

Hôpital Smooth Rock Falls Hospital

Annual Report

Messages from our Leaders



Samantha Hiebert CEO

I joined the Hospital in the position of CEO at the end of February, and arrived to a very welcoming team of proud, caring and passionate professionals. It was evident that the employees and Board of Directors were committed to providing excellent services, and were ready

for change in order to be more efficient.

Having started my work in the final month of the fiscal year, I wasn't involved in much of the operational decisions for 2018-2019. While the Hospital ended the fiscal year in a deficit, it was successful in completing projects that would provide savings in the following years. Staffing costs and patient transportation were areas that created a lot of pressure on our budget; we have since recruited wonderful new team members and are involved in the planning of a regional transportation program that will prove to be more effective than our current model.

The leadership team is committed to working towards improving the Hospital's financial position and ensuring long term sustainability. Many improvement ideas have already been identified, and we are working towards bringing them into implementation in the following year. I'm excited and honored to work with our devoted and talented team of leaders, support services, and health care providers; together, we will continue to provide the best care to our patients, residents and community.

Messages from our Leaders

Diana Brunet Board Chair

2018-19 have been nothing short of eventful.

In the year that passed, both the CEO and Chief Nursing Officer have retired after years of dedication to our hospital. We have seen the departure of board members and the addition of new directors to work with our current equally skilled members.

In September, I was appointed interim CEO by the board of directors for a duration of five months and I would like to take the opportunity to say thank you for this experience as I have learned a great deal about health care and the excellent services we provide locally and the importance and involvement of people like you.

CEO's have a powerful position which, at most times can also be the most difficult.

February 25th, the hospital announced that it's board of directors appointed Samantha Hiebert as Chief Executive Officer. We are fortunate to have someone like Samantha and look forward to her leadership and the next stages of strategic planning.

March 12, 2019 Eliane Labonte-Bernier assumed her role as CNO (Chief Nursing Officer). We wish you success in your new role.

The Board and Executive are committed to working with staff and our community in providing patient-centered services all the while making a difference in our healthcare and our hospital.



Dr. Lebel Chief of Staff

A year has passed, leading to important changes in the administrative sector of the Smooth Rock Falls Hospital. The regional health care is also undergoing adjustments to adapt to the changing demographics of our region.

Indeed, demography is a major factor to consider in the checkerboard of our Ministry of Health. Over the years, the policies of this ministry must be constantly reviewed and new strategies developed to ensure an effective health care system that optimally meets the needs of residents of Northeastern Ontario.

I take this opportunity to thank each and everyone of you who are all so important to the people who receive services. We are right to be proud of our hospital and the quality people who work there, all with the goal of providing optimal care to its users. I wish to continue to be mindful of our future and to make our voices heard so that our population with such unique and particular faces can always receive the quality health care to which they are entitled.

Hôpital de Smooth Rock Falls Hospital

Board of Directors

Diana Brunet President

Nicole Poulin Vice-President & Chair of the Board Quality comittee

Angele Rochon Chair of the Finance and Governance comittee

Martine Blanchette Director
Clément Desrochers Director
Joe Couture Director
Diane Bernier Director

Medical Advisory Committee

Dr Lebel Chief of Staff
Dr Turineck President
Samantha Hiebert CEO

Eliane Labonte-Bernier Chief Nursing Officer

Melonie Loubert Chief Human Resources Officer

Senior Leadership

Samantha Hiebert CEO

Melonie Loubert CHRO, Director of Paramedical Services & Privacy Officer

Elianne Labonté-Bernier Chief Nursing Officer

Managers_

Kristal Prévost ER manager, Infection Control, Employee Education and In-Service Coordina-

tor And Occupational Helath Nurse

Merianne Latour Acute & Long Term Care

Michelle Piper Health & Safety, Risk Manager & Reception and Accounting Supervisor

Angie Ethier Nutrition & Housekeeping, CSR and Organizational Excellence Coordinator

Michel Pelletier Maintenance

Denis Beaulac Detox



OUR VISION

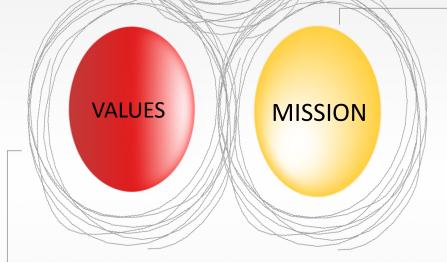
By encouraging well-being and the undertaking of personal responsibility in one's health, the HSRFH, through its leadership and holistic approach, commits to offering personalized, bilingual services, while taking into account the social and geographical realities of both the community and region.

