# Looking into the future...

Brockville General Hospital's planning and preparation for a new strategic plan continues to involve engagement and direct consultation with patients, staff, physicians, community, foundation, health system partners, and governance. This engagement process results in learning about our hospital, community health trends, and expectations of our patients, as well as the pressures and transformations of the health care system, which are driving momentum for BGH to be ready to implement our new three-year strategy.

Brockville General Hospital is a four site hospital offering acute care services, emergency services, intensive care medical surgical care, maternal child care, ambulatory care, day surgery, restorative care, complex continuing care, rehabilitation, and mental health services. We also offer ECG, stress testing radiology, ultrasound, orthopaedic cardiovascular, stroke, breast screening clinics, and community programs. Ou acute care mental health services transferred to our Charles Street site on March 19, 2014. We believe this will strengthen our collaborative efforts in providing excellent acute medical and mental health care and services to our patients and their families.

#### **Lean Management System**



Denise Eighteen, Lean Consultant, KMandT has been has recently started working with BGH employee Jessica Gerritsen, Transformation Specialist, to integrate lean into the daily routines at the hospital.

Our Quality Improvement Plan for 2014-2015 builds on our previous plan, our new Vision, Mission, Values, and BGH Strategic Plan.

#### **Quality Improvement Plan**

- Wait times in the Emergency Department for low acuity patients
- Patient experience in the Emergency Department
- Patient safety regarding medication reconciliation at discharge & transferring patients to the appropriate destination between services or organizations in a timely fashion.
- Increasing the number of staff receiving the influenza vaccination
- Improve the Hospital total margin
- Reduce the number of readmissions within 28 days for a select group of diagnostic types.

## A Message from our New Board Chair

#### **Charlotte Patterson**

As we look ahead to an exciting year for Brockville General Hospital, I am pleased to serve in the capacity of Board Chair. I have been a board member for 5 years and served on the Resources Committee and chaired the Quality and Patient Care Committee. This year, I was pleased to chair the Community Advisory Committee which seeks to build relationships with our communities through on-going dialogue.

I believe in the continued commitment to provide the best quality in patient care. Our success is dependent upon collaboration and engagement with our partners throughout the South East Local Health Integration Network. Our hospital community extends well past the city limits of Brockville, and encompasses Leeds Grenville and much of Eastern Ontario. We are committed to providing our communities with the very best care possible.



My gratitude is extended to our former Chair, Norman Millar. Norman has led the Board through challenging times and we are now well positioned to champion new initiatives. During Norman's tenure, the hospital assumed responsibility for acute mental health services in our community. This is a significant milestone in the provision of a continuum of health services at BGH. In addition, Norman's leadership resulted in the appointment of our current President and CEO, Tony Weeks. I look forward to working with Tony and appreciate the new level of energy and enthusiasm which he brings to the organization.

Thank you for giving me the opportunity to serve our hospital, our patients and our communities.

Charlotte Patterson, New Board Chair

**Annual Report 2014** 

## ANNUAL REPORT





# ANNUAL REPORT



75 Charles Street, Brockville ON K6V 1S8 • 613-345-5649 • www.bgh-on.ca

# Report of the BGH Board Chair and President & CEO

The Annual Report provides an opportunity to highlight progress and accomplishments from the past year. On behalf of the Brockville General Hospital Board of Governors, it is our pleasure to provide you with this detail while also providing a look at what we will be working on in the coming year.

The past year has been about listening to our community, learning more about the needs of our patients, and creating the winning conditions required to position Brockville General Hospital (BGH) for success, now and into the future.

To support the development of a new three-year strategy, BGH dedicated 150 hours last year to collaborate with patients, visitors, community leaders, physicians, and staff. Multiple engagement sessions led to more than 500 strengths to build on, or areas for improvement to consider, with an emphasis on people, care, and environment. This feedback has helped shape our journey forward; you will hear more about this as our new strategy begins to roll out in

A number of key Board initiatives has ensured that the community has an ongoing voice with many of the decisions we make. A great example of this is the formation of the Community Advisory Council – led entirely by members of our Board, with representation from every Leeds Grenville community and support from the hospital leadership team.

There are some wonderful success stories that deserve to be highlighted from the past year. For example, we are very proud that our people successfully led the movement of mental health services from the former Elmgrove facility to their newly built home on the third floor of our Charles Street site.

Our Foundation, as a result of a very generous community, was able to support the hospital with more than \$2,400,000 towards equipment purchases as well as funding services such as palliative care and the Brockville cardiovascular program. The hospital invested an additional \$700,000 to replace its three diagnostic imaging machines, and a new parking area was added close to our orthopaedic clinic to facilitate ease of access, and to accommodate growing

We introduced the Lean Management System; a continuous improvement journey that will help BGH be as efficient as possible while delivering the very best in patient care. This new methodology aligns with our new three-year

After listening to our community we struck an emergency room (ER) working group and charged them with the task of consulting with our patients, staff, and foundation board members. This initiative was supported by last year's annual fall appeal by the Foundation, which raised in excess of \$200,000

**About the Board of Governors** 

towards enhancing the overall ER experience. The BGH Volunteer Association also generously supported the ER by providing an additional \$70,000 for much needed equipment. Going forward we will strike a similar work group to improve conditions on 1 East, our medical surgical in-patient floor.

