

# Community Connection



## Annual Report To The Community 2016/2017

*Leading, Learning,  
Caring For You*

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### Past Year's Achievements Were Product Of Hard-Working Health Care Team & Partners



**Pierre Noel**  
President and CEO

It's been said that nothing worth having comes easy, and in fact, some of the most satisfying accomplishments are born from a tremendous amount of work done by many engaged and dedicated teams and individuals.

This is true in health care where we are constantly challenged by our circumstances; a desire to be forward-thinking, innovative and advanced in terms of the programs and services we offer to those in our care, while working within a limited budget and with limited resources.

And as an organization, we often set our sights on goals which, by nature, are challenging; those through which we will improve the health care services in our region and ultimately achieve our hospital's vision of "delivering the safest and highest quality of care to every person, every encounter, everyday."

Bringing a full service orthopaedic program to Pembroke Regional Hospital was one of those goals and one of our most significant achievements of the past year – an initiative which has been in the works for a number of years, and one which took a great deal of planning and preparation to bring to fruition.

The addition of this program to our surgical offerings is part of a larger Champlain LHIN (Local Health Integration Network) strategy to build a coordinated, integrated and accountable health system for people across the region, where and when they need it. **Continued on Page 4**



**Your Hospital,  
Caring For You!**

### PRH Professional Staff Experience Change, Growth and Engagement In Past Year

Health care is often characterized by change: the dynamic needs of our patients combined with innovative treatments lead to continuous adaptation, learning and growth. The professional staff of the Pembroke Regional Hospital stand out in their dedication to provide quality care and their commitment to improving the lives of those in our community. As we work together to embrace change, our team becomes even stronger in the goal of helping those in need.

During these first few months as Chief of Staff, I have been inspired by our staff as I explore my new role. I hope to take on the challenges and expectations of this position with the same optimistic, forward-thinking approach that our staff presents each and every day. I am deeply grateful for the solid foundation



**Dr. Tom Hurley**  
Chief of Staff

laid down by my predecessor, Dr. Mike Ferri. His leadership over the past 12 years has filled our hospital with motivation and encouraged all of us to perform at our best. Thank you, Dr. Ferri, for your mentorship, confidence, and integrity. I will do my best to fill these shoes.

The most exciting recent change at the PRH and within our region, is the return of operative orthopaedics. Our community has been well-served by visiting orthopaedic surgeons, Dr. Douglas Ritter, Dr. Sanjeev Sharma and Dr. Cyril Hradecky, who provided consultation and non-operative care. However, patients who required surgical intervention had to travel, primarily to Ottawa.

**Continued on Page 3**

#### Our Mission, Vision

**Leading, Learning, Caring.....For You**

**MISSION:** We are a regional community hospital committed to delivering a wide range of quality health services. Following Catholic tradition, we will meet the physical, emotional, and spiritual needs of all.

**VISION:** Delivering the safest and highest quality of care to every person, every encounter, every day

#### Our Values

Compassion and Caring	Excellence and Innovation	Social and Fiscal Responsibility	Sacredness of Life	Mutual Respect	Community Spirit
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### PRH Board of Directors 2016/2017



Seated, from left, Sheila Clarke (CHSO), Heather Ball (Vice-Chair), Wayne TerMarsch (Chair), Garry Yaraskavitch (Vice-Chair) and Pierre Noel (President and CEO).

Standing, from left, Kelly Hollihan (Past Chair), Francois Lemaire (CNE), Daniel Burke, Mitchell Stillman, Diana Gagne (Auxiliary President), Frank Christinck, Kim Drake, David Unrau (community rep), Dean Sauriol and Richard Wilson.

Missing from photo: Dr. Scott Murray (President of Professional Staff), Barbara Schoof (Foundation Chair), Dr. Tom Hurley (Chief of Staff) and community representatives on Board committees Michael Corrigan, Linda Fuller, Rebecca Paulsen, and Brenda Lammi.





# Annual Report

April 1<sup>st</sup>, 2016 — March 31<sup>st</sup>, 2017

Pembroke Regional Hospital Foundation



Fondation de l'Hôpital Régional de Pembroke

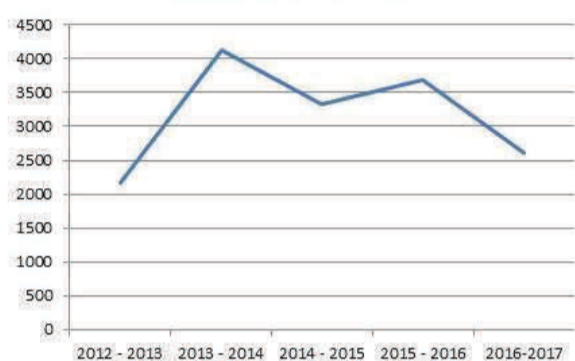
Our local communities hold the health of their citizens in high importance and our Foundation is privileged to work alongside local families, businesses and organizations to bring state-of-the-art services to our regional hospital and our region's families. Together we raised almost \$500,000 this year which is a commendable achievement, although below the 2015-16 fiscal year. Given the completion of a robust MRI campaign in 2015, the decreased revenue is understandable. As we regroup, the focus of our fundraising efforts over the next four years will include Orthopaedic equipment reimbursement and reconstruction of the Circa 1950 Surgical Floor. For this \$11.5M project we will be working with community partners to raise \$2.5M. When considering your charitable giving, we hope that you will make your local health care a priority. Thank you to everyone who invests in our hospital. Be proud of what we have accomplished together and excited about what is to come.

