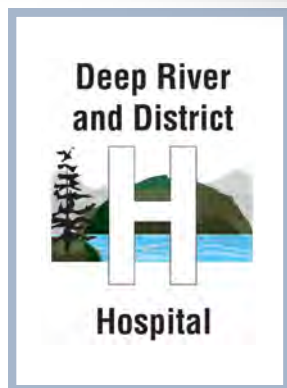


# ANNUAL REPORT

## 2017-2018



## REPORT OF THE BOARD CHAIR



On behalf of the Board of Directors, I congratulate and thank the entire hospital staff on a year well done. From those in support services to the front line workers, management and the executive team, all have demonstrated the dedication and compassion that is experienced by our patients, residents and families.

Having equally dedicated and competent physicians, who often extend themselves to ensure 100% coverage of the Emergency Department and patients, is also a privilege. However, even though at present we have a full complement of medical staff with the addition of new physicians Dr. McLeod in the Family Health Team and Dr. Ballantyne in the Emergency Department, we are not complacent and are cognizant of the fact that in the near future we will require more new physicians as some of our current medical staff retire. Recognizing that high quality patient centred health care is vital to our communities, we are pleased that preliminary work has begun for the establishment of a new Family Health Team building on our campus. We are very optimistic that the Ministry of Health will continue to support this project. Such a facility will be a definite asset in attracting and retaining physicians.

We sincerely thank the Hospital Auxiliary for their ongoing financial support as well as their volunteer hours in serving patients and residents within our facility. The work and commitment of the Hospital Foundation and its donors and third party fundraisers is also greatly appreciated. Community support for these two organizations will be critical to the hospital's sustainability as we move to replace aging x-ray equipment in alignment with a new Hospital Information System in partnership with The Ottawa Hospital along with the constant need for other capital equipment.

Under the guidance and able leadership of our CEO, Richard Bedard, 2017-2018 has been a busy year as you will see in his report. Some of the highlights from the Board perspective include the implementation of our

Executive Compensation Framework as mandated by the Ministry of Health and the establishment and implementation of a new ethical framework across the organization. We are in the process of preparing for Accreditation in 2019 which involves the whole hospital including the Board. Looking ahead to the future, in the past few months we underwent an in depth exploration of our governance and operations. This will further define our vision, mission, strategic goals and direction over the next 3-5 years and position us to succeed in the ever changing health care environment.

Involvement of our communities in the functioning of the hospital is important to us. The Community Health Partners Group (with a broad range of representatives) is now well established and has proven to be a valuable source of ideas and feedback. There are community members on our Board Committees and input from the Patient and Family Advisory Council is reported to the Board via the Quality and Patient Safety Committee. Our Board meetings are open to the public and our hospital newsletter the "Zinger" is available on our website. During our strategic refresh a wide range of community partners were interviewed and input from close to 300 patients was solicited.

Funding continues, (and will continue) to be a concern, both for the day-to-day functioning of the hospital and for dealing with our aging infrastructure. This past year, with careful planning and management of our resources, we were able to achieve a balanced budget with no cuts to the services we provide. As mandated by the LHIN we have submitted a balanced budget for 2018-2019 and will strive to see this as a reality. The revenue stream from our paid parking is a significant help in this regard. We wish to thank the community and our hospital staff for their cooperation in supporting this endeavour.

Finally, on a personal note, I thank my fellow members of the Board of Directors for their commitment of time and their diligence in supporting the hospital. It has been a privilege to work with such dedicated community volunteers.

REPORT OF THE CHIEF EXECUTIVE OFFICER



It is our privilege and pleasure to present our Annual Report to the Community for 2017/18. It is a perfect opportunity to reflect upon and to celebrate our achievements as we continue our journey forward towards realizing our vision that “every client’s healthcare experience will be exceptional”.

This year’s report reflects a very busy and exciting year that focused on strengthening the foundation of our organizational structure and processes and in bringing greater clarity and definition to the services we are providing as we initiated a refresh of our strategic plan. In September, the Board endorsed that our organization sign an agreement with The Ottawa Hospital to be our Hospital Information System (HIS) Partner. As such, we are actively working with The Ottawa Hospital to plan for our migration to a shared electronic health record.

We welcomed two new physicians to our team (Dr. McLeod and Dr. Ballantyne) with the skills, vision and passion that will help support the delivery of healthcare to our communities. The organization formed a Community Health Partners Group in the fall of 2017 to engage our communities on issues which impact our catchment area.

