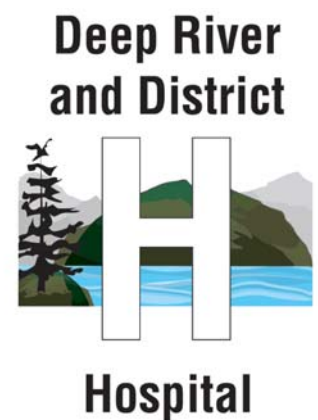


Deep River and District Hospital

Annual Report 2008-2009

“Every Client’s Healthcare
Experience Will Be Exceptional”



Mission

To provide a broad range of high-quality health care services for our local communities.



Vision

Every client's healthcare experience will be exceptional.

Values

Caring

- We improve the quality of life in our client communities through education and leadership in health care services.
- We value and support our community of care-givers.

Excellence

- We deliver high quality health care services close to home and facilitate access to secondary and tertiary care as needed.
- We manage our affairs prudently within our financial realities and regulatory compliance requirements.

Safety

- We ensure the highest levels of patient safety.
- We ensure a safe working environment for our care-givers.

Innovation

- We have the courage to evaluate and embrace new operational methods, practices and technologies.

Partnering

- We champion collaboration and partnership with other Health Service Providers to ensure seamless and efficient health care.

Integrity

- We are honest and transparent in all we do.
- We respect and maintain the highest levels of client privacy.
- We adhere to the highest level of professional standards and respect in our interactions with each other, with our clients, and with our service partners.



Throughout the course of eight weeks, DRDH staff "Huddled" for small team discussions and posted our results on the "Huddle Hotspot" board. We focused on our vision and values to deepen our understanding of how these translate into employee behaviors.

Report from the Board chair

This past year has been an exciting and busy one. We started out saying good bye and thanks to Tim Gehrke who acted as our interim CEO for the previous year. And the search for our new CEO began. We engaged Promeus, a professional search agency, to help us find the perfect person. The Search Committee, comprised of several of our Board members, the CEO of Pembroke Regional Hospital, our interim CEO, and a member of the Hospital Foundation, met and interviewed several viable candidates over a period of several months, some from far away, and some close to home. We were pleased to be able to inform you in December 2008 that we had hired Larry Schruder, a leadership resource with home grown roots, a concern with local health issues and keeping health coverage close to home.



Joyce Colton
Board Chair

I would be remiss if I didn't say thank you to our temporary Co-CEO's, Lianne Wheeler, our Chief Nursing Officer, and Stacey Mortson, our Chief Financial Officer, who went above and beyond their duties to ensure the smooth running of this hospital after Tim's departure and prior to Larry's arrival in January of this year.

"I thank each one of you for your unending and tireless support over the past year."

The Strategic Plan for the Deep River and District Hospital was the first big venture for Larry and the Board. A Planning session was held over a weekend at the end of January. Corporate members, town councils, local health providers, and members of the business community were invited to join the Board of Governors as we sat down to pave the way forward with new directions and initiatives for the Hospital. The current strategic plan was developed with the help of Jim Whaley, a rural health consultant and advocate.

-Joyce Colton

In keeping with goals and objectives for our hospital, our accountability to the Local Health Integration Network (LHIN) for a commitment to fiscal responsibility and health care services has been fulfilled.

The North Renfrew Family Health Team now has 1300 patients enrolled and this 25% increase in patients enabled us to retain our second nurse practitioner. Recruitment plans for a physician are ongoing and looks promising as potential candidates are coming forward and looking at this area in which to practice.

Special thanks go out to the women of the Hospital Auxiliary for their financial help in getting the Palliative Care Suite completed last fall and, after the open house to show off this unit, the Suite received its first patient.

Meetings with the respective Board Executives and CEOs of both DRDH and PRH have occurred over the past year and progress in building working relationships continues to move forward. As well, managers from both hospitals have met to discuss areas where both hospitals can benefit, share and learn from each other. A major area of discussion was building on our existing buying power, a program that has been in place for several years between our hospitals.

DRDH actively participates in the development of the Champlain LHIN information systems plan. Our current state of readiness and technology enabled us to become the second hospital in this LHIN to participate in their major IT project for the year, the Diagnostic Image Repository.