Our community also expressed a desire to learn more about healthcare, so we struck a new CEO's column with local newspapers to provide an inside look of the happenings of BGH, as well as other broader healthcare reform issues.

The past year has also been about continuing the great work and innovation put in place from previous years. You will read about how BGH has collaborated with our health system partners and the Local Health Integration Network on a number of innovative patient-first driven initiatives. We are proud of the fact that BGH continues to play a key leadership role in many of the initiatives including the rollout of a region-wide clinical data repository, the building of senior-friendly strategies such as the restorative care program, and patient flow. This, and many other examples are highlighted in the report.

Finally, you will hear from our patients who will describe in their own words how important BGH is to them and their families, and how our healthcare teams were there for them when they have needed help the most.

We recognize that our people are key enablers to success. For this reason, this report is dedicated to our 850 employees, 160 physicians and 350 volunteers who have proudly remained focused on providing safe quality patient care, and have helped to keep this organization moving forward without missing a

A special thanks to our Board members who continue to support the many changes underway at BGH. The unwavering dedication, trust, and focus of the entire Board is the reason we are able to continuously improve as an organization.

Thank you for taking a moment to share in our celebrations and recognition of all the people who truly make BGH the best.



**Norman Millar** Chair, Board of Governors



**Tony Weeks** President and Chief Executive Officer

# A note of thanks...

The Board of Governors (Board) governs the Brockville General Hospital (BGH) through the direction and supervision of the business and affairs of the corporation in accordance with its by-laws, vision, "I attended the emergency department with the mission and values, governance policies, applicable laws and regulations and articles of incorporation. crisis team for a mental health patient. While at The Board adheres to a model of good governance through which it provides strategic leadership and the emergency room the staff were excellent and direction to BGH by establishing policies, making governance decisions and monitoring performance what really stood out was the communication by related to the key dimensions of the BGH's mission and mandate, as well as its own effectiveness. The the nursing staff and doctor. The patient required Board acts at all times in the best interests of BGH, having regard for its accountabilities to its patients immediate medical care for frostbite to his feet. and the community served, the Ministry of Health and Long-Term Care (Ministry) and the Southeas: Our total time at the hospital was over 90 minutes Local Health Integration Network (LHIN). The Board understands the best interests of BGH includes but it didn't appear that long because we were the organization's place within the health system and the benefit to patients and the community of kept informed of the timelines. This was a very high an improved continuum of care arising from collaboration and integration with other health service risk patient and because of the communication providers. The Board maintains a culture based on the values as approved by the Board and strives for a skills of the crisis team and emergency staff consensual approach to decision-making, based on evidence and best practice, while respecting and with police the outcome ended up being very valuing dissenting views. The Board maintains at all times a clear distinction between the governance positive for the patient. I just wanted to express and operation of BGH, while recognizing the interdependencies between them. The members bring a my thanks to the BGH Staff." diverse range of skills and experience to their leadership role and includes 16 community representatives from within the Southeast Local Health Integration Network.

#### **Annual Report 2014**

# 2014 Board of Governors



President and Chief Executive Office

Norman Millar, Chair

Board Member since 2005

Board Member since 2012



Chief Nursing Officer

Bruce Louisbury

Board Member since 2012



Chief of Medical Staff



President of Medical Staff

Hugh Bates, Past Chair

Art Koolwine

Board Member since 2013

Board Member since 2009 Board Member since 2005



Vice President of Medical

**Anne Warren** 

Linda Hansen

Board Member since 2013

Board Member since 2009



President of BGH Volunteer



Director Brockville & District Hospital Foundation



Board Member 1996-2005



Robert Pickens



Art Pullan Board Member since 2013





Board Member since 2013

## Recognizing **Departing Board Members**

Trea Tuck

Board Member since 2013

#### Norman Millar

Board Chair, Norman Millar and his family first visited the Leeds Grenville area in 2000. They quickly fell in love with the beauty of the river and the Thousand Islands, and decided to make it home upon retirement. Shortly after moving here, Norman ended up in the BGH Emergency. "I was treated so well," he says, "that I decided to give back to the hospital. That's when I joined the Board of Governors." A former businessman from Montreal, Norman brings to the Board an extensive background in project management.



A member since 2005, his service in various capacities has seen many projects come to light, including the recent transfer of mental health services to Charles Street. BGH thanks Norman for his dedicated service to the hospital and we wish you great success on all your future endeavors.

#### **Hugh Bates**

Hugh Bates has volunteered with the hospital for over fifteen years. During this time he has been busy - serving two years as Board Chair, two years on the Volunteer Association Board and eleven on the Board of Governors. He and his wife Gloria regularly help run Eleanor's Café with the Volunteer Association. Hugh also assists weekly as a volunteer with Day Surgery. When not at the hospital, he is the Announcer for the Brockville Braves games and assists area students with school track and field competitions.



Since 2005 he has served on the Board. His services as a volunteer have enabled him to contribute from a multitude of perspectives. BGH would like to thank Hugh for his many contributions to the hospital! We wish Hugh all the best and look forward to seeing him around the hospital in his Volunteer apron!

