# Deep River and District Hospital

# THE ZINGER

**Deep River and District Hospital Newsletter** 

November 2018



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#### ACCREDITATION IS ONE YEAR AWAY



Monday, November 19, 2018 began the one-year countdown to our Accreditation! Pictured above is Tabitha Kearney, our Manager of Quality, Risk and Innovation, at the Accreditation launch celebration. The week following the celebration, information posters were displayed daily in the front lobby to highlight the Standards that will be the focus of our Accreditation process. Each daily quiz offered staff a chance to win a Catch the Ace ticket!

#### COMPLETE THE WORKLIFE PULSE SURVEY TODAY

One vitally important step in Accreditation preparation is gathering staff feedback about work-life balance, engagement and safety. The **Worklife Pulse Survey** is an important part of this process. It is an online survey that asks for your opinions on different aspects of your work environment. The results help us identify areas that may need to be improved.

#### The Worklife Pulse Survey is still open, but will close on November 30, 2018.

All responses are **completely anonymous**. Completed surveys are sent directly to Accreditation Canada. A summary of responses will be received in the new year.

Use the link below to go to the login page where you will enter the organization code and password. Instructions are available once you log in.

Link: https://www3.accreditation.ca/OrgInstrument

Organization Code: DEERI

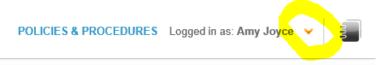
Password: 796AAAD9

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#### POLICY MEDICAL—TOP TIP

Do you ever get frustrated with PolicyMedical "timing out" on you? Here's a top tip to help prevent that from happening:

Once you are logged in, hover over the orange arrow beside your name:



Then select, "user preferences", and make sure the "keep me logged in" box is checked off.





#### CNL MAKES DONATION



Canadian Nuclear Laboratories' Waste Program recently donated a number desk-side recycling and waste bins to us, as they are no longer in use at CNL due to a change in their waste collection program. This initiative effectively diverts these bins from landfill, reduces energy required for recycling and invests in the local area's environmental stewardship. Thanks CNL!





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EGM INSURANCE OFFERS SAVINGS FOR STAFF

# Save up to 25%

on Home & Auto Insurance with our EXCLUSIVE group rates!

Deep River Hosptial is a member of the Upper Ottawa Valley Chamber of Commerce, which means savings for you!

# Contact us today!



270 Lake Street Pembroke, ON (613) 735-0621 7 Hilda Street Petawawa, ON (613) 687-SAVE

info@egminsurance.com egminsurance.com

#### DRDH REMEMBERS FALLEN SOLDIERS



From November 1 until November 11 this year, a "Fallen Soldier" table was erected in the lobby to honor and remember those who have fallen in the line of duty.

Wreaths were also laid on behalf of all staff, in memory of all fallen, at the Remembrance Day ceremonies in Deep River, Chalk River and Petawawa.



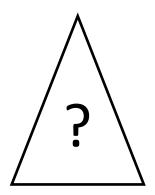
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WANT TO WIN A TIM CARD?



Patients that are high fall risks will wear a bracelet that has FALL RISK on it, and there will be a white sign with a coloured triangle on it outside the patients room to indicate that the patient is a high fall risk. Charts will also have a sticker on the spine to indicate that the patient is a high fall risk.

What colour is used to signify fall risk on the patient's bracelet, room signage and chart sticker?



Email the correct answer to Amy at amy.joyce@drdh.org before December 17 to be entered in a draw to win a Tim Card!

#### IT SECURITY—DOs and DON'Ts

We will be sharing one of Sophos's Top 10 IT Security Dos and Don'ts in each Zinger to help spread the word about IT security. Here is this month's tip:

# Be cautious of suspicious emails and links

- Hackers try to steal email lists from companies. Company email addresses are valuable to hackers, allowing them to create fake emails from "real people".
- Always delete suspicious emails from people you don't know...and never click on the links.
- Opening these emails or clicking on links in them can compromise your computer without you ever knowing it.



#### DUE DECEMBER 31, 2018

The next mandatory education modules focus on staff safety (body mechanics, lifting and back care) and patient/resident safety through fall prevention and management.

These modules have been assigned to all staff on Surge Learning.