Report from the Chair continued

DRDH has positioned itself as a valuable partner in delivering seamless, cost effective and quality health care within this LHIN. By Actively participating on many LHIN and regional committees, DRDH has developed a reputation as a strong partner in Health Care Delivery in the region. Patient Satisfaction scores are consistently well above provincial norms. In the past, and in going forward, DRDH has and will continue to be an organization of choice for accessing medical and emergency care for people both inside and outside of our catchment area.

The Board is comprised of several committees, each important in its own work to ensuring the Board continues its work in the best possible way and in keeping with current government legislation. Our Management and Quality Review committee had an especially busy year this year. In addition to reviewing the hospital's Quarterly Balanced Scorecard, the committee reviewed all of the policies that pertain to Administration and Governance.

Several administration policies related to governance issues were changed to governance policies, thereby putting them directly onto the responsibility of the Board rather than Administration of the Hospital. Administration policies were reviewed and amended as required. Those covered by other policies or by government legislation were deleted. A complete review of the by-laws of the corporation will be undertaken over the next year to ensure their applicability with current government legislation, governance best practices and local governance needs.

Every three years, the hospital goes through a voluntary accreditation process. Our turn is fast approaching and this year, for the first, time the Board of Governors is being taken to task. Each of our Board members was asked to complete a survey of our understanding of policies and practices as they relate to our hospital. We are now in the process of examining our weaknesses and finding ways to improve our governance. I must point out that during the accreditation process, hospitals are judged against one set of standards, not by the size of our hospital.

The Board wishes to thank our many volunteers, especially the Auxiliary who continues to support the hospital in many capacities. The Auxiliary continues to operate the Gift Shop, which has many different gift ideas, and the Whistle Stop. These women spend thousands of hours each year doing what they love, providing care and comfort to and for the residents of the hospital and Four Seasons Lodge. We thank them for their unending support.



"The strategic plan for the Deep River and District Hospital was the first big venture for Larry." Pictured from Left to Right: Fred Adams, Deputy Mayor Laurentian Hills, Larry Schruder, DRDH CEO, and Ann Aiken, Mayor Deep River.

Our doctors and nurses continue in their tireless roles to ensure that we have the best care possible. We must also remember our lab, therapy and support team departments who provide the services and treatments needed to help keep us well and healthy.

To the Board of Governors, I thank each one of you for your unending and tireless support over the past year. Each of you plays a key role on the Board and on the

committees on which you serve. Pravin Shah steps down this year from his two-year tenure and as Chair of Public Relations. Joan Hallet leaves the Board after serving nine years, chairing several committees over this period of time, as well as serving as Board Chair. Dave Murray's present term has come to an end and he has chosen to pursue other interests; we will miss his financial guidance as Treasurer of the Corporation. I thank each of them for their service to their community, and Joan, for your guidance and support to me over the past couple of years

I step down from the Board this year, knowing that the future of this hospital is in good hands and knowing that the Boards of Governors to come will continue to ensure that the vision and mission of this hospital will be to keep you, our public, its priority.

“With this long-awaited appointment of a full-time CEO, the corporation’s leadership team is now fully staffed.”
-Joyce Colton

DRDH Welcomes New CEO

On December 3, 2009 the Board of Governors announced the appointment of our new Chief Executive Officer, Larry Schruder. The long-time Upper Ottawa Valley resident assumed the critical community health care leadership role in January. Larry joined us after being with Nortel for 13 years where he commuted from his family’s full-time residence in the Pembroke area. His leadership responsibilities at Nortel stretched throughout Nortel’s global operations. Prior to being at Nortel, Larry spent 15 years with AECL in a variety of Human Resource and Organizational Development roles.

During the last six years Larry has been increasingly applying his leadership and human resource skills to local community health care initiatives as a member and executive on the Board of Directors of the Pembroke Regional Hospital. He has a well-earned reputation as a community champion for local physician recruitment efforts, and is a founding member of

the new West Champlain Health Communities Corporation.

“ With this long-awaited appointment of full-time CEO, the Corporation’s leadership team is now fully staffed. I am confident the Deep River and District Hospital Corporation is well-positioned to build upon its exceptional service reputation in meeting the health care needs of Deep River and surrounding communities,” said Joyce Colton, DRDH Board Chair of the recent CEO appointment.

Excellence

Report from the Chief Executive Officer

Larry Schruder
Chief Executive Officer



Since joining this organization in January of this year, two realities have been repeatedly driven home to me: (i) the very high regard and importance that the communities that we serve place on this Hospital and the health care that it provides; and (ii) the passion, professionalism and dedication to patients and clients that all of the staff at this Hospital demonstrate each and every day. These two realities make my job as CEO meaningful, rewarding, busy, challenging – but most of all – energizing and engaging.