Membership on the group includes representatives from Canadian Nuclear Laboratories, Garrison Petawawa, our local municipalities, and more.

Our organization achieved the Champlain LHIN Healthy Foods in Champlain Hospitals Silver Level. We were the first to reach this impressive milestone among the 20 participating institutions in our region. Cancer Care Ontario named the Deep River and District Hospital as the top performing facility in the province of Ontario for Ontario Breast Screening Program (OBSP) Wait Times—time from abnormal screen to diagnosis for cases with tissue biopsy for the 2016/2017 fiscal year. Additionally, a Smoke-Free Environment was initiated, in October 2017, ahead of mandatory legislated date of January 2018.

Significant foundational improvements were completed in the past year. Under the Health Infrastructure Renewal Fund, we received over one million dollars to replace our emergency generator and our chiller (cooling system) units. The building automation system and emergency exit signs were upgraded with the Hospital Energy Efficiency Program. On the fiscal front, despite an economically challenging year, we have successfully balanced our budget. Paid parking was successfully implemented as well as our new phone system. A revitalized website was launched in June of 2017 and is in compliance with accessibility standards as per the Accessibility for Ontarians with Disabilities Act.

Looking to the future, we are actively working with the Ministry to complete a Business Case Application for the development of a new primary care building. We continue to experience transformation in healthcare. To position ourselves for success in the future, we are currently renewing our strategic plan and preparing for Accreditation in 2019.

It is an opportunity to recognize with heartfelt gratitude the many individuals who have been instrumental in helping us achieve our success and making such a great difference in the lives of so many – our Board, our Leaders, our Staff, our Physicians, our Funders, our Donors, our Community and Service Partners, and our Volunteers.

To our patients, residents, clients, and their families, we sincerely thank you for your continued confidence in us and for your willingness to share your patient experience so that we may elevate what we are doing well, and learn what it is we could do better on your behalf. We have accomplished a great deal but there is more still to come in our journey. Moving forward, we will continue to build upon our achievements and work with our partners to provide care in an integrated model that endeavors to provide exceptional care to those under our care.

DRDH Values	
Caring	Safety
Partnering	Excellence
Innovation	Integrity

REPORT OF THE CHIEF OF STAFF



Once again it is my turn to serve as Chief of Staff for the Hospital. Currently, each of our physicians commit to a one-year term in an effort to allow us to maintain other priorities. Our Hospital has been challenged in the past with frequent administrative turn over and we are hoping that the stability we are

experiencing now will allow us to continue to effectively implement important strategic priorities.

Our Medical Staff has seen some changes over the past year. A new physician, Dr. McLeod, joined the Family Health Team in September. Also, a new full time physician, Dr. Ballantyne, has more recently been recruited through a Ministry sponsored program to cover regular shifts in our Emergency Department for the next two years. The addition of Dr. Ballantyne has helped to decrease the Hospital’s dependence on Health Force Ontario, which is a more costly means of obtaining physician coverage. The physician second on call roster, which continues to be supported solely by local physicians and is a requirement to maintain our 24 hour emergency department, has suffered significant loss this year. Three of our local physicians have stepped away from working in the Emergency Department, which leaves the remaining doctors on call one week in five. For the past three years, our physicians were on call one week in eight, after nearly 15 years of doing one week in four. The Hospital remains in an extremely delicate balance related to physician staffing, as it has for almost my entire 25 year career here. Despite these challenges, our physicians continue to provide exceptional care.

The Medical Staff are working towards implementing common credentialing, which is an important initiative to manage growing medical staff shortages. Our Hospital and physicians continue to work with medical and nursing students, which has traditionally has been one of our greatest recruitment tools.

As other areas of the province, recruiting nursing staff is a challenge. This challenge are not unique to our

organization, but as a small hospital, we may feel the affects more strongly.

Throughout the province and LHIN, efforts are being made to amalgamate, consolidate and integrate the various aspects of health care with a strong focus on economics and continuity of care. Providing the right care, for the right patient, in the right location, for the right price is a goal of the Ministry of Health and of our Hospital. We are now in an environment of constant change and heavy oversight on budgets that continue to contract with respect to inflation. I must congratulate the administration staff on their effort to catch up and meet the demands of the Ministry, which are continuously changing. They continue to investigate means of integrating services both in the organization and the community.

The Foundation will soon be launching a major fundraising campaign for the replacement of our Hospital’s diagnostic imaging equipment. The government does not provide funds for equipment that hospitals need to provide care. Raising funds for this equipment is the responsibility of our communities in exchange for the privilege of having a Hospital here. Without the efforts of the Foundation, the Auxiliary, and the generosity of our donors, we would not have the modern equipment that we do.