# **VISION**

Healthy People -**Outstanding Care** 

#### **MISSION**

To provide an excellent patient experience – guided by the people we serve, delivered by people who care.

#### **CORE VALUES**

Commitment to Compassion, Respect, Trust, Accountability **Collaboration & Continuous Improvement** 

# Thanks from a patient...

Annual Report 2014 \_

# Report of the Chief of Staff

As the new Chief of Staff, this past year has allowed me to get comfortable in my new role, but has also given me the opportunity to seek out ways to enhance the great services provided at Brockville General Hospital.

New physician leadership was introduced in key areas such as family medicine, family practice, and complex continuing care. These new leaders are also getting more and more comfortable in their roles, and I am pleased with some of the collective ideas that are coming forward from the group. We have some big challenges to address with respect to unattached patient coverage within the hospital and these leaders will be instrumental in helping work towards a solution that puts the patient first.

I am very proud of the many compliments received throughout the year about the quality of care received in places like the emergency department, the operating room, and the medical surgical units. I am also proud of the fact that our wait times for such things as hip or knee surgeries continue to be some of the lowest in the province.

Our palliative care program continues to be the envy of other communities – thanks in large part to the generosity of the community combined with a caring team of physicians and frontline staff.

At BGH we are embracing the philosophy of continuous improvement. As physicians we recognize as much as anyone else that there's always room for improvement in everything we do; we remain committed to providing the very best patient experience.

The year ahead is both promising and challenging for BGH as we begin to better understand new health system pressures, the need to meet an aging patient population, striking new partnerships, and finding ways to ensure our community gets the very best in care as close to home as possible.

We have strong teams and dedicated physicians that continue to prioritize the needs of the patients. I am proud of our entire workforce and I know they will help BGH become the very best it can be.

Dr. Steve McMurray



#### Thanks...

I would like to share that once again the customer care I receive from your staff nurses and doctors is much above the average. There is a feeling of comfort and concern with each and every one at Brockville General Hospital. May God Bless all the patients in your care.'

~ Thank you, John C.

# Meet Juliana

girl. Daughter of Doug Philips, and Diana Dodge Phillips, she enjoys hockey, swimming, soccer, various crafts and has recently started modeling with an agency in Ottawa. She is the picture of health and happiness. pho



This wasn't the case last summer.

In July 2013, Juliana (then age 6) was rushed to Brockville General Hospital unable to breath

Juliana and her family were enjoying a weekend in Toronto at the Honda Indy. They had enjoyed the day, making their way around the activities. Sunday morning, Juliana awoke with a sore throat. Since children often get colds starting with a sore throat her parents thought it might just be a cold coming on, and gave her some medicine to try to keep it at bay. Upon returning home from the trip to Toronto, her throat continued to be sore so Doug took her to their family physician. There was no sign of anything more serious so Juliana and her dad carried on after the Doctor appointment and since she was feeling a little better they went out for a boat ride since her brother and mother were still out of town. Tuesday morning came around and Doug awakened at 4 am with Juliana gasping for breath at his bedside. Thinking it was congestion, Doug took her into the shower to inhale steam, which did not help, so he told her to dress

while he got dressed and he was going to take her to the hospital to be checked out. Within minutes things changed for the worse. Doug, realizing this was now very serious, rushed her to Brockville General Hospital's emergency room (ER).

"Your ER Team immediately put her in front of a team of professionals that realized time was quickly running out to keep this little girl alive", Doug and Diana wrote in a letter to The Recorder and Times on December

"All of the ER staff that day were immediate and professional in their response, from the security guard that held open the ER door as I ran in with my daughter in my arms, to the triage nurse and the respiratory doctor, the other doctors that tried to assist and the nurses that were there to assist. One of these astute professionals realized the Ornge team needed to be immediately called and they were. Juliana and I were rushed by ambulance to the local airstrip where the helicopter team met us to transfer us to CHEO in Ottawa. It only would have taken a moment of hesitation in this decision, to make such an important decision as to contact Ornge, and get them to Brockville immediately, and we could have had a very different outcome. In this event, the Doctor that made the decision quickly and for that our family will be eternally grateful.

"We know that Dr. Lee and the teams' quick response, decision, and their skill, saved Juliana's life that morning.'

~ Doug Philips

"Dr. Lee was credited by the Pediatric Intensive Care Unit at CHEO with having saved our daughter's life. The CHEO team was surprised that he was able to intubate her when her airway was closed so far by the time she arrived at BGH. (They mentioned often it takes special training to get a tube in without a cuff because there is no room, especially for a child)." The family explained in their letter.

Juliana spent a week at CHEO. Thankfully, she has since recovered fully.

"The staff in the hospital that day, from the security auard, to the ER team, the Doctors, and anyone that was working that shift, we would like them to know that we could never express how grateful we are for the aift they gave back to us that morning.



The Phillips Family originally shared their story with BGH in December 2013. They returned to the hospital at Christmas with gift baskets for staff. Pictured are Lori Murdock (ER nurse), Juliana Philips, Lisa Whalen (Respiratory Therapist), Shannon Wilson (ER nurse) and Doug Philips.

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#### 2013 WHAT Team Member of the Year

What a remarkable year 2013 was at Brockville General Hospital! The newly-formed Workplace Happiness Action Team (WHAT) implemented a peer-evaluation recognition program. Nominees were considered based on BGH values, professional knowledge of position, demonstrating team support and going beyond the call of duty.