- *Kim Drake, PRH Foundation Treasurer & Nancy Warren, PRH Foundation Executive Director*

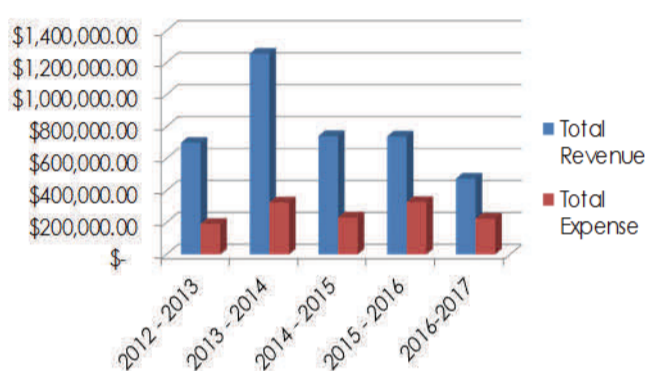
## FINANCIAL OPERATIONS SUMMARY

April 1st 2016—March 31st 2017

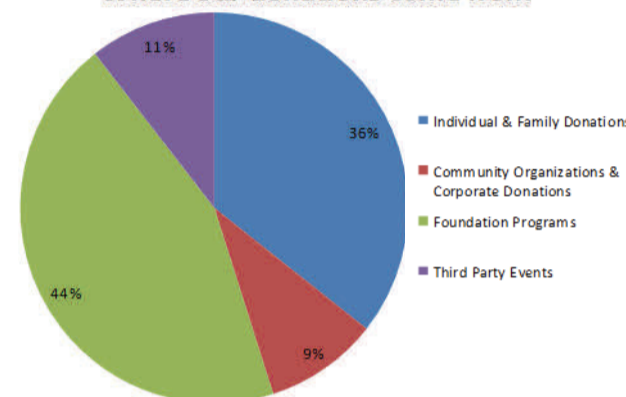
Donations Per Year



Revenue and Expenses



Where our donations come from



## WE ARE HONOURED TO HAVE RECEIVED GIFTS IN MEMORY OF OUR COMMUNITY MEMBERS

Adriano Lovisa	Dan Brumm	Eileen Lavigne	Irene Coburn	Lakshmi Srinivasan	Margaret Lepine	Raymond Hurley	Shirley McCumber
Agnes Desjardins	Dan Rennick	Emgard Borne	Isabell Wilson	Lauretta E. Kunkel	Mary Fraser	Robert Clouthier	Shirley Mohns
Aldena Leek	David Boucher	Garda Pilatzke	James Raymond Smith	Leonard Surtees	Mary Goulet	Ray Smith	Teresa Conroy
Amelia McGuire	Dean Fitzpatrick	George Sullivan	James Winton	Liliane Proulx	Maurice Bissonnette	Reginald Hoffman	Theresa Marie McConnell
Arlene Nighbor	Denise Huppert	Gordon Murphy	Jean M. McLaughlin	Loella Trimm	Michael Scharff	Richard Blanchard	Valerie Thrasher
Bernice McCoy	Dianne St. Pierre-Spencer	Guenther Lellwitz	Jerry Harrington	Lois Grattan	Monte Neadow	Rita Eckersley	Velma McBride
Bob Bucknell	Dinie Gerrits	Henry Bradley	Jim Sterling	Loretta Graham	Monty Stewart	Rita Elliott	Victor Maves
Bonnie McConnell	Doreen Boldt	Helen McGovern	Joey Dashnay	Lucille Sullivan	Marie Jennings	Robert Reinke	Victoria Swan
Bruce Hamilton	Dorothy Francis	Helen Parker	John Proulx	Lyla Holmes	Olive Arsenault	Roland Junop	Welland Charkavi
Bryan Kenny	Douglas Soule	Henry Christinck	Dr. Joseph O. Foohy	Madelaine Clouthier	Patricia Bergsma	Rudi Stiege	Willy Buchman
Caden Edwards	Drusella Radway	Howard Gagnon	Joseph Tallon	Madeline M. Bucholtz	Pearl Johnston	Sadie Simpson	Yvonne Phillon
Clifford Lloyd		Howard Griese	Kenneth Lautsch	Maia B. Popke	Raymond Chaput	Sally Rafuse	

