

## ANNUAL REPORT 2018-2019

### **BOARD OF DIRECTORS**



Back: Keanan Stone, Board Chair; Shauna Lemenchick, Auxiliary rep; Marg Tubman; Tom Faloon; Sandi Heins; Phil Marcella; Meena Ballantyne; Dr. Steve Radke, Chief of Staff; Front: Chris Ferguson, VP Patient Care; Barb Symington outgoing Auxiliary rep; Rick Lester, Robert Pelletier, Randy Penney, President & CEO; Inset: Dr. Nicole Delbrouck, President of Medical Staff and Rob Tripp who joined the Board in Jan. 2019

#### BUDGET

We are pleased to report that we have achieved a balanced budget for the 29<sup>th</sup> consecutive year with a small surplus of \$299,840 combined operating and capital for the period ending March 31, 2019.

#### EPIC - PROJECT FUSION

RVH joined with The Ottawa Hospital to participate in a Hospital Information System and become a partner in the regional implementation with the University of Ottawa Heart Institute, Hawkesbury General Hospital, Ottawa Hospital Family Health Team and St. Francis Memorial Hospital.

RVH achieved a historic milestone with the final Epic implementation that went live June 1, 2019 at 05:00 hours.

The transition to the Epic system went smoothly across the Atlas Alliance and our many months of diligent preparation truly paid off.

Having one integrated system builds on our core mission of putting the needs of patients first. This will enable us to enhance services, accelerate innovation and provide better care. This new electronic health record system has been built to meet the specific needs of RVH patients and staff.

Our adaptability and willingness to learn is of great benefit to our patients, our community, and our organization. Our integration with the Atlas Alliance partners is another key reason for our success. The expertise and support we have benefited from is truly appreciated.

We are at the beginning of something *epic* for our hospital—an enhancement to care provision that is only going to make us better at providing patient care!

#### HIGHWAY 60 HEALTH TEAM

Ontario's new plan is to create Health Teams to improve access to services and patient experience by:

- Organizing health care providers to work as one coordinated team, focused on patients and specific local needs.
- Providing patients, families and caregivers help in navigating the public health care system, 24/7.
- Integrating multiple provincial agencies and specialized provincial programs into a single agency to provide a central point of accountability and oversight for the health care system. This would improve clinical guidance and support for providers and enable better quality care for patients.
- Improving access to secure digital tools, including online health records and virtual care options for patients, "a 21<sup>st</sup> century" approach to health care.

RVH is taking a leadership role in the development of a proposal to become an Ontario Health Team calling ourselves the "Highway 60 Health Team" (H60HT). This Team encompasses the Town of Renfrew, the communities of Golden Lake, Barry's Bay, Killaloe, Quadeville, Calabogie, Eganville, Round Lake, and as well as the municipalities/townships of Admaston/Bromley, Horton, Greater Madawaska, Whitewater, South Algonquin, Madawaska Valley, Killaloe, Hagarty and Richards, and areas of Hastings Highlands and Bonnechere Valley. Services also extend beyond those areas to residents of Whitney and Maynooth.

Meetings were been held with all the partners and Renfrew-Nipissing-Pembroke MPP John Yakabuski to develop the submission. Self-assessments were completed by 14 partners and the first draft was shared with H60HT partners and regional partners. The self-assessment is due May 15, 2019 to demonstrate that the minimum criteria are met.

Invited applicants will be informed June 3, 2019 re: submitting a full application by July 12, 2019; Full applications that demonstrate a high degree of readiness will be offered an in-person visit. The in-person visit will consist of the applicant presenting a comprehensive current state assessment of their system and a vision for patient care. Providers that demonstrate full readiness will be categorized as an "Ontario Health Team Candidate".



In 2015, RVH began a journey to implement best practices through the Registered Nurses of Ontario's (RNAO's) Best Practice Spotlight Organization (BPSO) program.

BPSOs are healthcare organizations selected by RNAO to implement and evaluate its internationally acclaimed Best Practice Guidelines (BPG). These guidelines incorporate evidence-based practice to enhance patient outcomes.

All of the required deliverables of the program were met by RVH and in April 2018 RVH achieved "Best Practice Spotlight Designation".

Throughout its three-year candidacy, RVH implemented eight RNAO BPGs that will positively impact the health and well-being of its patients. As a BPSO organization RVH belongs to an elite group of health and academic organizations across the province, nationally and internationally.

#### SECOND AND THIRD FLOOR RENOVATIONS

The pre-capital submission for the renovation of the 2<sup>nd</sup> and 3<sup>rd</sup> floors was endorsed by the LHIN Board. Stage 1 of the submission has been completed and is ready to be submitted to the Ministry. This is a \$10 million project and would be 90% Ministry and 10% RVH funding.

In January 2019, Randy Penney met with Renfrew-Nipissing-Pembroke MPP John Yakabuski regarding the need for investment and redevelopment at RVH and St. Francis Memorial Hospital. A meeting was also held with representatives of the Capital Branch at the Ministry of Health and Long Term Care to discuss the aging infrastructures and the need for major investments. The outcome was positive and we were assured that they recognized the need for redevelopment and that our projects are priorities if funding was secured.