In the face of the challenges outlined in this report, we continue to provide excellent care to ensure that “every client’s healthcare experience is exceptional”. I would like to emphasize the role of the healthcare team in the provision of care. Each hospital employee is a member of the team and it is not simply the quality of health care, which in itself is exemplary, but the smile or assistance from staff that makes a clients experience exceptional. Our hospital has been ranked as one of the top performers for both patient and staff satisfaction, and it continues to be an excellent place to work and to be cared for. Please continue to support us!

15,275 Emergency Department Visits	319 inpatients admitted
8 days average length of stay for acute inpatients	
1% decrease in readmission rates within one week of discharge, compared to last year	1% decrease in readmission rates within one month of discharge, compared to last year



117 Banting Drive  
Deep River Ontario  
K0J 1P0

613-584-3333  
assistance@drdh.org  
www.drdh.org

*DRDH has launched a new website:  
www.drdh.org*

**- Connecting our Community with Care - Programs and Services:**

16 bed medical floor

14 bed Long-Term Care Centre  
(Four Seasons Lodge)

24/7 Emergency Department

EORLA Laboratory

Telemedicine Suite

North Renfrew Family Health Team

Gift Shop

Diagnostic Imaging including the Ontario Breast Screening Program

Physiotherapy Clinic

North Renfrew Family Services

**DRDH HAS IMPLEMENTED TRIAGE UPON ARRIVAL**

The Deep River and District Hospital has implemented patient flow changes that will mean significant improvements for patient safety.



As of February 6, 2018 the DRDH aligned its process to best practices and has implemented triage upon arrival.

Rather than registering first, the current standard of care is for patients to be assessed by an experienced Registered Nurse upon arrival to the Emergency Department. Timely triage assessment allows staff to prioritize level of urgency and facilitate access to physician care based on the acuity of the patient. Triage upon arrival ensures efficient patient flow and increases both patient safety and appropriate delivery of care. Patients will be asked to sit in the red chairs until they have been triaged by a nurse, and then they will be directed appropriately. Only after they have been triaged will patients be asked to register.

Want to stay informed about everything going on at DRDH? You're in luck, "**The Zinger**", our monthly newsletter, is now available online at: [drdh.org/publications](http://drdh.org/publications)



**"PAY-by-PLATE" PAID PARKING IMPLEMENTED**

Thank you to everyone who has paid for parking and helped preserve DRDH's services and ability to provide exceptional care. If you have not yet tried out the new kiosks, please be aware that you will need to know your vehicles licence plate and be prepared to pay with either a credit card or COINS of exact change. Also, please remember to pay

for parking when you arrive at the Hospital, not when you leave. Failing to pay for parking may result in being ticketed or being towed at the owner's expense. The rates for parking are as follows:

- \$5 for 24 hours
- \$30 for a 30 day pass
- \$300 for a 365 day pass

Parking fees for volunteers, who are registered with the Hospital, will be waived while these individuals are volunteering on site. In addition, a system is in place to provide free parking to those accessing the Food Bank, as well as North Renfrew Family Services.

UPDATES

# ACHIEVEMENTS

## Board of Directors

### *Community Partners Group*

- The Hospital formed a Community Health Partners Group in the fall of 2017 to engage our communities on relevant issues which impact our catchment area. Membership of the group includes representatives from Canadian Nuclear Laboratories, Garrison Petawawa, our local municipalities and more.

### *HIS Cluster Alignment*

- In September, the DRDH Board endorsed that the DRDH sign an agreement with The Ottawa Hospital to be our Hospital Information System (HIS) Partner.

## Deep River and Area Food Bank

- Able to assist a total of 182 families in 2017, 36% of whom have children.

## Human Resources

- Standards of Behaviour of Excellence adopted across the organization.

## Diagnostic Imaging

### *Breast Screening*

- Cancer Care Ontario has named the Deep River and District Hospital as the top performing facility in the province of Ontario for Ontario Breast Screening Program (OBSP) Wait Times—time from abnormal screen to diagnosis for cases with tissue biopsy for the 2016/2017 fiscal year.

## Medicine (Nursing)

- Acquired new equipment to aid in the delivery of care (CADD pumps, GlideScope, bladder scanner, slit lamp, physio ultrasound, and more).

## Medical Affairs

### *Emergency Staffing*

- Dr. John Ballantyne recruited under the Emergency Department Recruitment Program to work full time in our Emergency Department.