## COMMUNITY ORGANIZATIONS AND BUSINESS DONORS (OVER \$1,000) FROM 04/16 TO 03/17

Air Canada Foundation	Malcolm, Deavitt & Binhammer Ltd.
Assante Financial Management Ltd.	Manulife
Bank of Montreal	McKinnon Family Fund at the Calgary Foundation
Black Bears Hockey Club	Mulvihill Drug Mart Ltd.
Borden, Ladner, Gervais LLP	My Tribute Gift Foundation
Canadian Tire Associate Store	Nutrition House/Integrated Health Centre
Century 21 Neville Realty Ltd.	Otsuka Canada Pharmaceuticals Inc.
Cobden & District Civitan Club	Paramount Kitchens
Custom Draperies and Blinds	Petawawa Physiotherapy & Sports Injury Clinic
EGM Insurance	PRH Staff Association
Emond Hamden LLP	RBC Dominion Securities
Frances M Lemke Insurance Services Ltd.	RBC Foundation
Frank Carroll Financial	Remax Pembroke Realty Inc.
Gallant Media	R.G.T. Clouthier Construction Ltd.
Government of Canada	Roy & Associates
Great West Life Assurance Company	RY-J's Climbing Adventures
Helferty Disaster Restoration Cleaning Services	Sandstone Imports
Holiday Inn Express Pembroke	Scotiabank
Huckabone O'Brien Instance Bradley & Lyle	Smitty's Home Hardware
Hyundai Pembroke	SRB Technologies Inc.
JJ's Pizza Palace Ltd.	Star-Set Jewellers
Kelly & Kelly Lawyers Professional Corporation	TD Bank
Knights of Columbus Council 1531	Valley Automotive Pembroke
MacEwen Petroleum Inc.	Westland Auto Sales Ltd.

## LEAVING A LEGACY THAT STRENGTHENS OUR COMMUNITY

It is difficult to talk about Wills and Bequests as this is usually a very private conversation that someone has with their lawyer or financial planner. A significant portion of our revenue comes from Estate Gifts and we would like to applaud our generous Legacy donors who had the foresight to know that their thoughtful gift would impact the community and the lives of friends and family today and for generations to follow.

### Tribute to Dr. Joseph Foohy

Dr. Joseph Foohy was one of the most beloved and respected doctors in the Ottawa Valley, renowned for his kind heart and giving nature. During his lengthy career which spanned over six decades, Dr. Foohy delivered over 5,000 babies and was the Chief of Obstetrics for many years. He had a stellar reputation not only as a great doctor, but as a mentor and role model for many other physicians in our area and beyond.

Through Dr. Foohy's dedication to his practice and his generous bequest, he leaves a legacy to our community that will support local families today and for years to come.



## SAVE THE DATES!

Holiday Inn Express Turkey Trot (NEW DATE): September 30th  
Black and White Gala 150: October 14th





## PRH Auxiliary Support Hospital Financially And Through Much-Appreciated Amenities



**Diana Gagne**  
Auxiliary President

Another year has passed and our volunteers have worked very hard in the Sunshine Gift Shop and Mural Café. They have also continued to show dedication to our other fundraising initiatives including BINGO at the Boardwalk Gaming Centre (which raised \$15,000 in the past year), HELPP lottery ticket sales and our TV rental program for patients.

Two significant achievements of the past year included the purchase of new TVs for all patient rooms and making the final payments on our one million dollar commitment for the MRI.

Most recently, the Auxiliary also announced its newest fundraising pledge, \$500,000 in support of the equipment costs for the new Orthopaedics program and for planned upgrades that are about to be made to the in-patient Surgical floor. While this commitment is being made in the form of a pledge to be fulfilled over a five-year period, we are hoping we may be able to pay it off sooner, especially with the ongoing fundraising success in our retail locations.

With Brenda Long at the helm of The Sunshine Gift Shop, we continue to see new product lines and merchandise that attract a lot of attention, so much so that she has even sold items right in the hallway near our storeroom while she's counting and marking new items!

After two very successful fashions shows held at the Carefor Mackay Centre in 2016, we opted to move this year's spring event to the Our Lady of Lourdes Church Hall which enabled us to host a larger audience. This, combined with a next day sale at the shop for ticket holders proved to be a good formula as we took in \$10,000 over the two days.

The Mural Café continues to be a much-appreciated hospital amenity by patients, visitors and staff as its hours were recently expanded to include weekend service from 11 a.m. to 3 p.m. Additionally those who run the café continue to seek out healthier choices in terms of its offerings.

Thank you to our many volunteers. Without them, it would be very difficult to achieve our goals in terms of supporting the hospital and making a difference while promoting quality health care in our community.