You, your family, your friends; us, our hospital, our region...healthy together.

Vision

OUR MISSION

To promote and ensure optimal health care services adapted to our needs.



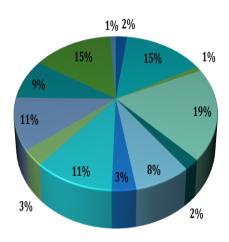
OUR VALUES

Every effort is made to ensure the values and principles of the organization are realized on a day-to-day basis.

Safety First Respect Professionalism Transparency Confidentiality Excellence

Staff and Services

Job Categories



- Aging at Home RN's Physiotherapy RPN's Radiology Food S
- Laboratory PSW's Radiology Food Services
 Maintenance Housekeeping Administration Detox
- Pharmacy

25+

93 Employees

 0-4
 43
 46.24%

 5-9
 14
 15.05%

 10-14
 15
 16.13%

 15-19
 10
 10.75%

 20-24
 7
 7.53%

4 4.3%

Employee Years of Service



Emergency Department Visits

185

Direct admissions from ED



1103 Radiology Visits

890

Physiotherapy Visits



20

LTC (Long Term Care) Residents

III

1744

Laboratory Visits

67

Telehealth Visits



232

Hospital Admissions

Length of Stay—Emergency visit / wait times explained

Length of stay is based upon the amount of time a patient spends in the ER between arrival and departure.

*Triage: Triage is a process by which patients are prioritized and classified according to the type and urgency of their conditions in order to identify those that need to be seen first and create a priority list, in order to reduce the risk that their condition may deteriorate. A registered nurse (RN) examines you to assess the severity of the presenting complaint, takes your vitals signs such as heart rate and blood pressure before assigning the patient a priority score and therefore determining access to appropriate treat-

Emergency Department

Adult Acuity score: Level 1—Resuscitation: Continuous Nursing Care

ment. Every patient is triaged according to the Canadian triage Acuity Scale (CTAS).

Level 1 applies when there are conditions that are threats to life or limb (or imminent risk of deterioration) requiring aggressive interventions.

Level 2—Emergent: Reassessment time is every 15 minutes

Level 2 applies when there are conditions that are a potential threat to life, limb or function, requiring rapid Medical intervention by physician or medical directive.

Level 3—Urgent: Reassessment time is every 30 minutes

Applies when there are conditions that could potentially progress to a serious problem requiring emergency Intervention. May be associated with significant discomfort or affect ability to function at work or in activities of daily living. Vital signs are usually normal or at the upper and lower ends of the normal range.

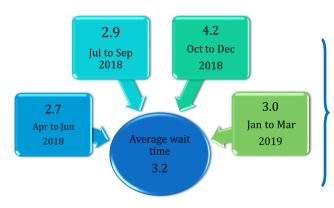
Level 4—Less Urgent: Reassessment time is every 60 minutes

Applies when there are conditions that relate to patient age, distress, or potential for deterioration that would benefit from intervention or reassurance within one or two hours.

Level 5—Non-Urgent: Reassessment time is every 120 minutes

Applies when there are conditions that may be acute but non-urgent as well as conditions which may be part of a chronic problem with or without evidence of deterioration. The investigation or interventions for some of these illnesses or injuries could be delayed or even referred to other areas of the hospital or health care system.

^{*}Your length of stay depends if tests have been ordered such as blood, x-rays... and for the doctor to get the results and the availability of a bed upon admission.



90th Percentile: the maximum length of time in which 9 out 10 patients have completed their ER visit. This is the default metric for public reporting of Total Time Spent in the ER.