## Communications

### *Document Management*

- Implemented document management system (PolicyMedical) in Spring of 2017.

### *Website*

- Launched revitalized website in June of 2017 to be in compliance with accessibility standards as per the Accessibility for Ontarians with Disabilities Act.

### *Phone System*

- Implemented new phone system in July of 2017.

## Information Technology

- Electronic Health Records Steering Committee implemented.
- IT helpdesk portal implemented for staff to submit IT needs and requests.

## Food Services

### *Silver Award*

- Achieved the Champlain LHIN Healthy Foods in Champlain Hospitals Silver Level. DRDH was the first to reach this impressive milestone among the 20 participating institutions in our region.

## Family Health Team

### *Medical Staff*

- Dr. Steve McLeod joined the Family Health Team in September 2017.

## Palliative Care

- Learning Essential Approaches to Palliative Care (LEAP) training courses were offered twice during the year

## Long Term Care

- MOH inspection during the month of November, where the Four Seasons Lodge received NO orders.

+ MANY MORE!

## DRDH CELEBRATES STAFF AND PRESENTS ERNIE MIELKE AWARD

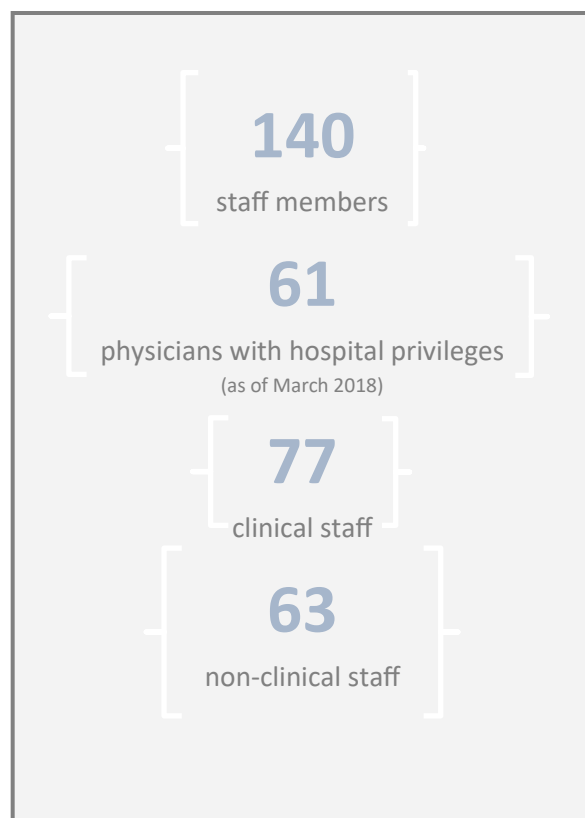
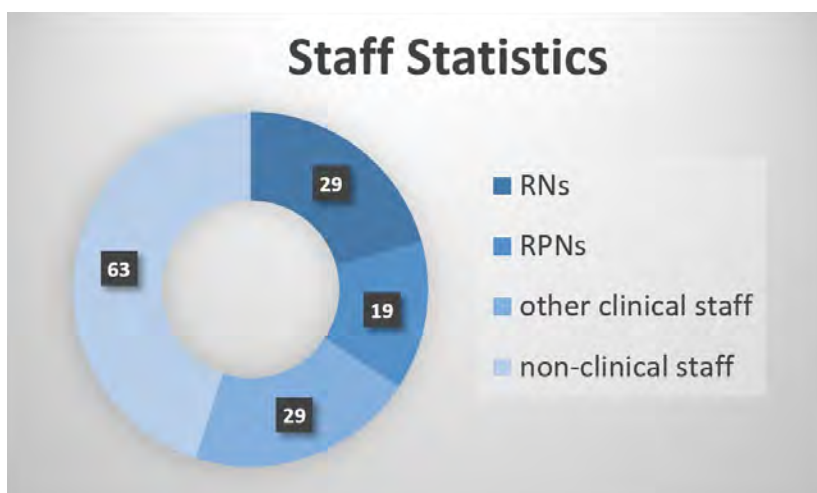
**Marian Walsh (second from the right) was presented with the 2018 Ernie Mielke Award at the Deep River and District Hospital's annual Employee Recognition Event. Pictured here, from left to right, is DRDH Supervisor of Food Services - Bill Proulx, DRDH Chief Financial Officer - William Willard, award winner – Marian Walsh, and DRDH Chief Executive Officer - Richard Bedard.**



On April 11, 2018, the Deep River and District Hospital hosted the annual Employee Recognition Event where the staff service and Ernie Mielke awards are presented.