### 2016 / 2017 Executive

Diana Gagne (President), Anne Sloan (Past-President),  
Gail Arsenault (1st Vice-President),  
Pierre Noel (Honorary President and CEO), Helene Giroux (Treasurer),  
Harlene Buske (Secretary), Jane Kielman (Membership),  
Brenda Long (Sunshine Gift Shop Manager),  
Donna Rielly (Gift Shop Schedulers),  
Diana Gagne, Pat Bennett and Pam Lavoie (Mural Café Managers),  
Gail Aresenault (Mural Café Scheduler),  
Virginia Naylor (Special Events Phoning), Carmel Harrington (Spiritual),  
Managers of Special Funds & Licencing:  
Mary Olsheskie (HELPP Tickets), Larry TerMarsch (Bingo),  
Brenda Reid (Bingo Scheduler)

## Our Senior Leadership Team

From left to right:

Vice-President Finance and Corporate Services - Chief Financial Officer / Chief Information Officer **John Wren**,

Vice-President Patient Services - Seniors and Community Care **Sabine Mersmann**,

President and CEO **Pierre Noel**,

Vice-President Patient Services - Acute Care and Chief Nursing Executive **Francois Lemaire** and

Chief of Staff **Dr. Tom Hurley**,



## Professional Staff Experience Positive Change...Continued (From Front Page)

The arrival of Dr. Chris de Jesus, Dr. Natasha Holder and Dr. Ingrid Radovanovic adds three excellent surgeons to our staff, and with the support of energetic and well-trained personnel, the PRH is now able to provide full-service orthopaedic care in Renfrew County. The program is already exceptionally busy. Over the May long weekend alone, nine emergency orthopaedic surgeries were performed and in its first year, the new program is on track to provide more than 250 joint replacements.

As we move forward, the face of our hospital is further transformed by comings and goings. It was with sadness that our surgical team bid farewell to Dr. Scott Graham as he moved on to Brockville. Dr. Graham was a leader in our general surgery program. He completed two terms as Chief of Surgery, in addition to serving as President of Professional Staff. Dr. Graham's dedication to the hospital was noted and appreciated by all. We wish him the best in his new role.

Change is also coming to urology. As Dr. Scott Murray moves toward retirement, we have entered into an agreement with The Ottawa Hospital to ensure the continuation and smooth expansion of urological services being offered in Pembroke. Together with The Ottawa Hospital (TOH), we are currently recruiting a urologist who will work at PRH while being supported by TOH.

Family medicine and general practice within the hospital is also evolving. The vast majority of inpatients are now cared for by one of our 10 hospitalists. This is a group of primary care

physicians who invest their time in providing care to admitted patients. Such programs are becoming standard across the province as family physicians become increasingly occupied with office-based practices and community care.

Despite their own commitments however, two local family physicians, Dr. Fahamia Koudra and Dr. Rachel Denis, joined Dr. Brian Baxter in making time to assist with obstetrical care. Dr. Koudra and Dr. Denis will soon be managing their own patients through labour and delivery. This means that the women of Renfrew County will now have access to three obstetricians, as well as four local midwives, and three family physicians providing obstetrical care.

While necessary changes have been made in some clinical programs, other areas have begun to see stability. For example, our emergency department has sustained many improvements in recent years, leading to reduced wait times without compromising exceptional care. Our internal medicine and rehabilitation programs continue to represent the bulk of inpatient care. Both of these programs continue to strive ahead with new therapies. As an example, we hope to expand our stroke program by developing increased rapid assessment measures and enabling immediate transfer of those who would benefit from endovascular treatment of stroke.

I've also been excited and encouraged to see that while the valued members of our professional staff are diligently bustling with direct patient care, many physicians have chosen to become actively

engaged in the development of hospital programs and strategy. To this end we continue to spread the Lean management principles throughout our organization. This methodology is based on empowering those at the grassroots level to suggest and lead change. The physician-based initiative to ensure that antibiotics are being issued appropriately illustrates this concept. All members of the professional staff acknowledge that these medications have been overprescribed in the past. Along with pharmacist and specialist support, we have taken a renewed effort to scrutinize our own prescribing practices and guarantee the best care to our patients.

As we come to understand the new changes prevalent at our hospital, we rely on one another to learn, grow, and adapt to what's going on around us. Behind the scenes, medical personnel are fortified by the outstanding team in the Medical Affairs department. My transition into the role of Chief of Staff has been made much easier due to the insight, patience, and knowledge of Nancy Schroeder, Dinah Fleury and Rita Amodeo. I am very thankful to this group for their tireless assistance.

Change is inevitable, but progress is optional. As we continue into the next year, I look forward to flourishing along with all of our hospital staff. Our community will benefit greatly from the advancements made at our hospital. Together we will strive to develop and extend the best possible care closer to home.



## Past Year's Achievements Were Product Of...Continued (From Front Page)

Previously, anyone presenting at one of the emergency departments in Renfrew County with an injury requiring orthopaedic consultation was referred directly to Ottawa. Now, high quality, 24/7 orthopaedic coverage for trauma, elective orthopaedic care, and an orthopaedic clinic for such services as casts and x-rays, are available right in our community. Clearly this represents a huge leap forward in terms of access to high quality care closer to home.



**Orthopaedic surgeons Dr. Chris de Jesus, Dr. Natasha Holder and Dr. Ingrid Radovanovic**

Also in the surgical realm, a great deal of behind-the-scenes work has taken place this past year on the hospital's \$10 million provincially approved capital project to modernize the inpatient surgical unit and day surgery space.