Every new leader brings their own personal style and focus to an organization – and after a few months, my approach to organizational life and health care is hopefully coming into focus for the Community, the Board, the leadership team, the employees and the patients and clients. The first few months on the job have been centered on understanding the business and the players for this health care facility. The outcomes of the Strategic Planning retreat in January of this year have been transformed into a Strategic Planning document to guide our efforts over these next 3 years. A copy of this plan is included in this annual report. We have gone through a operational planning process to ensure that our leadership efforts are focused on success related to

these plans. In addition, we did a deep dive with all of our staff on gaining a more complete understanding about exactly what our vision and values mean to each of us – and what behaviors are required to succeed. If you have been around the hospital over these past few months, you undoubtedly have seen some eye-catching posters related to huddles – all about internalizing these vision and values statements.

Externally, we have been working quite hard to strengthen relations with our other health care partners in this and nearby communities. We are now enjoying increased collaboration and interaction with the North Renfrew Long Term Care Center, the Public Health Unit, CFB Petawawa, The Petawawa Centennial Health Center, The Pembroke Regional Hospital and many others. And we will continue to grow stronger as an organization through our increased partnering activities. Externally, we are also become more transparent and open about our business, putting more effort into getting our story out to the communities we serve – through press coverage and a new community health publication.

Report from the CEO continued

Internally, we moved to take decisive action on our emergency department. As our patient volumes continue to climb towards 17,000 visits annually, it became quite obvious that we needed additional nursing hours in the emergency department for the safety of patients and staff. We also added some additional receptionist hours to ease the administrative burdens that come from this higher volume.

supplement the efforts of our current team of dedicated physicians, if we are going to achieve our strategic goals related to better health care. We have already had 3 great community visits in recent weeks - and there are more on the way. But it takes many such community visits to secure a new doctor.

This organization has accomplished great things over this past year - but we cannot take all of the credit. Behind the staff and leadership of this hospital stands a wall of volunteers that make it all possible – from the Board, to the Auxiliary, the Foundation, individual family members and the many community volunteers that step forward to help us deliver better health care. I want to express my appreciation to the many of you who have gone out of your way to help us do our job better – and especially for welcoming me into this role and into your communities. I look forward to standing in front of you for years to come and telling you our organizational stories of the past year.

2009 is an accreditation year which requires a great deal of management and employee effort to be successful. Accreditation is like the ISO 9000 quality standard in manufacturing – it is a set of stringent quality and process requirements that we must pass an audit on from external examiners – and the organization has been readying itself for this 2009 audit for many months already.

Regarding physician recruitment, we have made some major progress on putting the necessary recruitment pieces in place to win at this very competitive game. We clearly must secure new resources to

“I want to express my appreciation to the many of you who have gone out of your way to help us do our job better– and especially for welcoming me into this role and into your communities”

-Larry Schruder

Integrity

Chief of Staff Report

Deep River and District Hospital has had another very busy and successful year.

Our PACS (Picture Archiving system) in radiology is up and running full time. It has resulted in quicker turn around times for reports, easier transfer of information to other physicians and facilities through CDs and has been well received by the physicians in the community. Our Palliative Care suite has been used by a number of families in the community. Staff have received positive comments about both the physical facilities and the care that loved ones are receiving in our institution. This is directly related to the excellent staff we have at Deep River and District Hospital, our nurses, our dietary staff, our cleaning staff and the staff responsible for the facility.

Emergency continues to grow busier – we are having patients drive a considerable distance to attend our ER. Although this is a tribute to our reputation as an excellent facility in which to receive care, it has come with a price tag of increasing wait times. It has also placed a strain on our diagnostic imaging, laboratory department and our ER nurses to keep up with the volume.

The medical staff remains unchanged. We are continuing our efforts to attract

new physicians to the area, and Deep River in particular. Physicians host medical students regularly through the year. The important role of exposing young doctors in training to the joys of practice in rural medicine is increasingly important as studies have shown that students who come from rural areas and/or have early exposure are more likely to practice in rural areas.