All staff are required to complete the following course and applicable quiz:

⇒ General Lifting, Body Mechanics, and Back Care: A Module By Surge Learning

As an alternative, a transcript version of the course is available. If you complete the transcript version, please send me an email to ensure you are marked as completed.

The course includes a short quiz to confirm knowledge. When completing the course, please ensure that you hit the button "I have completed the course", enter your password and hit "Submit". The pass rate for the quiz is 75%. If you do not meet the pass mark, the test can be retried.

The following DRDH site specific education has been assigned for employees to complete a review:

- ⇒ DRDH Fall Prevention and Management Education (All Staff)
- ⇒ Fall Prevention and Management Program Clinical Practice Policy (Nursing & Ambulatory Care Allied Health)
- ⇒ Head Injury and Post Fall Routine Clinical Practice Policy (Nursing & Ambulatory Care Allied Health)
- ⇒ LTC Fall Prevention and Management Program LTC Policy (RPN & RN)

LTC Head Injury and Post Fall Routine—LTC Policy (RPN)

The deadline for completion for all staff for all of the above modules and guizzes is:

December 31, 2018.



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**POLICY UPDATES** 

The following new/updated policies can now be found on PolicyMedical:

Education and Training

Leave of Absence

Education Training Request Form

Credentialing of Regulated Health Professionals

Overtime and Banked Time

Hours of Work

Expense and Reimbursement

Expense and Reimbursement Form

Security of the Organization

Fall Prevention and Management

Fall Prevention and Management-Long Term Care

Head Injury and Post Fall Routine

Head Injury and Post Fall Routine—Long Term Care

## Deep River and District Hospital Partners with Garrison Petawawa



The Deep River and District Hospital and Garrison Petawawa's 2 Field Ambulance staged a collaborative disaster response exercise on November 7 and 8. Pictured here during the exercise, from left to right, is Major Carly Montpellier, DRDH Board Vice-Chair Dick Rabishaw, DRDH CEO Richard Bedard, DRDH CNE Janna Hotson, LCol Steven Pirie, and Col Louis Lapointe.

2 Field Ambulance, a Canadian Armed Forces unit based out of Garrison Petawawa, collaborated with the Deep River and District Hospital to conduct a disaster response exercise on November 7 and 8, 2018. This exercise was aimed at fostering military and civil cooperation and preparedness. For the Hospital, this exercise was also a learning opportunity to practice surge capacity, establish an emergency operations center (EOC), and practice working with external agencies.

The exercise began in the early hours of November 7, when news was received that a passenger aircraft was having mechanical difficulties and would likely have to make an emergency landing at the AH Smith Memorial Airport just outside of town. Members of 2 Field Ambulance quickly erected two field care delivery units in the hospital parking lot, one to assist with triage, and a second to act as a medical/urgent care ward. The two organizations had to act quickly to determine how many patients could be accepted into the Hospital's Emergency Department, which was continuing business as usual with real patients, and which would be seen in the military tents. Things escalated quickly following the plane's emergency landing, and military ambulances began delivering patients with a wide variety of simulated injuries and conditions by mid-morning.

Continued on next page...

One of the patients brought into the Emergency Department was outfitted in a surgical cut suit, which enabled the hospital clinical staff and one lucky medical student to practice performing a cricothyroidotomy, and inserting chest tubes on a life-like patient. Throughout the day, between the hospital's Emergency Department and the field care delivery units, care was provided to twenty critical, ten semi-critical and ten stable patients. In addition, a number of casualties had theoretically succumb to their injuries at the site of the emergency landing. Patients treated in the hospital's Emergency Department, with the support of the laboratory and diagnostic imaging, were able to be stabilized and prepared for transport to other facilities where they would receive further care in a real-life scenario. The field care delivery units in the parking lot continued to provide care to a number of patients overnight and into the next day.

LCol Steven Pirie, Commanding Officer of 2 Field Ambulance, indicated that in his 25 years of experience, he has never seen a military unit and civilian hospital partner for a joint exercise. Although this exercise was unique, it was very fitting for the two organizations considering 2 Field Ambulance is responsible for providing support in the event of major air disasters across Canada.

The exercise, as intended, came with lessons learned for both organizations. Overall, things went smoothly and the exercise was considered extremely beneficial. Richard Bedard, President and CEO shared that, "the commitment from our staff, physicians, the military and everyone else who was involved enabled us to conduct a successful exercise that tested our ability to respond in the event of a large scale event with mass casualties. We would like to thank all those involved for making this a tremendous success".