Once complete, these upgrades will include a new Surgical Day Care area with 12 recovery stations, four new private inpatient suites along with upgrades to existing rooms, a new family lounge, as well as other space improvements. All of which will provide additional comfort and improved space for our surgical patients.

In support of this project, the Pembroke Regional Hospital Foundation will be launching a \$2.5 million fundraising campaign to raise the "local share" of the financing which amounts to one million in construction costs in addition to \$1.5 million for new furnishings and equipment for which there is no provincial funding.

The PRH Auxiliary has already announced its commitment of \$500,000 to the project, representing a solid start to this effort

Often, to achieve ambitious goals, partnerships with others of similar mindset are not only required, but welcomed and beneficial to all involved. As you will note in this report, we have accomplished much with our partners including some of the initiatives highlighted below.

For instance, last fall, our District Stroke Centre partnered with the County of Renfrew Paramedic Service to roll out a new best practice model of care which has helped decrease what's known as "door to needle time" for our stroke patients arriving in our Emergency department. By keeping patients on the ambulance stretchers during the initial assessment period rather than transferring them to a hospital bed or stretcher, critical time is saved and ultimately, "door to needle time" for those who are eligible to receive a clot-busting drug used to treat certain types of strokes can be reduced to as little as 30 minutes.

As well, ten years of partnership with the University of Ottawa Heart Institute in the implementation of their Ottawa Model for Smoking Cessation was recognized this past year. This program has enabled 7,300 smokers to be reached through personalized, best practice tobacco dependence treatment, resulting in increased quit attempts and long-term cessation. More importantly, an estimated 2,200 smokers are now smoke-free as a result of the support they received while at PRH.

And, collaboration with the Trillium Gift of Life Network was recognized this past year in the form of an achievement award for our dedication to organ and tissue donation in Ontario. PRH received the Provincial Routine Notification Award for consistently maintaining a 100 per cent routine

notification rate or the rate at which hospitals notify TGLN when a patient has died and there may be potential for organ and/or tissue donation. Considering there are 1,500 people in Ontario alone waiting for a life-saving organ transplant, we recognize the potential and therapeutic value to recipients and bereaved families who give consent to organ and tissue donation as well as its place as an integral part of quality end-of-life care.

Earlier this spring, close to 200 people attended a public presentation hosted by Mental Health Services of Renfrew County, a program administered by PRH. Featuring a keynote speaker, several panelists and information displays from regional support agencies, this first-time event demonstrated a clear need for information, collaboration and expanded resources in the area in mental health care. It was noted that while provincial dollars are being invested regionally for mental health services, more collaboration is needed and upcoming initiatives to address service gaps will certainly provide new opportunities for partnerships in this important area.



**MHS panelists Dr. Pat Deegan, Paul McIntyre, August Mcrea and Sabine Mersmann.**

At the end of the day, working with our partners clearly enables us to move forward and to do more than we could otherwise do on our own.

I hope you enjoy reading the rest of this report to our community and to learn first hand about the many achievements your local hospital has accomplished over the course of the past year.

## Quality Improvement At Pembroke Regional Hospital 2016/2017

Using the Lean Management System, quality improvements at PRH are made on a daily basis. Annually, strategic goals for the hospital are identified and shared with the health care team. In 2016/2017 those goals were: Improve the Patient and Family Experience; Reduce Hospital Acquired C. Difficile; Reduce the Readmission Rate for Patients with Congestive Heart Failure and Improve our Attendance Management Practices.

As we continue on our Lean journey at Pembroke Regional Hospital, 14 departments have now completed their Lean Management training. Through regular status updates and process improvement huddles, we are also engaging our staff and physicians in daily discussions about their ideas to improve the patient and family experience and services we provide, quality and safety, working together and financial stewardship. These focused improvement discussions are helping us to align our efforts across departments to support the work that needs to be done in order to achieve our annual hospital goals.

**Our teams and departments have worked to support these goals. Here's a sample of some of the goal-oriented initiatives from the past year:**

### Goal: Patient and Family Experience

#### Acute Mental Health

- Installation of comment a card box in the patient lounge.
- Redesign of a program-specific AMH handbook to include detailed information about what to expect as an inpatient on AMH.



- In the works for 2017: the redesign of a quiet space for patients for reading, education and other quiet activities as recommended through patient and family feedback.

#### Diagnostic Imaging

- Worked with members of the Patient and Family Advisory Council and Plant Services to improve the signage and wayfinding in the department.
- Worked with the ED to establish an Ultrasound turnaround time service standard of three hours during regular business hours to reduce wait times for ED patients.

#### Emergency Department

- Introduced comment cards for every ED patient. Cards are read to staff daily and improvement

ideas are actioned through the Lean Huddle improvement system. If a phone number is included on the card, a staff member calls the patient within 24-48 hours to follow-up.

#### Health Records

- Improvements were made to the hospital's voice recognition system in collaboration with IT so that when patients call into the hospital, they are able to reach the physician or department they want the first time they ask.