New this year is the start of clinics in Deep River in gynecology. We have only just begun the clinics, but are hopeful that they can expand to fulfill a much needed role for well-woman care for those in our area without a family physician. Our ongoing and expanding telemedicine programs provide specialty care for our local community without the need to travel to the city. They are well received by the patients attending them. For the future we continue recruitment efforts for staff – not just physicians, but nursing, laboratory and diagnostic imaging as well. As well we will be focusing on better communications with other organizations and with the public. Expanding electronic health services will also play a role in the near future with better ability to communicate directly between lab, imaging and the hospitals involved in care of each patient.



“Our hospital and medical staff have benefited greatly with the installation of the Picture Archiving Communication Systems (PACS)”

DRDH Benefits from PACS Installation

Our hospital and medical staff have benefited greatly with the installation of the Picture Archiving Communication Systems (PACS) made possible through several hundred thousands of dollars support from the DRDH Foundation. This enables our medical staff to get X-ray information read more quickly by our radiologists. DRDH has also been accepted as

the second hospital within the LHIN to join the regional Diagnostic Imaging Repository right behind Queensway Carleton Hospital. This is considered a major success for a small rural hospital. The repository enables doctors off site to have your X-ray available at their fingertips when you arrive at another facility for further treatments.

Some Operational Numbers... and the Stories Being Told

- Bed occupancy up 11.2 % from 07/08
- Approximately 1/3 of our patient days are supporting people not needing acute hospital care
- Non-ALC patient days up 5.5%

- Up 8.8 % from 07/08
- Half of visits coming from east of Chalk River
- Very high patient satisfaction scores

Operational Metric	08/09	07/08
Total in-patient days	3906	3570
% Alternate care (ALC) days	38.8%	35.4%
Non-ALC patient days	2391	2267
Emergency Visits	16688	15343
Diagnostic Imagery Visits	9979	9846
Laboratory Tests Performed	135,111	133,791

- Up 1.4% from 07/08
- More efficient now with PACS
- Steady demand for ultrasound, especially from CFB Petawawa

- Up 1% over 07/08
- Includes community blood sampling service
- Additional 15,000 are tests sent to external labs for processing

Board Committee

Members

Chair– Dave Murray

Joyce Colton

Rosanne Burtch

Joan Hallett

Paul Fehrenbach

Finance & Audit Committee

The Finance and Audit Committee oversees financial operations of DRDH, and apprises the Board on financial issues/risks relevant to the financial viability and sustainability of the Hospital.

The principal function of the F&A Committee is to review the Corporations monthly, quarterly and annual financial statements and recommend their approval or otherwise to the Board. The Committee is responsible for nominating and recommending the appointment of the Corporation's external auditors. The Committee also has responsibility for overseeing an effective system of internal control, risk management and investment policy. In fiscal year 08/09, the Committee reviewed financial statements and related materials, met with, and received reports from the external auditors and recommended re-appointment of the Audit firm.

The Committee received reports on internal controls, insurance, financial plans and related accountability agreements with the LHIN. Special emphasis was placed on enhancing short and longer range planning for capital equipment and hospital infrastructure projects. Financial terms and conditions covering leasing arrangements for the Energy Retro-fit project were reviewed and recommended prior to final approval.

The Hospital's investment policy was reviewed and appropriate revisions recommended. The committee also completed a detailed review of terms and conditions to finalize establishment of the Deep River District Physiotherapy Centre as a non-profit corporation affiliated with the Hospital. Other matters reviewed included, financial issues related to the Family Health Team, the Emergency Department and the Four Seasons Lodge.

Management & Quality Review Committee

Board Committee Members

Chair– Ailsa Eyvindson

Jean Cooper– community

member

Jim Macmillan

Joan Hallett

Joyce Colton

Pravin Shah

Dr. terry McVey

The MQR committee was very busy this year, meeting a total of eight times instead of the usual four. The key focus was a complete review of the hospital's administration and governance policies. Some new policies were added to cover areas for which no suitable policy previously existed.

In addition, the committee continued its regular review of the hospital's Balanced Scorecard, which provides performance indicator trends in four key areas of hospital performance (Patient Access / Outcomes, Organizational Health, System Integration and Financial Health.) The format of this scorecard continues to evolve to better suit the needs of the hospital and the Board.

As part of the 2009 accreditation process, weaknesses were identified in some aspects of how the Board performs its duties. Those areas relevant to the MQR committee were reviewed and opportunities for improvement have been identified.

The committee was not able to complete a review of the Hospital By-laws in the 2008-2009 period. This will be deferred to the 2009-2010 season.