The Ernie Mielke Award is presented annually to an employee who has been nominated by their peers in recognition of their dedication, positivity and demonstration of the Mission, Vision and Values of the organization. This year the award was presented to Marian Walsh, who works tirelessly in the dietary department cooking for, and serving patients and residents.

This year, the Hospital awarded 5-year pins to five employees, a 10-year pin to one employee, 15-year pins to six employees, a 20-year pin to one employee, a 25-year pin to one employee, and a 35-year pin to one employee.



## HOSPITAL AUXILIARY REPORT

The Deep River & District Hospital Auxiliary have been serving and supporting our community with great pride for 44 years and we have made donations to our Hospital amounting to \$1,379,274 through our Hospital Gift Shop and the Whistle Stop downtown. In the same time we have donated 359,031 hours of volunteer labour. We are very proud of this accomplishment.

We have a very dedicated group of volunteers who donate their time and energy all year long. They volunteer at the Whistle Stop, the Hospital Gift Shop, Evening Nutrition, Breast Screening Program, Palliative Care Program, and the Four Seasons Lodge. A large number of volunteers give their time at the Whistle Stop, which is located downtown Deep River.

All the money we raise comes from the Whistle Stop and the Hospital Gift Shop, neither of which would be in operation without our dedicated group of volunteers.

Each year we provide a donation of \$10,000 for the Sprouting Speech Preschool Speech & Language Program for children in the area.

Our Annual General Meeting is held at the end of April each year, and the volunteers enjoy a luncheon supplied by the Bear's Den. This past year, a silent auction was held with proceeds going to the Four Season's Lodge for incidental expenses.

At the AGM in April, the Auxiliary donated \$60,000 towards the replacement of the Nurse Call System. Another \$60,000 was committed to the project for next year as well.

We would like to thank the staff of the Deep River and District Hospital who are always ready to give their assistance when we need it.

### THANK YOU EVERYONE!

- Eileen Burke, DRDH Auxiliary President

### What equipment have we purchased?

In 2017-2018, the Auxiliary provided the funds for the following capital needs of our hospital:

Over-bed tables ( <i>contributed towards the cost</i> )	\$6,600
Bladder Scanner	\$16,350
Vitals Machine for Four Seasons	\$4,300
Glidescope ( <i>contributed towards the cost</i> )	\$12,000
<i>*provides safe intubation to support breathing in an emergency</i>	

**TOTAL:** \$40,000





# HOSPITAL FOUNDATION REPORT

The Deep River and District Hospital Foundation has been working hard all year to raise funds for equipment to sustain the exceptional services offered at the DRDH. Look at all the activities the Foundation has been up to! The Northern Credit Union Charity Golf Tournament brought in an amazing \$14,000 this year; the annual Kitchissippi Run donated \$6,000 and the CNL Black Bears Hockey tournament donated \$15,000. Other major fundraising sources were the first ever Daddy Daughter Ball, which was a sold-out event that brought in \$10,000, and the Catch the Ace weekly lottery which is still ongoing and has raised over \$11,500 so far. We also had a number of initiatives to increase the awareness of our Foundation within our local communities. We sold tickets at Summerfest, ran the confection stand at the Deep River Players show Anything Goes, and held a number of staff spirit days at the Hospital. We also held a donor appreciation event to say thank you to our valued donors on whom we depend. We continue to rely on the generosity of our communities through the Circle of Giving monthly donation program and from those who have made donations in memory of a loved one.

We have also received a number of major donations this year. A donation from the MacCready family allowed us to purchase a new Slit Lamp for our Emergency Department. An anonymous donor gifted \$25,000 towards new equipment for the Hospital and Dr. Donald Beauprie donated \$20,000 in stocks in loving memory of his wife Jean, who served as the Chair of the Hospital Board for a number of years.

To all of those who have contributed time, energy, and money this year, **WE THANK YOU!**

Here is to making 2018-2019 even more of a success!  
- Ashley Pardy, DRDH Foundation Executive Director

## What have we purchased?

In 2017-2018, the Foundation provided the funds for the following capital needs of our hospital:

Physiotherapy Ultrasound Equipment	\$2,800
Slit lamp <i>*used to examine the eye and remove foreign bodies</i>	\$10,000
<b>TOTAL:</b>	<b>\$12,800</b>

**The Foundation is saving up in preparation to launch a major fundraising campaign in 2018/2019. Stay tuned for more information!**



*Your Hospital... Together we are the future!*



DEEP RIVER AND DISTRICT HOSPITAL STRATEGIC PLAN

GOAL # 1

DRDH is a recognized rural health leader in quality and patient safety.