#### Maternal Child Care

- Worked with the Lab to enable babies to have blood draws/picks while breast feeding or held skin to skin by a parent to improve the baby's comfort.
- Implemented a new best practice process in the Operating Room to ensure moms who deliver their baby by cesarean section have the chance to hold baby skin to skin immediately after the procedure for a two-hour uninterrupted period which promotes bonding. Through this technique, babies have greater respiratory, temperature, and glucose stability and significantly less crying indicating decreased stress while mothers have increased maternal behaviours, show more confidence in caring for their babies and breastfeed for longer durations.



#### Medical

- Initiated in-room rounding involving the patient, family and health care teams on both Medical floors to review discharge goals, home supports that are currently available, and community referrals that may be needed.

#### Rehabilitation

- Created a patient therapy schedule that is posted in each patient room for physiotherapy, occupational therapy, speech language pathology, exercise class in order to improve communication and better manage therapy time.

### Goal: Reduce Hospital Acquired C. Difficile

#### Infection Prevention and Control

- Worked with the Lab to improve the process for getting microbiology reports onto our patient charts in a timely manner for review by our physicians. To achieve this, the nurses working in the Infection Prevention and Control program now pick up these reports and place them on the patient charts each day. The team also developed an assessment form to help identify patients who might not require antibiotics. The nurses communicate their findings with the physicians. From August 2016 to March 2017, the team flagged 41 patient for review and were successful in stopping antibiotic usage for 22 of these patients.



## Quality Improvement At PRH 2016/2017...Continued

*Goal: Reduce Readmission Rates*

### Heart Function Clinic (Vascular Health)

- Implemented a process to ensure that inpatients with Congestive Heart Failure are visited by a nurse from the Vascular Health program before they are discharged in order to provide patient teaching and help reduce unnecessary readmission to hospital. They also conducted education sessions for nurses and physicians to improve the referral process to the Heart Function Outpatient Clinic at PRH.

### Information Technology

- Collaborated with the Petawawa Family Health Team to improve access

to patient information for timely follow-up appointments with patients after they are discharged from hospital.

### Medical

- Purchased new weigh scales to assist with teaching patients who have a diagnosis of Congestive Heart Failure how to take daily weights.

### Pharmacy

- Worked with IT and the hospitalists to develop an electronic tool for medication reconciliation at discharge.

**Some examples of strategic initiatives and projects from the past year that involved equipment upgrades or work with community partners.**

### Emergency Department / Intensive Care Unit

- In partnership with Information Technology, a new compact, portable, state-of-the-art Spacelabs monitoring system with new and improved monitoring capabilities was installed in the ED and ICU at a cost of \$1 million. The portability of the monitoring system allows for enhanced and fluent transfer from the ED to ICU during critical circumstances. The new system also includes additional clinical support for care providers in cardiac rhythm interpretation, ECG studies, adverse alarm notification and documentation.

### Homes for Special Care

- Funded by the Ministry of Health and Long-Term Care and developed in partnership with Mental Health Services for Renfrew County and Carefor, the Carefor-Mackay Housing project supports 10 mental health clients who are at risk of homelessness. These clients live on the third floor of the Carefor-Mackay residence and, together with Carefor, are supported by MHSRC both on and off site through life skills training, counselling, and education.

### North Renfrew County Health Link

- In 2016, North Renfrew County Health Link, led by PRH, held three governance sessions for senior leadership and board members of health and social service organizations during which funding complexities,

barriers to services and the impact of socio-economic factors on health were discussed. They also discussed the types of collaboration and integration that can better serve the most complex patients in our communities. The 2016/2017 target was exceeded with the identification of 124 Health Link patients who now have Coordinated Care Plans.

Through better collaboration with care providers, patients gain seamless access to the services they need through individual care plans and coordinated support from a tightly knit team that could include doctors, nurses, specialists, hospitals, home care, long-term care and community agencies. The Health Links goals are to improve the health care experience for those with complex needs, reduce unnecessary visits to hospital emergency departments, reduce hospital admissions and decrease overall health care costs.

### Palliative Care

- As part of a collaborative effort to improve end of life care, Palliative Care Rounds occur bi-weekly and provide an opportunity for palliative care providers in the region to plan seamless transitions in care between home, hospital, hospice and palliative care. Recently the team has welcomed Dr. Declan Rowan. PRH has supported additional staff education around palliative care and there has been increased support and utilization of the Regional Palliative Consultation Team by both nurses and physicians for patient pain and symptom management.

**And here are some of the department-based "quick fix" improvements that were implemented.**

### Acute Mental Health

- Patient lockers were installed for storage of personal items.  
- Improved the variety of day-time patient snacks, installed an additional phone on the unit for personal calls and brought in additional musical instruments to be used in the lounge. (All based on patient feedback)

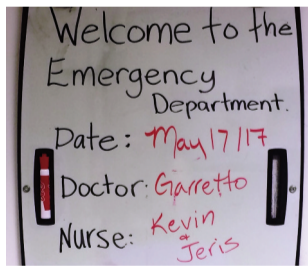
### Ambulatory Clinics

- Installed a call bell in the patient washroom and made the washroom more accessible by adjusting the height of the toilet.  
- Introduced a new patient feedback/comment card system.  
- Installed grab bars by each patient weigh scale to improve safety when getting on and off the scales.