Special thanks are due to all members of the committee for their extra time and effort this year.

DRDH Committed to Patient Safety

The patient safety indicator *Hand Hygiene*, is now a mandatory reporting initiative. DRDH is ranked among the top five spots for hand hygiene compliance in the province based on audits.

“The monthly reporting to the MOHLTC as well as the publishing of relevant infection control safety indicators on the DRDH website will enable our hospital to improve performance and strengthen public confidence in

our health care services,” Rita Montgomery, Infection Control and Occupational Health Nurse at DRDH says, “The Hand Hygiene program at DRDH has proven to be very successful as evidenced by the 93.2% compliance rate. This is an excellent achievement, given that the Ontario baseline compliance rate is less than approximately 60%.” Research shows that hand hygiene is the single most effective way to reduce the risk of

healthcare-associated infections, and Deep River and District Hospital has demonstrated a strong commitment to ensuring the overall safety and well-being of patients. The Deep River and District Hospital remains committed to patient safety. In addition to hand washing DRDH is required to report on C-Difficile and MRSA cases.

Safety

Committee Members

Chair– Jim Macmillan

Ailsa Eyvindson

Ann Aikens

Fred Adams

Kathy O'Connor

Mike Ward

Ruby Dimayuga

Shelley Rolland

Tammy Stewart

Lianne Wheeler

Larry Schruder

Family Health Team Advisory Committee

The Family Health Team Advisory Committee provides advice to the Chief Executive Officer of the Deep River & District Hospital in respect to:

- Opportunities to increase local access to, coordination of and integration of primary care services and providers,
- Primary care programs,
- Matters intended to enhance health and wellness education,
- Opportunities in respect of a comprehensive recruitment strategy for health care professionals in a family health team environment,
- Opportunities for full utilization of Information Technology, and
- Matters relating to policy, budget, goals and objectives, capital purchases, core strategies and community consultation.

Highlights for 2008/09 include approval of the Terms of Reference and an increase in the patient roster serviced to 1350 from

900. To increase its visibility in the North Renfrew communities, the committee held its two most recent meetings in the municipal offices of Deep River and Laurentian Hills, and our next meeting in September is scheduled for Head, Clara and Maria. Work continues in laying the groundwork for the successful recruitment of a family physician to the North Renfrew Family Health Team (NRFHT).

Hiring a family physician for the NRFHT remains a critical priority for 2009. The initial business plan of the NRFHT was developed in 2006 and is no longer current. Updating this business plan to ensure a sustainable NRFHT is another key priority for 2009.

I would like to thank all the members of the Family Health Team Advisory Committee for their contributions this year.



Physician Recruitment Continues

It is very difficult for community residents to experience exceptional health care if they do not have regular access to a family physician – and there are approximately 2500 current residents in the Deep River and District Hospital's catchment area who do not presently have a family doctor or a relationship with the Family Health Team that they can call on for an appointment. For many of these residents, their only option is a visit to an emergency department when health concerns arise. We also need to strengthen our team of family physicians to provide services in our ever-increasing Emergency Department.

We are not alone in this recruitment challenge – there are more than 135 medically under-serviced communities in Ontario competing for the same scarce resources. DRDH and the local communities have launched a re-energized physician recruitment process that is generating new possibilities for our communities. We attended a major recruitment fair in Montreal in February that has provided us with several promising leads of graduating physicians that want to

explore opportunities outside of Quebec. One week ago, we were one of the community sponsors of a special education day for all the family medicine residents at the University of Ottawa Medical School and also found this day very profitable in terms of recruitment leads. This fall we will be part of the 5-day annual recruitment tour that visits all of the major medical schools in Ontario.

DRDH has partnered with the local municipal governments to create a "top-of-the-line" financial and relocation incentive package to increase our potentials of success. There is a strong, creative and highly participative community visit process in place to ensure an "out-of-this world" visit experience to our communities for visiting doctors. And by the time that you are reading this report, we will have completed our third community tour by visiting physicians.

We look forward to the day when we are able to announce our recruitment successes to our community. Until then, a group of dedicated volunteers and Hospital staff continue to work on addressing this critical need.

Long Term Care Advisory Committee

Board Committee Members

Chair- Rosanne Burtch

Joyce Colton

Pravin Shah

Dr. Tom Greenfield

Alan Ross, Family Rep

Thea Turcotte,

Family Rep

The mission statement of the Long Term Care Advisory Committee is to review, report and advise the Board of Governors on issues and matters affecting the Four Seasons Lodge at the Deep River and District Hospital.