#### HOSPITAL INFRASTRUCTURE RENEWAL FUND

RVH received approval for \$1,128,184 from the Hospital Infrastructure Renewal Fund and spent the following:

- \$550,000 Generator
- \$280,000 Air Handlers
- \$200,000 Roof Replacement
- \$120,000 Sanitary Pipe Replacement

#### **MEDICAL STAFF**

Renfrew Victoria Hospital (RVH) and The Ottawa Hospital (TOH) continue to build on decades-long partnerships that enable seamless, quality care close to home for Renfrew and area residents with the recent integration of surgical, urology and gynecology services.

We had three specialist/clinic vacancies in surgery, gynecology and urology at the same time. Rather than RVH trying to recruit in isolation, we collaborated with TOH to bring these services to RVH.

On October 30, 2018, RVH and TOH jointly announced that Dr. David Carver, General Surgeon, was chosen to take the role of Site Chief of Surgical Services. The Site Chief role is part of an integrated surgical program with TOH. The Site Chief will have an office at RVH and will report to RVH as well as having full accountability to the Division of General Surgery at TOH/University of Ottawa. This arrangement is a first in our region. With this collaboration, clinical competency, critical mass and patient safety will be monitored by TOH.

Collaboration also resulted in the implementation of urology services at RVH in September 2018 to further enhance patient care. Six TOH physicians, Dr. Stuart Oake, Dr. Matthew Roberts, Dr. Neal Rowe, Dr. Jeremy Setterfield, Dr. Jeffrey Warren and Dr. Conrad Maciejewski to provide a variety of urological services one day a week in RVH's ambulatory care clinic.

In May 2018, Dr. Nika Alavi, Dr. Sony Singh and Dr. Cici Zhu from TOH's Department of Obstetrics and Gynecology began providing weekly gynecology services for women in our region as part of the RVH ambulatory care clinics. Their services include consults, office procedures and some minor surgeries.

Links between TOH and RVH have already been established in nephrology/dialysis, cancer services, radiology, Telehealth and more.

We will need an estimated 10 new family physicians by 2021. The target is to recruit 8 new physicians before the end of 2021. Renfrew and area is well below the provincial average of health care professionals per 10,000 (101 vs. 143).

Congratulations to Dr. Steve Radke for receiving his Fellowship designation (FCFP) with the College of Family Physicians of Canada in recognition of "outstanding contributions" to patient care, the advancement of family medicine, physician recruitment and the community as a whole.

We continue to participate in the education and training of residents and medical students. The mentoring relationship is one that provides guidance and support to trainees and is a key component of the education and professional development of our future physicians. This participation is also a great recruitment tool for residents to consider RVH for their family practice.

Physicians mentored Medical Residents and Medical Students for a total of 745 days. Residents and Students were from the University of Ottawa, Queen's University, McMaster University and the University of Wollongong, Australia.

When a healthcare organization is deeply woven into the fabric of the community the effects are far-reaching. We're able to anticipate and fulfill local needs better. We can pursue new initiatives with greater confidence and we can provide a more complete continuum of care over a person's lifetime.

Our achievements would not have been possible without the dedication and contributions of our physicians, staff and volunteers, as well as the guidance and commitment of our Board of Directors and the generous support of donors and friends in the community.

## **FAST FACTS**

Our People Our Hospital Our Patients





# \$42 Million Impact on economy!

## **STATISTICS**

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180 Nursing Professionals

450 Employees

		<u>2017/2018</u>	2018/2019			2017/2018	2018/2019
	Active Physicians	24	24		Medical Residents	13	15
	Honorary Physicians	2	2		Medical Resident Days	418	338
<b>PAPELL</b>	Consulting Physicians	42	55		Medical Students	19	25
<b>M</b> 9	Casualty Officers	7	8		Medical Student Days	264	407
	Radiologists	50+	50+		•		
	Oncologists	25	25				
			55 Beds			2017/2018	2018/2019
(Includes 31 Active Beds and 24 Complex Continuing Care Beds)			<del>*=</del>	Admissions	1,174	1,196	
				Average Length of Stay	14.5	15.13	
					Total Bed Occupancy	94%	99.44%
0		2017/2018	2018/2019		Surgical Procedures	2017/2018	2018/2019
M Oı	encology Visits	925	823	<b>~</b>	Inpatients	67	54
					Day Surgery	1,325	1,299
۲ ۲		2017/2018	2018/2019			2017/2018	2018/2019
ER Visits/Outpatient Visits 27,953 27,691 Clinic Visits 15,938 12,724			27,691	6 00 m	Dialysis Treatments	12,164	11,672
				Peritoneal Dialysis Treatments 247		287	
		2017/2018	2018/2019		Medical Imaging	2017/2018	2018/2019
Ontario Breast Screening Program 1,657 1,555			123	X-rays	17,401	18,693	
Mammography 983 1,101				CT	5,450	6,744	
					Ultrasound	6,070	6,104
					Bone Density	874	1,058
		2017/2018	2018/2019		•	2017/2018	2018/2019
Man Amo	Electrocardiogram	1,536	1,594	D) (L	Sleep Lab	1,349	1,391
A STREET	Echocardiograms	6,914	6,293		Pulmonary Function St	tudies 874	973
	-				Stress Tests	609	587