### Diagnostic Imaging

- X-ray and CT coverage for inpatients and those in the Emergency department has been expanded to 24/7.  
- Outpatient X-ray hours have been extended to 9 p.m. daily.

### Emergency Department



- Introduced a new process to ensure outdated handouts are removed from the ED while using new software to print out the most up-to-date education materials for patients.

- Introduced a new centralized whiteboard that lets patients know which physician and nurses are on duty.

### Human Resources

- Collaborated with Blue Lemon Media, IT and Human Resources to develop and launch a new online recruiting portal and applicant tracking system that has dramatically changed how the hospital presents employment and volunteer opportunities to would-be applicants; while allowing for more effective management of entire recruitment process.

### Information Technology

- Developed a hospital-based channel and started producing content for in-room televisions to improve the patient and family experience and assist with patient teaching while in hospital.

### Maternal Child Care

- Revised induction policy to improve patient scheduling. Patients now receive a call from nursing staff letting them know when to come to the hospital which takes into consideration urgent medical conditions, activity in the labour room, and staff to patient ratio.

- Our Maternal Child Care program has made a number of improvements

to the care provided to patients who have experienced perinatal loss. With donated funds, PRH purchased the materials required to make hand and foot castings. Patients also now receive a Certificate of Life which serves as a memento of the day the baby was born.



Standardized processes have been developed for the Emergency department and Surgical Day Care so that patients receive consistent care regardless of which department they are in. All patients who experience a stillbirth receive follow up care by phone within 1-2 weeks of hospital discharge. PRH is also in the process of planning an annual memorial service to honour those babies who have been lost and to offer support to families after they leave the hospital.

### Medical 2A

- The Geriatric Rehabilitation patient information guide was revised to include the Canada Food Guide, a home safety checklist, an activity schedule, "What to Expect" while in hospital and a sample schedule.  
- A "Know Me" sheet was created to help our staff get to know patients who have been diagnosed with dementia.

### Mental Health Services of Renfrew County

- Our Arnprior office was relocated to a new site on Mary Street which offers clients better accessibility. The new location is also co-located with other community partners, facilitating collaboration and client community integration.

### Rehabilitation

- Worked with Dietary to improve the process for placing patient meal orders to ensure patients aren't missed if they are out of their rooms at therapy appointments.

### Surgical

- Improved the signage which identifies the visitor washroom.  
- Improved the nurses' station for effectiveness and ergonomics. The main desk is now fully accessible and modern.





## Patient and Family Advisory Council Adds Tremendous Value To Patient Experience

Since its formation two years ago, the Pembroke Regional Hospital's Patient and Family Advisory Council (PFAC) has made great strides in partnering with staff to provide direct input into programs and practices which affect the patient experience.

When the PRH PFAC was launched in April 2015, it consisted of six patient/family members and four hospital representatives. A half dozen meetings were held over the course of a year with a focus on quality of care and patient satisfaction.

Since then, increased requests for PFAC assistance, some of them through Ministry of Health and Long-Term Care directives have resulted in increased membership to nine patient advisors. Of those, six sit on the Council, one is part of the Acute Mental Health Unit's Leadership Team and one has joined the Emergency Department Leadership Team. In addition, there are advisors on the Senior Friendly Hospital Team, Medical Program Leadership Team and in staff education.

Pembroke resident Shelley TerMarsch is one of those advisors who joined the Council a little over a year ago as a way of giving back to the community in her retirement. "I have always been a strong advocate for PRH, its professionalism and its client-focused approach. Being part of the PFAC gives me more opportunity to share in its accolades and to participate in its problem solving/continuous improvement goals," Mrs. TerMarsch said.

"I've appreciated the opportunities to share my perspectives as well as bring other client experiences forward," she said, adding that she's learned a lot about the behind-the-scenes processes that occur on various levels and feels that she has been able to give a voice to patients and families while driving change.

The evolution of the Council did not come without its challenges however, said PFAC co-chair Sabine Mersmann, Vice-President of Patient Services – Seniors and Community Care. "Initially there was some uncertainty about the role the advisors were to play and how the representatives would all work together, while finding the best way to harness the valuable input they had to offer," Ms. Mersmann said.

"As we moved forward we were pleased to be able to offer this role also as an avenue for patients and family members wishing to do more with concerns they may have raised. We also found staff and regional committees looking to utilize the Council for review and input on a variety of patient-related topics."