#### Commitment to Compassion ~ Respect ~ Trust ~ Accountability ~ Collaboration ~ Continuous Improvement

The roster of nominees was strong. Victoria Eckland, a recreational therapist with the Mental Health Assertive Community Treatment Team (ACTT), walked

away with the award. Eckland was recognized by peers for her positive attitude, passion and commitment to patient care.

"A positive attitude in one employee is contagious to others and she definitely is a positive person for BGH", wrote Linda Verstegen in her nomination letter. "Working with someone who is always upbeat, and kind, makes the work day very pleasant."

"The main examples that stick out to me are Ms. Eckland's unbridles enthusiasm and positivity

towards others especially the patients and our staff", shares Dr. Franklin Sim. He shared examples of Eckland's commitment to patient care, which included coordinating a group to attend a concert in Kingston and arranging a talent show. Enabling the young participants of the talent show to see their skills has transformed several patients, giving them confidence and motivation.

"What has transpired is that the client/patients instead of seeing their disability are now seeing their ability which is a significant paradigm shift", Sim shared. "This has also changed the staff's view of some clients as well, and to be totally honest has changed my view in a positive manner for some of the clients involved which is testimony for Ms. Eckland's devotion to improving the lives of people with serious mental illness."

Eckland was gifted with an engraved desk clock and her choice between a six month parking pass, a gift of education fees plus gym membership, or a \$300 travel voucher.

"Being nominated by a colleague for this prestigious award is a considerable achievement that each nominee should cherish and accept as validation that their peers recognize their commitment to the Hospital's mission. Congratulations to our first ever Team Member of the Year award recipient - Victoria Eckland", shares Cameron McLennan, Vice President and Chief Human Resources Officer.





The BGH roster of excellence included L-R: Rev. Deacon Larry Judge. Volunteer Chaplain, Spiritual Care; Joanne Blanchard, Day Surgery Clerk, Surgical Services; Victoria Eckland, Recreational Therapist, Mental Health Assertive Community Treatment Team (ACTT); James Versteegen, RN, Surgical Services; and Kevin McBridge, Carpenter, Facilities. Not pictured are nominees Joy Coutu, Charge Nurse, Emergency and Dr. Robert Malone, Chief of Psychiatry, Mental Health.

Personal Support Network of Ontario has chosen BGH Personal Support Worker Vaughnette Chatzikiriakos, as PSW of the Year for 2013. "Vaughnette is very deserving of this huge honor!" says BGH Vice President and Chief Nursing Officer Heather Quesnelle. "She was a key member of the team who assisted us to introduce the Personal Support Worker to acute care at Charles Street when we



started the very successful Enhanced Activation program. She interacts positively both with staff and patients, and plays a key role in coaching and mentoring new students and staff alike. She is an excellent example and role model for PSWs and other staff members."

# What our patients are saying...

I am writing to express my appreciation of the very high quality of care I received at mergency. I am aged 72 and over the weekend I had taken part in a long distance relay race. At the end, noticed a sharp pain in the right side of my chest. I was concerned that night have fractured a rib and so went to Emergency. I was prepared for a long wait.

After a nurse had taken all the facts I met with a doctor who introduced himself to me, discussed my situation in detail and then told me what procedures he was recommending Over the course of the morning I received X-rays, a blood test and an ECG. At each stage the professionasl introduced him/herself to me, described what they were going to do and answered any questions. Without exception they were all pleasant and friendly. When esults from all the tests were in, the doctor came back to discuss the findings – a pulle muscle – and to advise me about what to do, and more importantly what to do if the pai didn't subside in a few days. I left the hospital after three and a half hours feeling deeply grateful to the staff, and thoroughly impressed with the standard of care and attention had received."

Sincerely, John R.

Keynote speaker at the 2014 Annual General Meeting. Dr. Malone spoke about the journey of mental health at **Brockville General Hospital.** 



Dr. Robert Malone, Chief of Psychiatry, Mental Health

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# Message from the Chair

It has been my privilege to be the Chair of the Brockville and District Hospital Foundation. The goal of the Foundation is to raise runds to support Brockville General Hospital and ensure that patients receive the best care possible. The continued support of donors makes this happen.

The Foundation received many generous gifts from individuals, families and organizations in support of equipment needs and programs.

A significant portion of our annual revenue comes from special events – both signature events, hosted by the Foundation, and Independent Partnerships which are organized by members of our community. You have make a positive impact for health care in our community, whether you participated as a fundraiser purchased a ticket or volunteered.

In finishiing my term as Chairman of the Board, I would like to take this opportunity to thank the residents of Leeds and Grenville for supporting your community hospital through your generous gifts to the Brockville and District Hospital Foundation.

Tom Blanchard, Chair - Brockville and District Hospital Foundation

The Brockville and District Hospital Foundation is the fundraising arm of the Brockville General Hospital. The Brockville and District Hospital Foundation works to support the hospital with funding for equipment needs and for services not funded by Ministry programs.