GOAL # 3

DRDH is an innovative and resource-conscious provider of exceptional patient/client care.

GOAL # 5

DRDH is the local leader in enhancing population health.

GOAL # 2

DRDH is the driving force of an exemplary patient/client journey.

GOAL # 4

DRDH is a small rural hospital employer of choice.

GOAL # 6

DRDH is seamlessly integrated with all partners.



DRAFT

**INDEPENDENT AUDITOR'S REPORT**

We have audited the accompanying financial statements of Deep River and District Hospital, which comprise the statement of financial position as at March 31, 2018, and the statements of operations, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

***Management's Responsibility for the Financial Statements***

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian public sector accounting standards for government not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

***Auditor's Responsibility***

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the organization's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organization's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

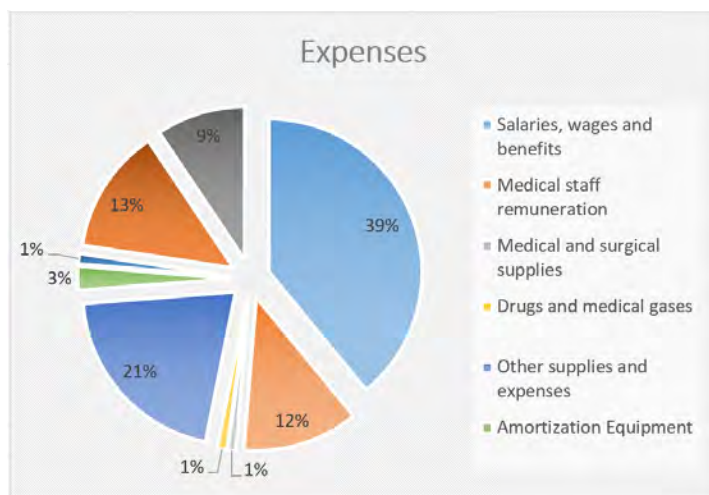
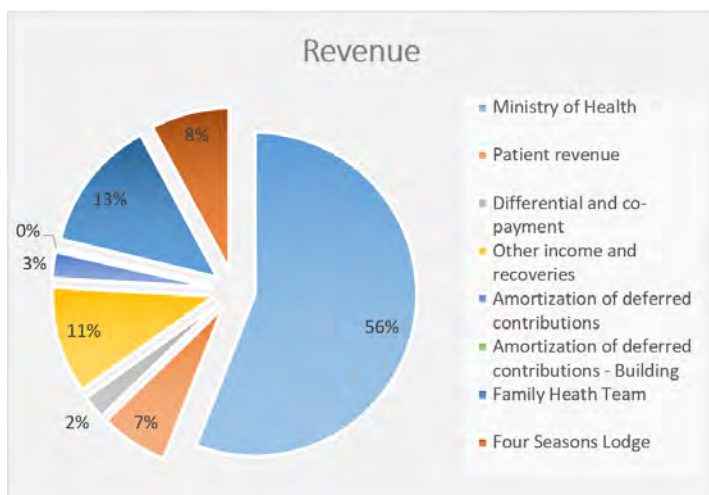
***Opinion***

In our opinion, the financial statements present fairly, in all material respects, the financial position of Deep River and District Hospital as at March 31, 2018, and the results of its operations and its cash flows for the year then ended in accordance with Canadian public sector accounting standards for government not-for-profit organizations.

**Pembroke, Ontario**  
**May 31, 2018**

**Leach Bradbury Accounting Professional Corporation**  
**Authorized to practise public accounting by**  
**The Chartered Professional Accountants of Ontario**