The organization would like to extend a sincere thank you to our partners at Garrison Petawawa for presenting us with such a unique learning opportunity. We look forward to fostering our relationship further and pursuing additional partnership opportunities moving forward.



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FOUR SEASONS LODGE RESIDENTS AND FAMILIES GOT IN ON THE ACTION TOO



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# NEW HEALTH CARE VISION FOR DEEP RIVER AND AREA

The Deep River and District Hospital (DRDH), Four Seasons Lodge and North Renfrew Family Health Team are pleased to share our 2018-2022 Strategic Plan with the community. The Strategic Plan allows us to act with a clear purpose, and helps us set priorities among competing demands for resources—both human and financial. The plan will keep our organization focused on the future while managing day to day operations that bring our priorities to life.

Our health care system is undergoing constant change and increasing demands that exceed available resources. How we provide care must be a reflection of these changing circumstances. Building on our strong foundation of dedicated and compassionate staff and physicians, we will continue to find innovative and collaborative ways to manage our resources wisely, and at the same time, improve the patient experience.

Patient satisfaction survey results from 2017-2018 place DRDH among the highest in the province, well above the provincial and Champlain LHIN averages. The survey indicates that ninety percent of patients "would recommend" DRDH, compared to the provincial average where only sixty-five percent of people "would recommend" the hospital they visited. Further, DRDH received an "overall rating" score of seventy-five percent, compared to the provincial average of fifty-five percent. Both of these indicators improved in 2017-2018 from the already high scores received the previous year. DRDH aims to build on its successes and continue to administer the wide variety of programs and services that support the needs of our communities.

Encompassing the Hospital, the Four Seasons Lodge and the Family Health Team, we have established a new vision—our shared purpose, and a new mission—our service mandate. Our Strategic Plan is now organized around the four Strategic Directions of people, integration, sustainability and seniors, which will collectively focus and steer the organization's efforts from 2018-2022. Our core values will continue to guide our decisions and define our actions and interactions with each other, our patients and our communities.

The development of our Strategic Plan included consultation with patients, residents, employees, management, physicians, the Board of Directors and external partner organizations. Surveys were completed by over 290 community members and 50 staff members. In addition, over 70 other individuals participated in either phone or face-to-face meetings to provide their input. The summation of this feedback was combined with analytical information and evaluated by the Board of Directors a two-day planning retreat in June 2018. The development of this Strategic Plan was thorough and involved a collaborative effort - we thank all those who participated.

Our 2018-2022 Strategic Plan sets a dynamic course for Deep River and District Hospital, the Four Seasons Lodge and the North Renfrew Family Health Team, and we look forward to the journey with you.

Continued on next page...

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# Deep River and District Hospital Four Seasons Lodge North Renfrew Family Health Team

**Our Vision** 

An excellent, compassionate health care experience, every time.

Our Mission

Caring for every person like a loved one, within an integrated health system.

In pursuit of our Vision and the fulfillment of our Mission



To achieve our commitment to stakeholders



We will leverage our resources to deliver value through programs and services and key internal processes



In keeping with our Values:

#### **PEOPLE**

Continue to provide excellent compassionate services.

We will continuously enhance physician and staff recruitment, retention, engagement and opportunities for growth.

Develop and expand internal and external partnerships and collaboration.

**INTEGRATION** 

We will create an integrated organization with a single identity (including Mission, Vision & Values).

#### **SUSTAINABILITY**

Ensure sustainability of services into the future.

We will balance financial stewardship with the delivery of positive outcomes through the provision of organizational objectives.

#### **SENIORS**

Strengthen services for Seniors.

We will seek opportunities to support our aging population as it grows over the coming years.

Caring

Excellence

Safety

Integrity

**Partnering** 

**Innovation** 

#### STAFFING UPDATES



**Dylan Fryia** 

**Kiera Whitelock** 

We are pleased to welcome two new members to the Diagnostic Imaging team this month. Dylan and Kiera are both Medical Radiation Technologists (MRTs). Please join us in welcoming these two to the organization!

CANADIAN CANCER SOCIETY RECOGNIZES DRDH



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### Mind-Body Balance

The jury is in: your physical health affects the mind, just as the mind influences the body. And while this creates a chicken-egg conundrum (which came first the chronic back pain or the depression?), there is good news. By connecting the dots and taking steps to improve your physical health, your mind will also reap the rewards and vice versa.