The Brockville and District Hospital Foundation supports the Brockville General Hospital's commitment to provide compassionate patient care and excellence in the provision of their programs and services. To achieve this it is necessary to fill the gap between government funding and the greater needs of the hospital. That is why your donations are so important to us; they buy vital equipment and support programs and services. Your donations give our Healthcare Professionals the tools they need to provide the best possible care to every patient at Brockville General Hospital.

#### **Ways of Giving**

Giving should be easy. What one individual finds suitable isn't necessarily the same as another. At the Brockville and District Hospital Foundation, we help people find options that fulfill their wishes.

Each gift is personal and generous – and greatly appreciated. To make a donation or for more information, call 613-345-4478 or send an email to foundation@bgh-on.ca. The Foundation respects your privacy and safeguards your personal information.

#### WAYS TO GIVE:

- Gifts in your will (bequests)
- Gifts of Life Insurance
- Gifts of Security
- Gifts of Cash
- Host or support an event
- Pledges
- Monthly giving
- Gifts in kind

#### For more information please contact:

Joan Simon, Executive Director Brockville and District Hospital Foundation 75 Charles Street, Brockville, ON K6V 1S8 foundation@bgh-on.ca ~ 613-345-4478 ~ www.bdhfoundation.com

Beauty and The Breast, May 2013 raised \$31,100 to purchase two Infusion Chairs. The chairs are specifically designed to enhance the patient's comfort while sitting for long periods of time when getting treatment.



The Brockville Cardiovascular Program (BCP) was the recipient of a cheque for \$60,000 from the Community Care and Share Golf Tournament held August 23.



Friends of Palliative Care Golf Tournament 20th Anniversary signature event raised a record \$260,000.



A combined effort by community donors, the Town of Gananoque, the Gananoque Legion Branch 92, and

Gananoaue resident Mr. Jack Keyes, collectively donated **\$45,000** to purchase a state-of-the-art operating table.



Show You Care ~ Bid on a Chair fundraiser for the Brockville Cardiovascular Program (BCP) held May 30th at Maplehurst Manor in Maitland



# **Brockville General Volunteer Association**

President's Report, 2013-2014

The Brockville General Volunteer Association (BGVA) had another busy year! Over 27,390 hours were given by 367 active volunteers! This includes all of

Brockville

our volunteers in Palliative care at the Garden Street Site in their many roles, our Spiritual Care volunteers, and all of our volunteers at the Charles Street Site. We have more volunteers in the Emergency Department, and are looking at opportunities with the Mental Health Department, now that it has relocated

from Elmgrove to the 3rd floor at BGH. We have made a great start with our renewed Volunteen Program, and have 2 Volunteen Co-ordinators who are currently training about 20 new volunteens who will help our Volunteers in many areas of the hospital, including weekends in Eleanor's café, we hope. May Court members generously gave yet another 85 infant sleepers to assist us in putting together "We Care" baskets for young Moms in need

that give birth at BGH. We continue to provide Memory Pillows for the parents of stillborn or very young babies; and to provide lunch vouchers for patients in the ACU, at the discretion of staff. We continue to provide handmade IV gowns for pediatric patients and the ER room as required. These items are all donated by the BGVA throughout the year and are in addition to the major equipment purchases.

Through all our many Volunteer fundraising efforts including Eleanor's Café and our Gift Shops at both the Charles Street site and the Garden Street site, we are pleased to report that a total of just over \$102,000 was given to the hospital, including but not limited to the following: (a wish list is prioritized by hospital senior administration each year and presented to BGVA):

Cardiovascular Program	\$20,000
Bariatric Equipment and Wheelchairs	\$36,063
Emergency Dept Equipment	\$45,325
Portable monitors	\$16,440
CO2 monitor	\$4,000
Pressure monitor	\$3,204
O2 Saturation monitor	\$4,775
Wireless ECG machine	\$16,906
Baby Bundles and café vouchers	\$671

Thank you to ALL our Volunteers for all that you do to make our hospital a better place!

Respectfully Submitted, Dave Bessant, President

- Brockville General Volunteer Association



Volunteen Program Initiated with the Brockville **General Volunteer Association** 



**Brockville General Volunteer Association Donates** \$20,000 to Brockville Cardiovascular Program.

Pictured I-r are: Helen Ostap, Cardiovascular Nurse; Dr Jay Bhatt; Dave Bessant, President; Maureen Overy, Past President BGVA: and Jason Lafave. Kinesiologist. On the treadmill is Dr. John Findlay.



#### **Brockville General Volunteer Association Annual Meeting for 2013**



The AGM concluded with a bouquet ceremony in honour of retiring Board **Members.** Pictured seated is Gail Parslow, retiring Honorary President. Standing (I-r) is Maureen Overy, retiring Past President and retiring co-convenor, Eleanor's Café; Marg Alexander, retiring co-convenor Eleanor's Café; Dave Bessant President and Bea Slack, retiring Chair, Fundraising.



Speaking on 'Orthopaedics for Seniors', Dr. Greg Hansen addressed the crowd of 50 volunteers. Dr. Hansen is an orthopaedic surgeon who has recently introduced ACL and knee ligament reconstructive surgeries to BGH as a pilot project.

