

Annual Reports



2019 - 2020



Compassionate Excellence



ANNUAL REPORT OF THE BOARD CHAIR AND CEO 2019-2020

While the COVID-19 pandemic has overshadowed everything these past few weeks, it has also served to illuminate something that we already know at Winchester District Memorial Hospital (WDMH): We are prepared. And we have the expertise to care for our local communities.

Every day, the WDMH team plans for extraordinary times like these. The accomplishments over the past year help to confirm that. Here are just a few highlights:

- Quality and patient safety remain our #1 priority. Last year, we were pleased to exceed many
 of the priority goals in our Patient Care Improvement Plan. For example, 98% of patients who
 came to the Emergency Department with COPD, heart or diabetes concerns received a followup phone call within a specified time. 92% of newborns received specialized pain
 management measures for heel prick procedures. And patient satisfaction related to family
 and patient-centred care reached 97%.
- We continue to roll-out our Strategic Plan, with a commitment to patient and family-centred care. It focuses on four central themes: Quality/Services, Our People, Partnerships/Integration and Accountability.
- Throughout the year, WDMH departments have had ongoing inspections and accreditation processes, with positive results. For example, four pharmacy technicians were certified in IV medication preparation and four housekeepers were certified in the cleaning of the rooms where this preparation is done.
- We continue to combine high touch with high tech, with new clinical information systems to better support care. Examples include a new scheduling system in the Operating Room, access to a regional integrated online system for Chemotherapy and Dialysis, and a new timekeeping and staff scheduling system for WDMH staff.
- We are committed to helping staff, physicians and volunteers increase their skills through ongoing education. We also share our knowledge through community outreach activities, at conferences, and by publishing the WDMH research results. We welcome learners throughout WDMH – from high school coop students to our family medicine residents. These students help to enhance our skills as well.
- WDMH spirit is alive through our Recreation Committee events, Commitment Awards and our annual Service Awards. We also give back to our community through initiatives such as the Christmas Angel program.
- Appreciation is extended to the Finance team for another clean audit as confirmed by the external auditors. For the first time in several years, WDMH has ended the year with a small financial deficit. The shortfall will be funded from existing resources and will not impact the

hospital's ongoing financial stability. Action has been taken to ensure a balanced position for the coming year.

- Collaboration with health and community partners ensures we are all working together to
 provide the best care close to home. This year, we celebrated the 10th anniversary of
 eConsult and LHINWorks regional virtual assessment and collaboration systems hosted on
 the WDMH platform. With further health reform underway, WDMH is taking a leading role in
 the Upper Canada Ontario Health Team.
- The input from our Patient and Family Engagement Committee (PFEC) ensures that patients are part of the decisions we are making every day. Patients also sit on committees and quality teams.
- The WDMH Auxiliary continues to amaze, providing 12,500 hours of their time this past year. There are 148 volunteers at WDMH, supporting every area of the hospital. Their fundraising efforts and Gift Shoppe proceeds raised close to \$60,000 toward their next goal of purchasing an Infant Abduction Prevention Machine at a cost of \$200,000.
- Thank you to our generous donors who helped the WMDH Foundation purchase 43 new pieces of equipment for patient care, totaling almost \$1.2 million. We wish the Foundation Board much success as they expand their fundraising efforts to include Dundas Manor.
- Once again this year, we have joined forces with Dundas Manor, the WDMH Auxiliary and the WDMH Foundation to produce a joint *Report to the Community* which will be delivered to close to 60,000 homes in our region. The focus is on the importance of good neighbours providing great care, supported by a grateful community – now more than ever.

These accomplishments are the result of an amazing WDMH team – which number close to 1,000 staff, physicians, volunteers, and trainees. A sincere thank you for your expertise, passion, and commitment.

Connections seem more important than ever, even if they cannot be in person. We welcome input from our local communities and encourage everyone to visit our website; like us on Facebook; follow us on Twitter @WDMHPride; sign up for CONNECT, our e-newsletter; send an email or call us.

Respectfully submitted,

Mike Villeneuve Chair WDMH Board of Directors

Cholly Boland CEO WDMH



ANNUAL REPORT OF THE QUALITY COMMITTEE 2019 - 2020

Patient Care Improvement Plan:

Quality improvement is an ongoing priority to help us continually find new and better ways of doing things. Our Patient Care Improvement Plan - or PCIP - is one tool that we use to help us document and review our current performance in a variety of areas. With this plan, we can very clearly see our targeted areas for improvement and chart our progress.