The Four Seasons Lodge is a 14 bed long term care Home managed by the Hospital. We are extremely grateful to the staff, volunteers and family members who ensure that the residents enjoy the highest quality of life possible.

During this last year, the terms of reference were reviewed and revised by the Long Term Care Advisory Committee and were presented to the Board of

Governors. The Chief Nursing Officer also gave updates on the monthly events calendar and other activities planned for the residents. Resident representatives also brought forward cares and concerns of the residents or their family members to be discussed and resolved. The Chief Nursing Officer also reported on the minutes of the Resident Council meetings.

The Chief Nursing Officer provided Long Term Care updates to the Long Term Care Advisory Committee. The MOHLTC (Ministry of Health and Long Term Care) paid their surprise visit in March for the annual review with no statements of unmet standards or criteria being issued.

Palliative Care Suite Opens

The new and updated palliative care suite opened in October 2008 after a great deal of fundraising and several revised plans. This 3 year project is now a reality and many members of our community have benefited from the peace and tranquility that the suite offers. The staff have embraced a new model of care that ensures a comfortable transition to the end-of-life.

Families have a place to call home during their difficult time of saying goodbye to a loved one. We could not have completed this endeavor without the tremendous support from our communities. The Ladies Auxiliary provided

exceptional financial support and have also recruited volunteers to take specialized training in palliative care in order to support patients and families. The Carr family has also once again supported our palliative care program when Carol made a donation in memory of Joe. We also recognize the previous support of palliative care, especially the DeGeer/Cutler families. It is difficult when the loss of a loved one is imminent. We are thrilled to be able to offer this tremendous program to our clients.



Pictured from left to right : CNO Lianne Wheeler, President of Auxiliary Annebell Harvey, Donor Carol Carr, and Chair, DRDH Board of Governors Joyce Colton. Photo Courtesy of: North Renfrew Times.

Caring

Strategic Planning Committee

The strategic Planning Committee is responsible for:

- ongoing review of the Mission, Vision and Values for the hospital,
- ensuring the Board involvement in development and adoption of a strategic plan consistent with the above and with local needs and provincial expectations,
- reviewing DRDH operations for consistency with strategic plan and directions
- providing the Board with regular briefings and reports on implementation of strategic directives and initiatives,
- conducting an annual review and update of the strategic plan
- advising the board of the potential impact on DRDH of local, regional, provincial and national policy initiatives that impact health care,
- ensuring Governor's orientation and awareness of educational workshops/events in support of Board skill development,
- developing Board policies related to its governance role and to support the Board's effective oversight of the affairs of DRDH.

Board Committee

Members

Chair– Paul Fehrenbach

Joyce Colton

Dave Murray

Mike Blore

Dr. E Noulty

The Strategic Planning Committee met six times since the last AGM. We began the 2008/2009 year by initiating a review of the mission vision and values, with input from DRDH management and key staff. The new Mission, Vision and Value statements were presented at the 2009 January DRDH Strategic Planning Workshop, and were subsequently modified based on public input at the workshop. The revised Mission, Vision and Values were subsequently approved by the Board of Directors in 2009 February and are now being incorporated into Hospital operational decision making by the CEO, Managers and Staff.

Another important committee activity this year was the planning and organization of the Strategic Planning Workshop in 2009 January. The Workshop was led by an external facilitator, Jim Whaley, who is well-respected in Health Care matters affecting rural communities and their hospitals. The approximately 50 participants included community members, representatives from key health care partners, municipal councils, the Champlain Local Health Integration Network, members of the DRDH Auxiliary and Foundation, and members of the Hospital Board of Directors, Management Team, and hospital Staff. The workshop participants reviewed the changes in Provincial and LHIN health care expectations, and the needs of our local communities, and developed six key strategic directions for DRDH to follow in the next three years. Our new CEO, Larry Schruder played a strong leadership role in working with the Committee and Jim Whaley to digest the valuable input from the workshop and to formulate that into our new Strategic Plan, including strategic directions, goals, objectives and measures, for the period 2009 to 2012. The new Strategic Plan was approved by the Board in 2009 March and is publicly available on the DRDH website. It is also being distributed in hardcopy at this meeting. Many thanks to all who have participated in the development of our new Strategic Plan.