#### Tied up in knots: stress, anxiety and the body

Long-term exposure to stress and anxiety can put your brain chemistry and body into overdrive, or a state of distress, disrupting their natural balance. The effects? A weakened immune system, aggravated arthritis, trouble concentrating, fatigue, headaches, muscle tension, insomnia, chest pain, high blood pressure or even worse: science has linked long-term exposure to stress to certain cancers, heart disease, and an increased likelihood of accidents.

#### The pain of depression

Many studies point to the link between depression and physical ailments. It can increase the risk of type 2 diabetes, heart disease, cancer and worsen chronic conditions like asthma. Recent research also shows depression disrupts the brain's production of serotonin and norepineprhine, chemicals that influence the way the brain perceives pain. This means that a person with depression may feel physical pain more acutely.

#### Finding equilibrium

So how can you improve the health of your body and mind? Tip the scales towards complete well-being and away from anxiety, stress and depression by:

- Squeezing calm into your everyday routine. Rather than cramming relaxation time into a two week vacation or a one hour yoga class, only to instantly forget about it once back in the real world, instil moments of calm into your day. Go for a walk, take a five-minute time out to stretch, meditate or connect with a friend.
- **Moving.** Physical activity is one of the quickest and healthiest ways to shed excess stress and anxiety (not to mention excess pounds) and infuse your brain with mood-enhancing endorphins. Thirty minutes of moderate exercise at least 3 times a week is often enough to take a load of stress off and lift the spirits.
- Laughing (or even crying). Laughter increases your heart rate, improves circulation and releases mood-boosting chemicals in the brain. If your predicament is no laughing matter, crying can equally help, eliminating the build-up of stress hormones in the body, and reducing muscle tension and blood pressure.
- Sleeping soundly. A good night's sleep will help recharge your body and mind, improving your focus, mood and immune system. Trouble sleeping? Exercise early in the day and avoid caffeine and late night snacking to ensure a restful slumber.
- Eating well. You are what you eat isn't far from the truth. Treat your body to a well-balanced diet low in saturated fats and rich in vegetables, fruit, whole grains and lean proteins and feel your spirits soar. Limit consumption of alcohol, caffeine and junk foods which drag you down physically and mentally.

Maintaining both a healthy body and mind can help to increase your energy and mental focus. By implementing the strategies above, you can begin to feel connected and balanced in all aspects of your life.

Article adapted from our Employee and Family Assistance Provider: https://www.workhealthlife.com/Article/Read/mind-body-balance

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#### TAKE OUR KIDS TO WORK DAY



November 14, 2018 was Take Our Kids to Work Day. This year, we were host to five students who got to experience a day in a heath care setting. A big thanks to Mike Wilson for his initiative in giving these students a great introduction into laboratory medicine!

#### 2019 STATUTORY HOLIDAYS

The following is a list of statutory holidays to be recognized in 2019:

HOLIDAY	PREMIUM DAY (if worked)	DAY RECOGNIZED (if not a normal working day)
New Year's Day 2019	January 1	January 1
Family Day (ONA/Non Union)	February 18	February 18
Good Friday	April 19	April 19
Easter Monday	April 22	April 22
Victoria Day	May 20	May 20
Canada Day	July 1	July 1
Civic Holiday	August 5	August 5
Labour Day	September 2	September 2
Thanksgiving Day	October 14	October 14
Remembrance Day (ONA/Non Union)	November 11	November 11
Christmas Day	December 25	December 25
Boxing Day	December 26	December 26
New Year's Day 2019	January 1	January 1

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#### **FOCUSED ON YOU**

On November 13, 2018 the Deep River and District Hospital Foundation held a breakfast event to share information about the Focused on You capital campaign.



#### TRIM THE TREE

Join the Foundation at the "Light up the Night" all day event on December 1 from 10:00 am—5:00 pm at the Deep River Town Hall.



# Trim the Tree

Help Trim the Tree and support your local hospital. Donations accepted at the DRDH Foundation Office or Reception and as part of the "Light up the Night"- all day event.

You can also donate online at:

www.drdhfoundation.com and state "Trim the Tree" and, if you wish, who the donation is in memory, or in honour of, and we will acknowledge your donation on the tree in the Town Hall.