Last year, we were pleased to have exceeded our priority goals, achieving:

- 98% compliance for follow up with our Chronic Obstructive Pulmonary Disease, Congestive Heart Failure and Diabetes patients 30 days after their Emergency Department visit
- 74% compliance with Physician notification of suspected Sepsis at Emergency Department Triage
- 92% compliance with Newborn Procedural Pain Management (Heel Prick)
- Lower than 1.2% target (1%) for facility-based same day cancellations of surgical procedures
- Lower than 30% target (23%) for Hospital Acquired Delirium
- 97% compliance in Patient Satisfaction Family and Patient Centered Care

In 2019-2020 we did not meet our target of 70 minutes concerning wait time for an inpatient bed for Emergency Department admissions (at 74 minutes). In 2020-2021 a team will review the patient flow process mapping and identify solutions to barriers and increase efficiencies in an effort to improve times with admissions.

The Winchester District Memorial Hospital, like many organizations, has paused their 2020-2021 Patient Care Improvement Plan submission to focus their efforts on supporting their staff, their health care providers, and their communities to manage the treatment and containment of COVID-19. Our *new* goals for 2020-2021 will include:

- Increase Operating Room Scheduling Accuracy to 75% or more
- Decrease (50th percentile) time to inpatient bed for Emergency Department Admissions to 45 minutes

We will continue to monitor physician notification of suspected sepsis, newborn procedural pain management, hospital acquired delirium, workplace violence incidents, 90th percentile time to inpatient bed for ER admissions (in conjunction with 50th percentile indicator) and Patient Satisfaction – Family and Patient Centred Care.

Patient Safety/Quality Improvement Initiatives:

New patient safety, quality and patient experience initiatives are continually underway. Here are just a few examples of our accomplishments:

✓ Patient and Family representatives continue to be actively engaged at WDMH, providing their input and feedback on a wide spectrum of activities:

- Patient stories are shared at committees and board getting to the heart of what patients are experiencing
- Sharing feedback on clinical information systems, including the concept of a patient portal, resources and questionnaires such as: WDMH Services brochure, Chlorhexidine Showers pre-operative instructions, Estimated Date of Discharge guideline, Complex Continuing Care Experience brochure and fundraising mail outs
- Deliberating issues and exploring solutions (i.e. Patient Declaration of Values, Delirium prevention and Advance Care Planning)
- Collaborating and partnering to address issues and apply solutions (Patient Care Improvement Plan, Senior Friendly Hospital Improvement Plan, Ethical Dilemmas, Accreditation)
- Participating on interview panels, clinical teams and in the strategic planning process.
- Last year we implemented a quality improvement initiative to identify the percentage of newborn heel prick procedures where pain management was provided. There are proven and safe therapies such as the use of sugar, breast feeding, and skin to skin that are currently under-used for routine minor, yet painful procedures in newborns. This indicator continues to achieve sustained success over the past 6 months and the team continues to monitor this indicator closely. The Hospital is involved in a study on infant pain management which is still underway. Staff continue to discuss the benefits and varying methods of infant pain management with parents.
- ✓ Another new indicator on last year's Patient Care Improvement Plan was 30 Day Follow-up for chronic obstructive pulmonary disease, congestive heart failure and diabetic patients in the Emergency Department. Evidence shows that when patients are discharged from the Emergency Department following an exacerbation of their chronic disease, follow up with their general practitioner is key, as well as filling prescriptions, and completing any other discharge instructions. Proper follow up leads to a decreased rate of returns to the Emergency Department. Counselling and advice are provided as necessary and any concerns identified are investigated and patient and family support are coordinated. Our success rate was 98% of patients receiving a phone call. In the third quarter 95% of patients had filled their prescription if applicable, 96% reported an improvement or stabilization in their condition and 4% reported a deterioration. All patients who reported a deterioration in their condition discussed a plan of care with the Emergency Department Team Leader and reported to a healthcare facility for additional care.
- The Senior Friendly Hospital Committee continues to work on quality initiatives to meet the needs of our senior population. These include: prevention and reduction of functional decline with mobilization, care plans to address Activities of Daily Living and strategies aimed at reducing the incidence of hospital-acquired delirium. The Committee is also reviewing appropriate use of catheterization, as well as staff education and awareness on the needs of our senior population. In 2020, a working group will investigate patient led audits and auditing tools to examine Senior Friendly Hospital Physical Environment topics such as: way finding, signage, accessibility and our website.

- ✓ Workplace violence prevention remains a priority on the 2020-2021 Patient Care Improvement Plan. The number of workplace violence incidents are tracked quarterly, and the rate is reported to Senior Management and the Board of Directors regularly. There has been heightened promotion of the process for staff to confidentially report incidents of workplace violence and each incident is reviewed/investigated in a timely fashion. Additional initiatives include:
 - A safety audit has been conducted and results analyzed to identify high risk areas
 - Mandatory crisis prevention training is provided to staff and managers
 - The Building Automation System is being utilized to mitigate identified risks
 - A threat assessment of the physical security of the facility has been completed and the results are currently under review
 - Code White simulations are conducted, re-enacting violent behavioral situations with frontline staff
 - Action planning is underway encouraging education and awareness with frontline staff.

Quality and patient safety are key priorities at the Winchester District Memorial Hospital and we are committed to continually improving the care we provide. It is a team effort and we are proud of the results over the past year.