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# Innovations

## **SENIOR-FRIENDLY** Hospital Strategies

In 2013 Sherry Anderson, Director of Complex Continuing Care, Rehab and Palliative Care along with Robin TeKamp, Manager of Patient Flow, spoke at the HealthAchieve conference presented by the Ontario Hospital Association. BGH's Senior-Friendly Health Strategy (SFHS) is an ongoing improvement initiative that aims to promote hospital practices that better meet the physical, cognitive, and psychological needs of older adults. The overall vision of the SFHS is to enable seniors to maintain optimal health and function while they are hospitalized so that they can transition successfully home or to the next appropriate level of care. Without senior friendly processes in place, seniors may also have higher rates of adverse events, surgical complications, and nosocomial infections.

The Integrated Community Assessment Referral Team (or iCart, for short) is a SE LHIN initiative to monitor frail, elderly seniors with a goal of preventing unnecessary admissions. Repeat admissions for this patient group are high. The iCart approach is designed to screen all patient admissions over 75 years of age to identify high-risk seniors and assess the kind of community supports they will need when leaving hospital.

#### New iCart Approach will help High-Risk Seniors Avoid Repeated ER Visits

The electronic screening tool – the Assessment Urgency Algorithm or AUA – will be applied to all patients in this age group who present at the Emergency Department, and again to similar patients on leaving hospital. If an AUA score of between four and six is generated, these patients are flagged for follow up by the iCart team.

The iCart teams, made up of ER staff, CCAC case managers and Community Support Services workers, will use a screening tool to

#### The Eastern Ontario Clinical Document Repository (EOCDR)

Brockville General Hospital is proud to be leading our partners, the South East Local Health Integration Network (LHIN) and the Champlain LHIN with the expansion of the existing Clinical Document Repository solution to now include all of the SE LHIN hospitals and most of the Champlain hospitals with over 20 facilities now connected. The Eastern Ontario Clinical Document Repository (EOCDR) will provide health care providers with access to a regional, electronic repository of patient records. This is a key factor toward developing an Electronic Health Record (EHR) for the residents of Eastern Ontario.

The old system of paper reports being exchanged with health care providers by courier or fax will be replaced by EOCDR. For example, once a patient is discharged from the hospital, the discharge summary and diagnostic imaging reports, which are the primary documents in the EOCDR, are made available in health care providers' office records.

The new system provides several improvements, including security of data, patient access to care and the quality and coordination of care by empowering providers with timely information from hospital visits.

BGH is the first hospital in Ontario to implement the discharge summary and clinical document specification using the latest eHealth specifications. During our first year in trial, the EOCDR successfully managed over 20,000 patient health records.

identify high-risk seniors and asses the kind of community supports they'll need once they're discharged from the hospital – or come up with an inpatient care plan that will help previent functional and congnitive decline if they must remain in hospital.

The iCart team will share their assessments of high-risk patients (clients) to ensure they come up with a coordinated care plan for discharged clients that will avoid duplication of services, client confusion, and make sure the client is visited often enough at home to diminish their anxiety, prevent social isolation and avoid their seeking help through the ER for non-acute needs.

A senior friendly hospital is one in which the environment, organizational culture, and care giving processes accommodate and respond to seniors' physical and cognitive needs. The aim is to enable seniors to regain their health after their hospital stay is completed, so that they can transition to the next level of care that best meets their needs by providing additional community supports.



# What our patients are saying...

"I reside in Kingston and had some day surgery by Dr. Patrick Davison at your facility. The entire process was outstanding. The talent roster was world class from the receptionist, to the nurses and Dr. Davison and his team know their craft. Their communication skills and patient interest put the entire gig over the top.

As a Marketing Consultant that works with a number of businesses with their service strategy, I need to clearly tell you that you have it figured out! The buzz on the street had the same message and I am certainly an advocate based on my experience. Congrats to all!"

~ Bill C



\_\_\_\_\_ Annual Report 2014

# Mental Health Services

#### Interim Mental Health Renovations Kick Off in 2013

Brockville General Hospital took control of Elmgrove Site, and its services, from The Royal during the transfer of acute care mental health services in 2012. Given an earlier mandate from the Health Services Restructuring Commission to have all acute care services in Ontario communities housed together in one location, it was recognized changes needed to be made. With much planning and work, BGH was pleased to announce in March 2014 all acute mental health care is now housed at our Charles Street site.

Steve Read, Vice President and Chief Financial Officer, spoke in 2013 about the project plan. "May 1st (2013) was an exciting day for BGH and our efforts to execute on the directives of the Health Services Restructuring Commission. For many months, we have been working with our architects and our funding partners to reach this exciting stage in the process."

In March 2014, Elmgrove site closed and patients were transferred to BGH's Charles Street site and Front Avenue Resource Centre.

"We have witnessed the physical transformation of our third floor into a modern, specialized mental health facility, and are excited at being able to serve our clients in this new environment."



Just some of the many staff involved with the third floor renovation are (I-r): Susan Pugh, BGH Lab and Infection Control Manager; Todd Schonewille, BGH Facilities Manager; Louis Guilbeault, Senior VP of ZW Project Management Inc.; Stephen MacDougall, EllisDon Superintendent; and Michael Ray, EllisDon Construction Manager.