## SUMMARIZED STATEMENT OF OPERATIONS



DRDH Financial Operations	Year Ended March 2018	Year Ended March 2017
<b>Revenue</b>		
Ministry of Health	\$ 7,831,243	\$ 7,638,908
Patient revenue	\$ 956,144	\$ 1,087,666
Differential and co-payment	\$ 336,835	\$ 379,091
Other income and recoveries	\$ 1,499,707	\$ 1,163,249
Amortization of deferred contributions	\$ 370,483	\$ 409,221
Amortization of deferred contributions - Building	\$ 35,829	\$ 35,492
Family Health Team	\$ 1,862,660	\$ 1,699,389
Four Seasons Lodge	\$ 1,105,077	\$ 1,056,565
<b>TOTAL REVENUE</b>	<b>\$ 13,997,978</b>	<b>\$ 13,469,581</b>
<b>Expenses</b>		
Salaries, wages and benefits	\$ 5,505,216	\$ 5,538,153
Medical staff remuneration	\$ 1,729,566	\$ 1,760,422
Medical and surgical supplies	\$ 112,809	\$ 129,978
Drugs and medical gases	\$ 146,315	\$ 140,978
Other supplies and expenses	\$ 2,908,567	\$ 2,446,640
Amortization Equipment	\$ 354,159	\$ 381,177
Amortization Buildings	\$ 153,483	\$ 125,271
Family Health Team	\$ 1,862,719	\$ 1,699,326
Four Seasons Lodge	\$ 1,327,116	\$ 1,347,388
<b>TOTAL EXPENSES</b>	<b>\$ 14,099,950</b>	<b>\$ 13,569,333</b>
<b>DEFICIENCY OF REVENUE OVER EXPENSES</b>	<b>\$ (101,972)</b>	<b>\$ (99,752)</b>
<b>LHIN H-SAA MARGIN</b>	<b>\$ 20,162</b>	<b>\$ 7,111</b>

## COMMITTEES OF THE BOARD

JANET GOW, CHAIR

### GOVERNANCE COMMITTEE

The mission of the Governance Committee is to ensure that appropriate governance processes are in place within the Corporation, the Hospital, Four Season's Lodge, Family Health Team and the Board. It establishes an annual work plan based on input from the other committees, the Board Chair, the Chief Executive Officer, and the Chief Nursing Officer and is responsible for the development and review of all governance policies. It annually evaluates the Board and its Committees' performances in relation to their responsibilities, goals and objectives. It plays a vital role in enabling the Board to perform its role effectively and ensuring that the Hospital is managed and operated efficiently and effectively.

#### Mission

*To provide a broad range of high-quality healthcare services for our local communities.*

#### Vision

*Every client's healthcare experience will be exceptional.*

DICK RABISHAW, CHAIR

### STRATEGIC PLANNING & PARTNERSHIP COMMITTEE

The Strategic Planning and Partnership Committee is responsible for ensuring a strategic plan is in place, which serves as the framework for all other internal plans. Our committee works closely with senior leadership to ensure strong communication and relationship development between the Hospital its stakeholders.

The last fiscal year of our current strategic plan has been

busy with medical staff recruitment. The North Renfrew Family Health Team welcomed a new doctor to the team which has enabled many families in are area who were without a family doctor have one. Our Emergency Department experienced turnover with a few local physicians stepping back from the department and the addition of a new full-time emergency physician.

In October 2017, the Community Health Partners Group was established. The purpose of the group is to engage our communities in collaborating on issues which impact on its catchment area. As an initial primary issue this will include, but is not limited to, physician retention and recruitment.

The organization has been undergoing a strategic refresh process as part of the development of a new 3-5 year Strategic Plan. A wide variety of stakeholders have been involved in the process, including staff, physicians, patients, Board Members, our LHIN and community partners. We will be excited to share the new plan with the community in the summer of 2018.

CHRIS CARROLL, CHAIR

### RESOURCE AND AUDIT COMMITTEE

The principal function of the Resource and Audit Committee is to provide oversight on the uses of financial, capital and human resources of the Hospital. The Committee oversees the financial operations of the organization, apprises the Board on financial issues/risks, and recommends appropriate actions for maintaining financial viability of the Hospital. The Committee endorses the annual budget for Board approval, which is legislated to maintain a balanced position.

The organization has implemented departmental dashboards, which capture data monthly and allow for budget variances to be reviewed in a timely manner and to support ongoing decision making.

During the 2017/2018 year, DRDH received one-time funding from three Ministry programs, exceeding \$1.5 million, which allowed for several much-needed building upgrades. These upgrades included the replacement of the air conditioning system, back-up generator, emergency exit lighting, kitchen exhaust fan, as well as building automation system and IT upgrades.

DRDH managed to remain balanced in 2017/2018 despite a challenging financial landscape in the healthcare industry.

## COMMITTEES OF THE BOARD CONT'D

JANNA HOTSON, CO-CHAIR

### PATIENT & FAMILY ADVISORY COUNCIL

The Patient and Family Advisory Council, which was established in late 2016, serves in an advisory capacity providing feedback and input related to the experience of patients and their families at the Deep River and District Hospital.

