remain uninterrupted and of the highest quality.”**

**- Lisa Bell-Murray, Board Chair**

**Trusted Partner.**

**Outstanding Care.**