Total Length of Stay for Complex Patients-ER (at 90th percentile) for Smooth Rock Falls

^{*}You arrive at the emergency department

^{*} You then wait to see the doctor, who either sends you home or admits you to the hospital

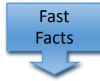


The SRF Hospital Auxiliary was founded September 20, 1972 and since, the Auxiliary have operated a gift shop along with penny sales, open houses, tree of lights campaign, memberships and more. Over a 25 year period, the Auxiliary have donated 160,758.00 to our hospital. Just this past year, the hospital received new chairs for all acute care rooms, the total of which is valued to be \$18,788.00. Countless volunteers helped raise funds for the hospital positively impacting staff, patients and their families.

It is through the will and determination of members that the Auxiliary have enjoyed great success over the years.

Auxiliary Board of Directors 2018-2019

Hélène Poirier	President		
Georgette Burlock	Vice President		
Marie Pelletier	Treasurer		
Lise Simpson	Secretary		
Sheila Jacques	Membership		
Clara Jacques	Gift Shop Chair		
Bobbie Hébert	Nominating Chair		



16 Active Members

(members who attend meetings or volunteer in the hospital gift Shop)

30 Supporting Members
(membership/or assist with specific events)





The Smooth Rock Falls Hospital Foundation was established in 2014 with the objective of raising money through various fundraisers such as the hospital truck draw, 50/50 golf ball drop, fishing trip amidst many more in order to purchase key equipment that enables us to provide our patients with world-class care for thehospital. For instance, the replacement of aging medical equipment, upgrades or new devices required by the ministry. This past year, the foundation has donated the following:

- \Rightarrow Cardiac monitor \$87,439.62
- ⇒ DR RAD \$ Mobile Retrofit (Donation from the Marcel and Frances Labelle Foundation) \$100,000.00
- ⇒ Ventilator V680 \$24,819.94
- ⇒ Lifepak 15 Defibrillators x 2 (of which Caisse Populaire donated \$26,000.00) \$50,098.55
- ⇒ APLIO Upgrade kit \$11,882.43
- ⇒ Television for Salon Jeanne Renaud \$675.74

The ongoing success of the foundation is thanks to the hard work, countless and dedication from our volunteers and the communities support.



Foundation Board of Directors

Melonie Loubert - President
Marielle Cousineau - Vice-President
Michelle Baker - Treasurer
Merianne Latour
Monique Pinard
Chantal Tessier



2018-19 Highlights



1. The Smooth Rock Falls Hospital amongst other hospitals in the north received a grant in the amount of 116,000.00 from the North East LHIN for the acquisition of an ADU, a key component to the hospital's medication safety system.

What is an ADU?

The automated dispensing unit (ADU) is a computerized drug storage cabinet which can handle hundreds of different meds, dispensation tracking, accountability of the inventory, improve patient safety and ultimately lead to increased nursing and patient satisfaction.

2.



A Model of Excellence For Small Hospitals

What is LEAN and why?

Lean is a systematic approach to identifying and eliminating "waste" and add value at all levels of the organization, especially at the actual workplace (Gemba).

Lean is respect for people's creativity and ideas. It requires the involvement and commitment of all employees.

April 29th, five employees received their Green Belt Certificate. The following employees used their creativity and skills to complete quality improvement projects within the hospital.

- ⇒ Tania Belair Reduce the number of outpatient visits out of town for diagnostic imaging services
- \Rightarrow Merianne Latour Standardize work practices across both shifts
- ⇒ Claude Ethier Decrease Maintenance breakdowns by 10%
- ⇒ Maryse Gauvin Implement recycling process throughout the hospital
- ⇒ **Angie Ethier** Reduce hospital overtime by 10% and reduce CSR costs by 10% (with a savings of \$20,000.00 in the completion phase)

Congratulations!

5. \$\square\$ The hospital converted all it's lights to high efficiency LED's and changed to high efficiency motors and in return received a rebate incentive of \$20,000.00. With the applied changes, the hospital saw a savings of \$11,000.00 in the last five months.