Over the 2017/2018 year, the Council accomplished a number of goals that they established for themselves. For example, the Council provided recommendations regarding visiting hours, as well as patient rights and responsibilities. The Council also provided input into the development of the 2018/2019 Quality Improvement Plan as well as the changes that took place in the Emergency Department waiting area to accommodate upgrades in the triage workflow process. Patient advisors provided input on the patient experience in terms of wayfinding and communication in the Emergency Department. One of our patient advisors also sat on the Accessibility Committee and helped provide input into the development of the 3-year Accessibility Plan for the organization. The Accessibility Plan for 2018-2021 can now be accessed on the Hospital website.

Looking ahead to 2018/2019, the Patient and Family Advisory Council is looking to grow their membership to further integrate and share the patient voice throughout the organization. If you are interested in keeping the patient experience central to all who help make every patient's experience exceptional, we would love to hear from you. To get involved in the governance of your local hospital, through serving as a volunteer Member of the Patient and Family Advisory Council, you are encouraged to submit your expression of interest to Amy Joyce by email at [amy.joyce@drdh.org](mailto:amy.joyce@drdh.org) or by phone at 613-584-3333 x 7100.



YEVGENIYA LE, CHAIR

### QUALITY & PATIENT SAFETY COMMITTEE

The Quality and Patient Safety Committee is responsible for monitoring and reporting on quality performance of the organization to ensure that the quality of care, hospital services, and patient safety are all at their highest achievable levels. The Committee consists of representatives from the Board, medical staff, hospital staff and the community.

A key achievement for the Committee last year was the formation of the Patient and Family Advisory Council, which continues to meet quarterly and provide feedback and input to the Quality and Patient Safety Committee. The Patient and Family Advisory Council is looking to grow their membership to ensure that the experience of patients and their families is strongly represented.

The Committee is responsible for overseeing the preparation of the annual Quality Improvement Plan and the Patient Safety Plan. Quality Improvement Plans (QIPs) outline actionable goals and are a way for us to measure how we are reaching those goals. Some of the goals that were included on the QIP for 2017-2018 are mandatory (from Health Quality Ontario), and some are added based on Hospital priorities. Our QIP combines the Long-Term Care, the Family Health Team as well as acute care. It can be accessed on our website for those who are interested in seeing the plan in full. The Patient Safety Plan, which can also be accessed on our website, is a three year plan to ensure we can continue to deliver safe quality care to the people in our care. Some items on the Patient Safety Plan were identified through the completion of risk assessment checklists, and some are from Accreditation Canada. The Patient Safety Plan outlines our priorities and the ways we will respond to patient safety concerns while making system wide improvements.

The Committee is also responsible for the oversight of quality and risk management programs, which have seen a tremendous amount of development over this past year.

Over the upcoming year, the Committee will be monitoring the organization's preparation for accreditation by Accreditation Canada, which will take place in late 2019.

# BOARD OF DIRECTORS 2017-2018



From left to right: Chris Carroll, William Willard, Ross Judd, Janna Hotson, Dick Rabishaw, Brian Cheadle, Jenifer Bradley, Janet Gow, Mike Ward and Richard Bedard. *Missing from photo: Ken Philipose, Yevgeniya Le, Dr. Tom Greenfield, Dr. Kathy Kipp*

### Elected Board Members

- Dr. Janet Gow, Board Chair and Chair of Governance Committee
- Dick Rabishaw, Vice-Chair and Chair of Strategic Planning and Partnership Committee
- Brian Cheadle, Treasurer
- Yevgeniya Le, Chair of Quality and Patient Safety Committee
- Chris Carroll, Chair of Resource and Audit Committee
- Jenifer Bradley, Ross Judd, Ken Philipose, Michael Ward

### Community Members Appointed to Board Committees

- Kathryn Tilley, Quality and Patient Safety Committee
- Anne Giardini, Resource and Audit Committee
- Mary Carroll, Strategic Planning and Partnership Committee



### Senior Leadership Team

- Richard Bedard, Chief Executive Officer
- Dr. Tom Greenfield, Chief of Staff
- William Willard, Chief Financial Officer / Vice President of Operations
- Janna Hotson, Chief Nursing Officer / Vice President of Clinical Operations
- Michelle Robertson, Human Resources Officer
- Sandra Griffiths, Family Health Team Executive Director
- Amy Joyce, Executive Assistant and Communications Coordinator

# Deep River and District



# Hospital

*The Deep River and District Hospital receives funding from the Champlain Local Health Integration Network (LHIN).  
The opinions expressed in this publication do not necessarily represent the views of the Champlain Local Health Integration Network.*