Pictured from left to right: Paul Fehrenbach, CEO Larry Schruder, Board Chair Joyce Colton and strategic planning retreat facilitator Jim Whaley.

Larry has used the new strategic plan as the basis for developing the DRDH Operational plan for 2009/2010. A number of the new goals and objectives have resulted in the need for modifications to the DRDH Balanced Scorecard for performance reporting, which are also underway by DRDH Management and Staff.

Public Relations Committee

Board Committee

Members

Chair- Pravin Shah

Joyce Colton

Mike Blore

During 2008-09, the Public Relations Committee continued its work in publishing the newly re-generated DRDH newsletter "Viewpoint Quarterly". The distribution was extended by placing copies at the local pharmacies in addition to the hospital premises.

With the appointment of a new CEO, the committee decided that the preparation, publication and distribution be handed over to the Hospital Administration. Larry and his staff took up the challenge. The DRDH newsletter received a new identity and is now called "Health Matters" and the first publication was distributed during

the month of April to members of the community who are serviced by the local Canadian Postal Service.

The CEO is also active in furthering the community communications by visiting and making presentations on health & DRDH matters to various local civic bodies. A pro-active approach is being undertaken by the Hospital Administration by providing timely and periodic articles on health matters in the local newspaper (North Renfrew Times) .

Deep River and District Physiotherapy Centre

The Deep River and District Physiotherapy Centre is a not-for-profit Corporation providing modern clinical care to residents of North Renfrew County, in-patients of Deep River and District Hospital (DRDH) and the residents of Four Seasons Lodge.

The clinic that is very bright, spacious and well-equipped is located within DRDH. The department maintains a clinical affiliation with the University of Ottawa, and offers clinical placements for physiotherapy and assistant students. Some of the services offered by the clinic include: clinical assessments and treatment plans, modalities, manual therapy techniques, development and progression of exercise programs and neurological rehabilitation (strokes).

The treatments are used to treat some of the most common conditions from back and neck pain to knee and ankle injuries

With the incorporation of the Physiotherapy Centre in 2006, the Board of Governors of DRDH ensured local access to timely rehabilitation for residents of the Upper Ottawa Valley. Without this, a patient would have to travel more than 50km each way to attend the nearest outpatient clinic. No referral is required to see a physiotherapist: however, medical insurance companies often require a referral from a medical doctor to provide payment of services.

Innovation

Ontario Telemedicine Network at DRDH

The Ontario Telemedicine Network (OTN) is responsible for using technology to deliver secure, manageable and quality-controlled connections between patients and healthcare specialists across the province.

“The Hospital has offered OTN for roughly 8 years now and since the initial consultation, the popularity and referral numbers have grown in leaps and bounds,” OTN Coordinator, Laurie Menard said. “The number of patient referrals has been increasing steadily because the benefits of using the program are so rich.” OTN provides patients living in this rural area with an opportunity to connect with healthcare providers who might otherwise be inaccessible. Not only does it provide a more relaxing atmosphere with professionals the patients know and trust, but there is also potential for saving a significant amount of time and money.”

Delivery of healthcare services and education takes place via two-way videoconferencing and through use of the latest in tele-diagnostic instruments high-resolution patient examination cameras, and digital imaging facilities.

“The future of OTN and ‘virtual health-care’ capabilities are endless. We want to continue our efforts to ‘take geography out of health care’ and provide our patients with the highest level of access possible”, said Larry Schruder, CEO. “This Hospital will continue to participate in innovative ways of using new technology to bring health care closer to home for the community”.

Currently the Hospital holds clinics for diabetes (endocrinology), heart (cardiology), dermatology (skin), post-operative bone and joint clinics (orthopedics), lung and breathing clinics (respirology), pediatrics (CHEO), and psychiatry and sleep clinic follow-ups.