#### The End of an Era

Over 100 BGH staff, former Elmgrove staff and friends gathered February 7, 2014 to celebrate and mark the end of an era. Upon completion of the third floor renovation at the BGH Charles Street Site, all services which were accommodated at the BGH Elmgrove Site (formerly Elmgrove Unit of the Brockville Mental Health Centre) have been relocated to Charles Street or the Front Avenue Resource Centre. After 99 years of service to the community, on April 1st, 2014, Elmgrove officially closed its doors.



Pictured I-r are: Heather Quesnelle, Vice President and Chief Nursing Executive; Steve Read, Vice President and Chief Financial Officer; Tony Weeks, President and Chief Executive Officer; Dr. Robert Malone, Chief of Psychiatry; Linda Peever, Director of Mental Health Services; James Sweeney, Manager of Inpatient Services; and Brent Dalgleish, Manager of Mental Health Community Programs.

Linda Peever, Director of Mental Health Services at Brockville General Hospital was winner of the Jane Chamberlin Award for 2014. The award was presented by the Association of General Hospital Psychiatric Services during their annual conference of the Ontario Psychiatric Association. The Jane Chamberlin Award was created to recognize outstanding achievement in Mental Health relating to General Hospitals in Ontario.



Mental Health Services at Brockville General Hospital made big news over the past year with the expansion at the Charles Street site and move from Elmarove.



Cutting the cake at the Open House are David Henderson, Mayor, City of Brockville; Charlotte Patterson, BGH Board, Vice Chair; Dr. Robert Malone, BGH Chief of Psychiatry; and Tony Weeks, President and Chief Executive Officer.

#### Windows into the Past

These windows were uncovered during the demolition of the former ICU on the second floor at Charles Street, which is being renovated for the Information Management and Information Technologies Department. This is the east wall of the west wing. The



second floor was expanded slightly in the mid-1980's when they renovated the ICU and operating rooms — this former outside wall became an inside wall.

#### Not as Light as Air!

Construction staff helps guide one of two new Air Handling Units (or AHUs) into place on the roof of the Brockville General Charles Street site. The two units were lifted by crane to the roof – one for the east half and one for the west half of third floor. The units will provide both heating and cooling, and each weights about 14,000 pounds.



Brockville General Hospital Mental Health Services sponsored a Crisis Intervention Training (CIT) Workshop for local police officers.



BGH Mental Health Services staff Shawna Marshall (centre row, third from left), stands with officers from across the Leeds & Grenville region at the CIT Training last month. Missing is Sergeant Judy Alton, CIT Training Lead (OPP Crime Prevention Section).

Annual Report 2014 \_\_\_\_\_

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# Our Quality Improvement Plan 2013-2014

- 1. Access: Emergency Department Wait times The low acuity wait time (time between triage assessment/registration until discharge) was reduced from 4.6 to 4.3 hours. This is a carryover objective from last year with an initiating wait time performance of 5.3 hours.
- 2. Patient Centred: Satisfaction To improve the patient experience by improving patient satisfaction in the Emergency Department. We expected to see a reduction in concerns and improvement on the NRC Canada evaluations and increased responses to the NRC Canada Patient Satisfaction Questionnaires. The response to the question "would you be willing to recommend this hospital to others" was previously rated 45.2% and increased to 48.1%. The 2012 overall satisfaction score was 84%, with a target of 88.3%. 2013 saw an increase to 88.2%.
- **3. Safety:** Decrease the percentage of patients leaving before being seen by a physician from 5.9% to 4%. Through efforts, such as the increase of staffing during high volume hours, this was exceeded at 3.95%.
- **4. Effectiveness:** Improve annual staff compliance with influenza vaccination. Through an extensive communications plan, the target of 70% was exceeded at 71%.
- **5. Efficiency:** Conservable Days Acute Care. Our goal was to reach 1000 conservable days. Our target was attained within three months and exceeded expectations. his initiative has enabled improvements to overall patient flow processes.
- **6. Integrated:** Reduce re-admission rates for select diagnosis within 30 days to any facility. BGH continues to work to reduce readmissions which include monitoring medication accuracy, clinic support and public partnerships.

# What our patients are saying...

"I was scheduled for day surgery with Dr. Tilly. I want you to know how impressed I was at the quality of care that was provided. When sitting outside the OR, I was very impressed to meet all of my OR team. Each one came out individually and introduced themselves and told me what they would be doing. It was a relief to me and it eased my stress.

Upon completion of my tests I was taken back to recovery where again, I was well taken care of. Your staff are wonderful and carina."

~ Janey G.

## **MOREOB Obstetrical Program**

**Brockville General Hospital officially launches its MOREOB obstetrical quality and safety program in September 2013.** MOREOB stands for the "Managing Obstetrical Risk Efficiently" Program, which was created in 2001-2002 by the Society of Obstetricians and Gynecologists of Canada to address obstetrical risk and patient safety issues. The program incorporates adult education principles, reflective learning, practice modification, and evaluation as the foundation for motivating change and maintaining a current clinical knowledge base.

The team at BGH that participated in the initial training for the  $MORE^{OB}$  program leads included members of the MacLean Unit nursing staff, Obstetricians, Midwives, a Paediatrician, and the Directors of the Quality & Risk and Maternal-Child Programs.