Additionally, advisors, through their education about hospital processes, have become knowledgeable ambassadors for PRH within the community. Results of their work and recommendations can be seen implemented in a variety of areas such as signage, website and Welcome Guide redesign,



**Front, from left, Bernie Roosen (Information Technology Director), Nancy Walsh, Trudi Wren (Manager of Risk Management, Policy and Procedures), Barb Schoof, and Kimberly Wolfgram-Schmidt. Back, from left, Laurie Tomasini (Recorder), Richard Sheppard, Beth Brownlee (Director, Medical, Rehabilitation and Ambulatory Care programs), Sabine Mersmann (Vice-President, Patient Services - Seniors and Community Care), Lisa Bradley (Lean Management Coordinator) and David Sloan. Missing from photo: Shelley TerMarsch and Marion Logan.**

the hospital's Accessibility and Quality Improvement plans, patient forms and other communication tools.

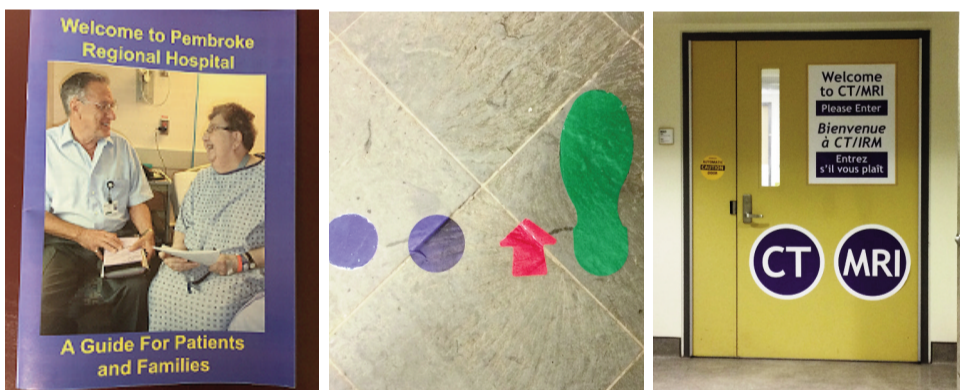
Kim Wolfgram-Schmidt, also from Pembroke has been a Council member since its formation. She chose to join from the perspective of a family member who had some frustrations with previous hospital experiences. "I realized this was an opportunity to be a part of change for the hospital and a voice for the people I love who are using our hospital," Ms. Wolfgram-Schmidt said.

She noted that what was most surprising was that the hospital is aware of some of the frustrations felt by patients and are continually looking for ways to make improvements. "This completely changed my outlook on the whole process from the start as it felt like a collaborative effort – that the hospital genuinely wanted feedback and community involvement," she said.

She added that through her experience on the Council she has gained a deeper understanding of the hospital's inner workings leading to a better understanding of how things that appear to be simple solutions are not always the case in a highly regulated industry. She noted that she now views complaints about hospital services as additional insights into problem solving and that when she hears positive comments or compliments about something at PRH she feels like she has been part of the solution.

"I have learned so much from this group and I've been fortunate enough to see the impact of my efforts and the efforts of our team as they are physically translated to the hospital environment and processes," Ms. Wolfgram-Schmidt said.

If you or someone you know is interested in learning more about being part of the hospital's Patient and Family Advisory Council, please call Sabine Mersmann at (613) 732-2811, extension 6162 or contact her by email at [sabine.mersmann@prh.email](mailto:sabine.mersmann@prh.email).



## PRH By The Numbers (April 1, 2016 to March 31, 2017)

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



**Operating Revenue:**  
\$88,843,000

**Champlain LHIN allocation**  
\$63,300,000

**Other patient care revenue**  
\$20,869,000

**Other revenue**  
\$4,674,000

**Operating Expenses:**  
\$86,469,000

**Salaries**  
\$62,014,000

**Supplies and other expenses**  
\$20,665,000

**Depreciation**  
\$3,790,000

## For 2016/17, The Number Of...

Total Number of Staff **748**

Nurses (RNs and RPNs) **323** Support Staff **276**

Allied Healthcare Professionals **149**

Active and Associate Physicians **54** Auxiliary Members **Close to 200**

Volunteers **86** Volunteer hours **4,928**

Trainees throughout our organization **300+**

Admitted patients **5,613** Emergency Department visits **34,800**

Ambulatory Clinic visits **28,507** Births **700** Surgeries **5,908**

Diagnostic tests **64,331 (Includes 9,226 MRIs and 11,425 CTs)**

New and refilled prescriptions **114,410**

Patient meals **122,640 meals & snacks (Avg. 112 inpatients /day).**  
(In addition, our Dietary department prepares outpatient meals for the Emergency Department, Medical Daycare, Surgical Daycare etc. as well as providing cafeteria and catering food services.)

Laundry pounds processed **84,406/year clean weight**

Square feet cleaned and maintained **330,000**

Incoming phone calls to the PRH **840,000+ (2,300/weekday)**

Unique patient identifiers in the Hospital's database **212,762**

### Versions Francaises Disponibles

À l'avenir, si vous préférez recevoir cette publication en français, veuillez communiquer avec:

Carolyn Levesque au (613) 732-3675, poste 6165, ou au [carolyn.levesque@prh.email](mailto:carolyn.levesque@prh.email)