• AKE SOLING

Northern Ontario
School of Medicin

The hospital was host to eight NOSM (Northern Ontario School of Medicine) students for a month long placement this past year. Students had the opportunity to work side by side with Dr. Lebel and various departments within the hospital to develop essential clinical skills.

The NOSM school of Medicine is a partnership between the Laurentian University in Sudbury and Lakehead University in Thunder Bay.

4.



L' Hôpital de Smooth Rock Falls Hospital was accredited by Accreditation Canada for three years in April of 2019 meeting 93.6% of 1429 quality, safety and efficiency standards after a rigorous evaluation process. During the on-site survey the following programs and services were assessed:

- Governance,
- Infection Prevention and Control Standards
- Leadership
- Medication Management Standards
- Ambulatory Care Services
- Biomedical Laboratory Services
- Diagnostic Imaging Services
- Emergency Department
- Inpatient Services
- Point-of-Care Testing
- Reprocessing of Reusable Medical Devices Transfusion Services

Outstanding work!

SUMMARY STATEMENTS OF OPERATION AND NET ASSESTS YEAR ENDED MARCH 31, 2019

		2019		
		Budget		
		(Unaudited)	2019	2018
REVENUES				
NE LHIN, Schedule 1	\$	6,283,228 \$	6,385,843 \$	6,277,984
Alternative funding agreement	*	790,360	793,177	789,051
Differential and co-payment		596,500	620,854	538,851
Recoveries and sundry income		445,012	459,368	556,580
Amortization of deferred capital contributions		,	,	,
-equipment		87,306	134,501	116,938
Patient revenues		90,000	187,024	98,642
Gain on sale of capital assets		-	10,189	1,700
		8,292,406	8,590,956	8,379,746
EXPENSES				
Salaries and Wages		4,134,508	4,342,384	4,147,511
Medical staff remuneration		917,741	920,397	915,706
Employee benefits		1,176,611	1,160,008	1,175,930
Supplies and other expenses		1,686,895	1,810,149	1,177,653
Medical and surgical		70,700	99,160	70,982
Drugs and medicine		107,750	108,695	98,733
Amortization of equipment		194,202	185,094	186,414
Bad debts (recovered)		4,000	(3,576)	1,481
Amortization of buildings – net, schedule 2		35,082	21,026	19,612
		8,327,489	8,643,337	8,394,022
EXCESS OF EXPENSES OVER REVENUES FROM OPERATIONS BEFORE OTHER PROGRAMS		(35,083)	(52,381)	(14,276)
OTHER PROGRAMS, SCHEDULE 3				
Revenues		1,079,609	1,132,028	1,131,800
Expenses		(1,080,500)	(1,132,973)	(1,132,744)
		(891)	(945)	(944)
EXCESS OF EXPENSES OVER REVENUES	\$	(35,974)	(53,326)	(15,220)

SUMMARY STATEMENT OF FINANCIAL POSITION MARCH 31, 2019

	2019 2018
ASSETS	
CURRENT ASSETS	
Cash	\$ 3,068 \$ 3,368
Accounts receivable	265,617 329,355
Inventories	77,824 59,647
Prepaid expenses	58,210
	404,719 500,818
CAPITAL ASSETS	5,015,258 4,869,472
	\$ 5,419,977 \$ 5,370,290
LIADULTIEC	
LIABILITIES	
CURRENT LIABILITIES	
Bank indebtedness	\$ 341,923 472,290
Accounts payable and accrued liabilities	1,177,913 1,300,954
Deferred revenues	397,205 394,892
Current portion of obligation under capital leases	<u>8,614</u> 40,915
	1,925,655 2,209,051
OBLIGATION UNDER CAPITAL LEASES	- 3,947
DEFERRED CAPITAL CONTRIBUTIONS	4,287,885 3,936,746
POST-EMPLOYMENT BENEFITS PAYABLE	488,740 449,523
	6,702,280 6,599,267
NET DEBT	
INVESTED IN CAPITAL ASSETS	718,759 887,864
NET DEFICIENCY	2,001,062) (2,116,841)
	(1,282,303)