"MOREOB is all about leveling the playing field in emergency situations," adds Torode. "When all partners understand each other's roles, the enhanced communications and teamwork deliver consistent and safer obstetrical patient care."



BGH recently received an Award of Recognition for completion of the first MoreOB module



The BGH Flu Shot Campaign saw a 40% improvement in staff compliance in 2013.

## Collaborative Stroke Care Workshop

An interprofessional workshop on enhancing best practices in acute stroke care was held in November 2013 at the Brockville Country Club The day was hosted by Brockville General Hospital (BGH), Kingston General Hospital (KGH) and the Stroke Network of Southeastern Ontario (SNEO). Presentations such as collaborative care plans, prevention clinic referral, and transition processes were offered through interactive learning opportunities to promote interprofessional collaboration, problem solving and sharing of expertise in acute stroke care.

Annual Report 2014

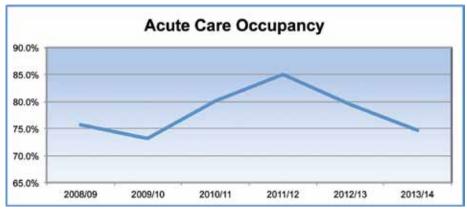
# 2014 Financial Accountability Report

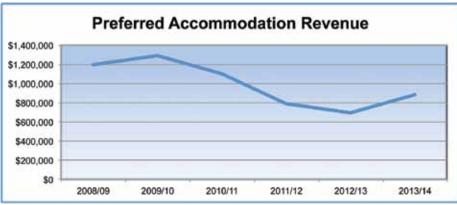
Provincial Health Services Funding Reform continued to reduce the funding provided by the Ministry of Health and Long-term Care in 2013/14, offset in part by increases in preferred accommodation and ancillary revenue. Operating costs continued to decrease in 2013-14, although not at a pace to match reductions in funding. The outcome was an operating deficit, as well as a deferral of unspent program funding and additional one-time restructuring costs incurred in March 2014.

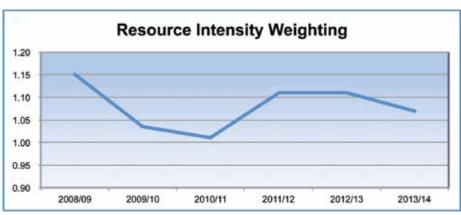
Once again, BGH saw increases in acute care admissions and delivered babies, although average length of stay continued to improve, and consequently total patient acute inpatient days decreased by 6%. This has the combined positive effect of reducing direct costs and opening up capacity for crucial revenue streams that had been trending downwards in recent years, particularly fees for preferred accommodation.

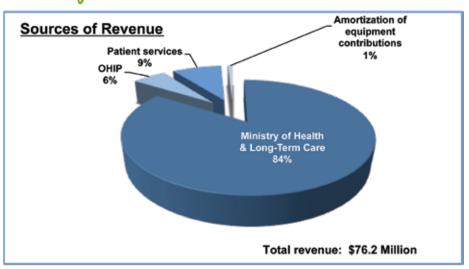
Looking forward to 2014-15, continued funding reductions will compound the financial pressures, particularly in light of annual staff compensation increases and the inflationary impact on medical supply costs. Nevertheless, our obligation under our Hospital Service Accountability Agreement is to deliver a positive total margin. Organizational restructuring and the deployment of a management system based on lean principles will allow BGH to improve the patient experience and ensure the efficient allocation of resources.

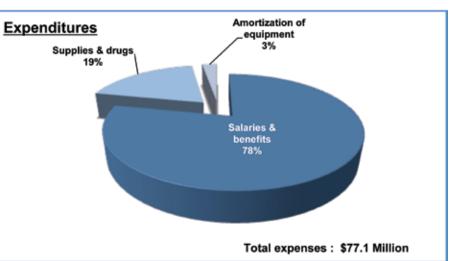
The Board of Governors has approved an operating plan for 2014-15 that will allow BGH to address the challenging economic demands of today's healthcare environment, and to deliver on our mission.

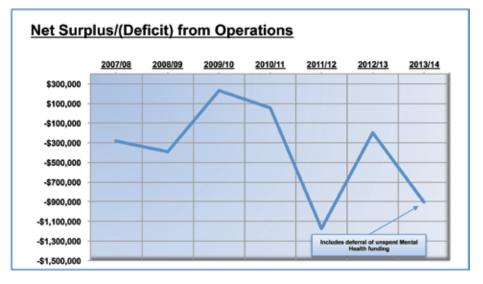












#### Notes

- Amortization of buildings and related deferred contributions, as well as interest costs on long-term capital acquisitions, are not included for the purposes of computing the balanced budget requirement ("Total Margin"), and accordingly are not included in the above figures.
- 2) Expense figures above also do not include one-time labour restructuring costs incurred in 2013-14, amounting to \$500,167.
- 3) For 2013-14, Net Surplus/(Deficit) from Operations includes a deferral of unspent Mental Health funding.
- 4) Data from charts tie into financial results agreed to draft financial statements as of March 31, 2014.

Audited financial statements are available upon request. Please contact Tony Weeks, Board Secretary at 613-345-5649 ext. 1103 or Steve Read, Vice President and Chief Financial Officer at ext. 1042 or by email at reast@bgh-on.ca