Bell = \$10

Ball = \$20

Snowflake = \$100

Star = Major Sponsor

This holiday season, give the gift of health

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**EMERGENCY PREPAREDNESS CORNER** 

## Shades of a Code Grey - A Story of Success

By Sandra Griffiths, Family Health Team Executive Director

The morning of Thursday November 15 started out like any other morning at the North Renfrew Family Health Team. The phones were ringing, patients were calling, and appointments were being booked. Nursing staff were bustling around getting the office ready for the day, ensuring the liquid nitrogen containers were filled and lab results were picked up. The clinic flow was operating as it should, with patients being brought into exam rooms and patients leaving exam rooms after their appointments. Suddenly, random comments started floating around like, "hey is your computer getting this error? I've never seen this error before". Staff would calmly restart their computers as per usual, since we all know the re-start method often proves effective. However, the trend of "the computer isn't working, why do I keep getting this server error?!" could be heard throughout the building.



# "This is it," I thought, "today is the day our server dies!"

At 8:53 am, IT was contacted about the "new" error message regarding connecting to the server. IT quickly took action and connected with Telus, the EMR vendor to troubleshoot, and slowly every computer throughout the FHT stopped working.

Below are the impacts the situation had on patient care and how staff overcame these issues:

- Staff were unable to open patients charts of those who were already in exam rooms waiting to be seen, thus making follow-up on anything (labs, medical imaging, prescription renewals, consult reports) challenging. Any patient information taken during appointments was done 'old school'. Yes, we're talking about putting pen to paper for documentation purposes. This documentation then had to be transcribed into the correct patient's chart later.
- 2. Staff were unable to access the appointment schedule to see who was checking in, who was waiting, or re-book patients after they had been seen. When administration staff answered the phone, they had to advise patients they would have to call back to schedule an appointment as our EMR was not working.
- ⇒ Quick thinking led us to access the patient portal (HealthMyself) to retrieve practitioner's schedules. The schedules for each practitioner were printed out to determine who was waiting, who was next, and to check off patients from the list as they arrived. Practitioners and nursing would then look at the list of arrived patients, call out patient names, and bring them to an exam room.
- ⇒ We soon learned that patient self-serve kiosk check-in was still working, as patients were waiting and not responding to any name that was being called. Staff could not see that they had checked in. A sign was placed on the kiosk, advising patients not to use.
- ⇒ Patients who required a follow-up appointment had their names put on a list for admin staff to call back once the EMR was back up and running.
- ⇒ Patients who had an appointments scheduled later on in the morning were notified and advised they would be rescheduled once the EMR was back up and running.
- ⇒ How could we access patient demographics? Through the HealthMyself Patient Portal as this portal is directly linked to the EMR but does not require the EMR to operate.

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#### EMERGENCY PREPAREDNESS CORNER CONTINUED...

All this collaboration was occurring amongst staff on how best to look after the patients in the office during this time. The two veterans of the group, Lesley Buckingham and Sandra Griffiths, who had lived through the EMR Crash of 2012, had flashbacks of the magnitude of situation and all the work required to get the EMR operational again. However, we had to have faith in Garry Hartlin, Jeremy Palmer and IT Support at Telus. As the minutes ticked by and the anxiety grew about the slow death of the server, Garry and Jeremy worked with Telus to solve the problem. They provided us with updates and timelines as to when the EMR would be operational and solutions to ensure this wouldn't happen again. Garry informed us that we have to baby the server along, until November 30<sup>th</sup> when the data migration happens to the new server.

Around 11:00 am, Garry walked proudly into the administration area of the FHT and announced the problem was solved and our EMR should be back up and running. Low and behold, our EMR was operational again.

Thank you to staff for working together to ensure that you could meet patients' needs to best of your ability during that time and thank you to Garry and Jeremy for putting the EMR back in operation.



#### PRIVACY AUDITS

In the month of November, the Deep River and District Hospital and Family Health Team conducted privacy audits for appropriate access of **260 patient files**.

Privileged or personal information concerning patients and staff at the North Renfrew Health Campus (NRHC) which includes: Deep River & District Hospital, North Renfrew Family Health Team, Four Seasons Lodge, and the Physiotherapy Center, must be treated as confidential at all times.