Ontario Breast Screening Program Offered at DRDH



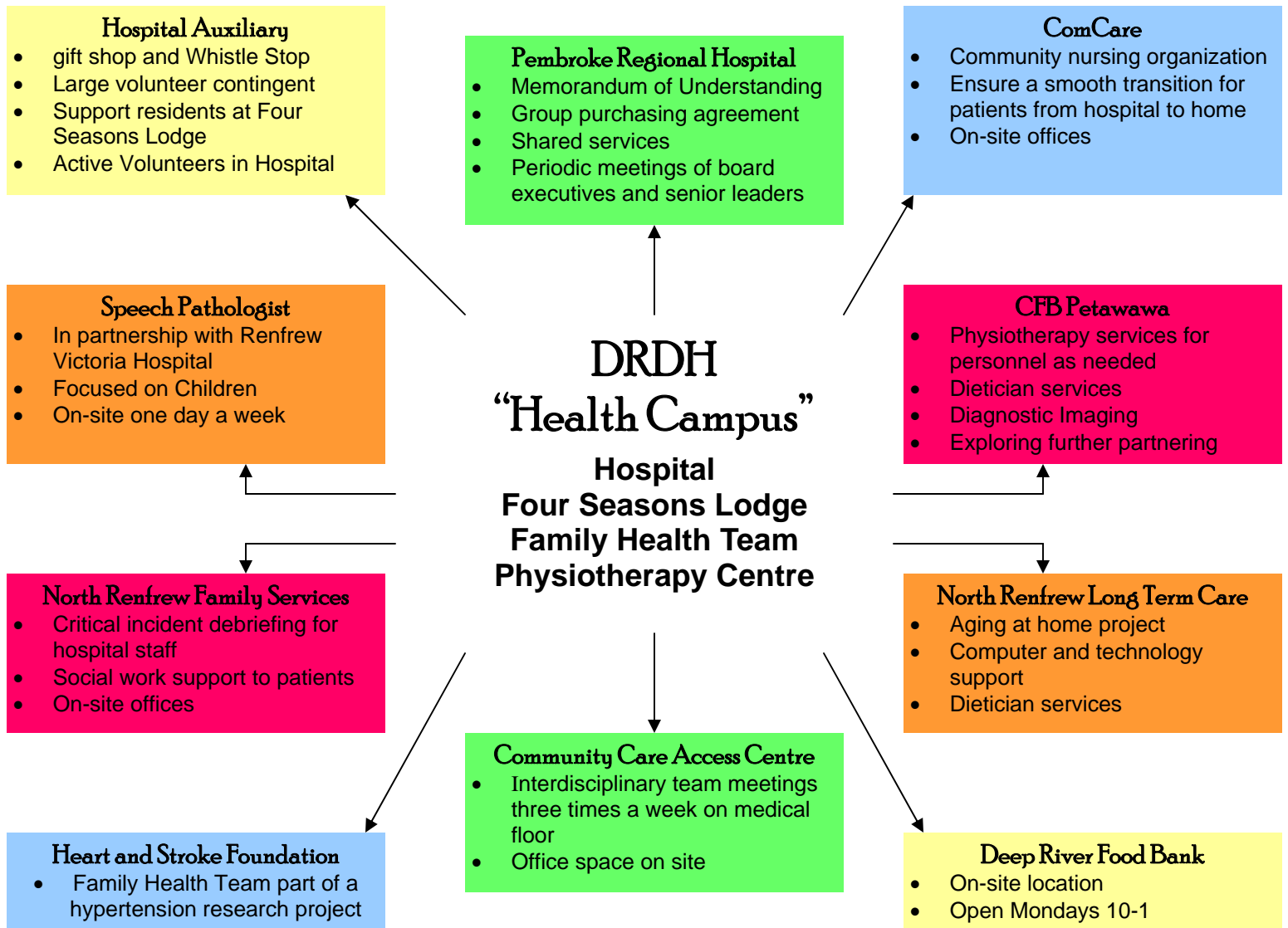
DRDH started offering the Ontario Breast Screening program in May 2007. It is funded by the Government of Ontario, it doesn't require a referral and offers women over 50, with no previous breast problems, free breast screening examinations. The results are sent directly to the patient and the family physician if the patient has one she visits. The program includes mammography (breast-x-ray) and a physical examination of the breasts by a physician or

nurse.

“The benefit of regular breast examinations is the early detection of breast cancer. DRDH is thrilled to offer this free program to the women in our communities. Early detection is the key to preventing breast cancer; keeping mammography wait times short by having this program available might be able to save a lot of lives,” says Terry Corbett, manager of the OBSP program at DRDH.

Strategy in Action...

Building Our World of Partnerships



Partnering

For more than a 35 years, Deep River and District Hospital has been providing exceptional health care to those in need. It's our mission to provide a broad range of high-quality health care services for our local communities. We are your community hospital, and it remains our privilege to serve your health care needs.

Health Matters