Each employee, physician, volunteer, and affiliate must accept personal responsibility for protecting hospital and/or personal health information.

In order to ensure compliance with PHIPA, regular auditing on all patient records is conducted.

FINANCIAL POSITION

Financial Position Based on Agreement with LHIN as of September 30, 2018:

surplus of \$2,455

HAPPY HALLOWEEN





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#### FALL PREVENTION PROGRAM

November is Fall Prevention Month in Ontario, and as such it seems like a great time to talk about the updates happening with our Fall Prevention and Management Program.

As you can see on page 7, we have updated our policy to advance a Universal Fall Prevention and Management Program for the entire health campus. This includes updating our program with the newest evidence and introducing specific fall prevention and management strategies by patient population and area for long-term care, medical, emergency and ambulatory care areas (such as the North Renfrew and Family Health Team, OTN, Physiotherapy, and Diagnostic Imagining).

## We all have a role to play!

November is fall prevention month!

Fall prevention month supports organizations and individuals to coordinate their efforts for a larger impact.

The Deep River and District Hospital, the North Renfrew Family Health
Team and the Four Seasons Lodge are participating by implementing
evidence based information on fall prevention.
Together, we can keep everyone safe.

50% of falls causing hospitalization happen at home
Falls are the leading cause of injury among older adults in Canada

Find out more and access free resources at:

www.fallpreventionmonth.ca



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**FOUNDATION NEWS** 

See Ashley in the Foundation office to grab a \$5 ticket for your chance to be the lucky winner this week!





#### **FLU SHOT REMINDER**



If you haven't received your flu shot yet this year, there's still time! Pop by and see James Elliott in the Occupational Health office, and he will be happy to vaccinate you:)

Our final vaccination rates will be sent to Public Health on December 15, 2018. As of November 9, our vaccination rate was 60%.

#### TIM CARD WINNER

Congratulations to Jeremy Palmer for correctly answering the question in the October Zinger and winning a Tim Card! Jeremy correctly answered that building a relationship, listening, acknowledging, apologizing, setting an action plan and following up is the general process for managing complaints at the point of care.

For your chance to win this month, see page 5!





YOU'RE INVITED...



Festive Fun for A11 Staff

**Hot Chocolate** 

**Cookie Decorating** 

Dress Code: Christmas Sweaters Gingerbread House Contest Judging



20th December 2pm to 3pm

DRDH CAFETERIA

OH WHAT FUN - SEE YOU THERE!

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#### **UPDATED SURGE INCIDENT FORMS**

Thanks to all the great feedback about the Surge incident reports, some updates to our current forms have been completed.

There are still 7 forms - 6 of them have been streamlined to make them easier to use (the last one will come in the new year).

A quick summary of our updated Incident forms and when to use them is below:

- Employee Incident Form This should be used whenever an employee injures themselves at work or encounters an unsafe condition (Example: unsafe patient, staff injuries).
- Medication Incident Form This should be used whenever a medication error is noted, whether or not the error reached the patient. Medication errors that did not reach the patient are NOT near misses ... they are medication errors.
- Near Miss (previously Good Catch) This should be used whenever an incident is avoided but could have potentially caused harm to staff, volunteers or patients/residents (Examples: frayed wires on electrical equipment, leaking pipes causing pooling water, errors in policies/procedures).
- Patient Fall Form this should be used whenever a patient/resident has a fall with/without injury and when there is a near fall. A near fall is not a near miss and the near miss form should NOT be used.
- Visitor Incident Form This should be used whenever an incident that primarily involves a visitor happens (Example: visitor fall or injury).
- Workplace Violence Incident Form This should be used whenever staff encounter someone who is violent/aggressive. This can include verbal violence, physical violence or threats. Anytime staff feel unsafe because of another person's actions or words this form should be filled out.

When you complete any of these incident reports, you may notice different questions or orders of questions. Currently there are no changes to the Patient Incident (not fall or medication) form. Please continue to use this form for any incident involving patients/residents that do not relate to a fall or medication. The revised format for this form will come out in the new year. If you have any questions about these forms or when to use them please feel free to reach out to Tabitha, Allison or Janna.



Is there something you would like to see appear in the next issue of the Zinger? Please submit photos and information to <a href="mailto:amy.joyce@drdh.org">amy.joyce@drdh.org</a>.

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.