Respectfully submitted,

Renée Belhumer

Renee Belhumeur Chair, Quality Committee



ANNUAL REPORT OF THE CHIEF OF STAFF 2019-2020

I feel privileged to serve as Winchester District Memorial Hospital (WDMH)'s Chief of Staff. I have been greatly impressed by the creativity, resilience and commitment shown by the Professional Staff, particularly in the face of such fearful, uncertain times and am grateful to have such an excellent team providing care at WDMH. It is my sincere honour to serve alongside them and all of the other wonderful WDMH staff, who have been exemplary in trying times, just as they always are.

QUALITY IMPROVEMENT

Although meeting frequency has markedly slowed, the Medical Advisory Quality Committee continues to monitor the progress of several quality improvement initiatives throughout the hospital. Many process and workflow improvements continue to be the result of case reviews conducted through both Coroner Requests and internal reviews. The committee also continues to monitor Quality Improvement strategies and consistently seeks ways to improve hospital services. MAC remains vigilant regarding overall quality of care, with continued attention to careful review of unanticipated outcomes as well as our staff responsibilities regarding documentation.

In November of 2019, many WDMH Physicians and Administration staff attended the Joule Physician Leadership conference which had the focus of 'Leading High Performance Culture'. Feedback from the course was that it was very engaging and provided tangible tools to maintain our high performance culture and to continue to develop it.

With the onset of the SARS Cov-2, WDMH staff and physicians made incredible adaptations to the services and capabilities of our staff in order to be prepared for the pandemic. Many hundreds of hours of research, planning and teaching have occurred in order to position the professional staff and the entire care team. The Medical Advisory Committee continues to monitor changes in service delivery and continues with preparation for every possible scenario affecting our hospital. The recent hiring of a full-time Respiratory Therapist shows WDMH's commitment to being prepared for what potentially lies ahead with this pandemic.

The MAC approved the creation of a new online re-appointment process. The first phase of this project was implemented for the 2019-2020 year while the second phase launched with this re-appointment cycle and included online approval by the Chiefs as well as implementation of an annual performance review tool. It expedited our ability to track, review and approve credentialing requests and has been well received both by credentialed staff and by Department Chiefs.

MD HUMAN RESOURCES

Over the past year, we have welcomed 35 new professional staff to WDMH in various capabilities. Dr. Darren Tse completed his term as Chief of Staff in 2019 and I was welcomed as the new Chief of Staff for WDMH in September 2019. A sincere thank you goes to Dr. Tse for his service and leadership to the Professional Staff during his 3 year term. The Medical Advisory Committee (MAC) made the important decision to develop a Department of Internal Medicine and in the fall of 2019 the search for a Chief of Internal Medicine was initiated. Dr. Rimon Ghattas, already a member of the WDMH Medical Staff, was the successful candidate and began his role on March 1st, 2020. He immediately hit the ground running due to COVID-19 and we are grateful to have his expertise as part of the physician leadership team. We appreciate his leadership of the Department of Internal Medicine through these uncertain times and look forward to his leadership in further development of our Internal Medicine department.

This past year also saw a new Chief of Obstetrics & Gynecology. Dr. Roger Perron was the successful candidate for this position, following the resignation of Dr. Shamsa Deeb. We have sincerely appreciated Dr. Deeb's leadership to the Obstetrics & Gynecology group during her 6 year term, and appreciate Dr. Perron accepting the new role.

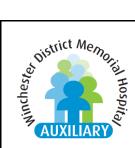
2019-2020 Professional Staff Privileges by Department ended the year strongly, with 213 members renewing their privileges for the 2020-2021 year commencing June 1, 2020. Below is a departmental breakdown of our Professional Staff:

- 56 Medical Imaging
- 28 Surgical Staff, including 2 Dentists, with surgeons from General Surgery, Gynecology, Ophthalmology, Urology, Plastic Surgery and Otolaryngology (ENT)
- 34 Family Medicine Physicians, including 4 Physicians regularly providing GP Obstetrical Services
- 47 Medicine Physicians, including both internal medicine generalists and various sub-specialists from respirology, neurology, rheumatology, sleep medicine, nephrology, and oncology for chemotherapy.
- 18 Emergency Medicine Physicians
- 17 Anaesthesia Physicians
- 5 Obstetricians/Gynecologists, including 1 Physician providing ultrasound reading services
- 8 Midwives

Respectfully,

3=5

Chief of Staff



ANNUAL REPORT OF THE AUXILIARY 2019 – 2020

The Auxiliary is pleased to report another successful year.

- New board members—-Louise Arsenault and Debbie DeCooman
- Updated Bylaws by Carol Dawley
- Carol Dawley is compiling archive files and they will be stored at The Dundas County Archives
- We are now fundraising for a Baby Monitor. The approximate cost is \$200,000.00.
- Debbie DeCooman and Elinor Jordan will be Co-Chairs for 2020/2021

WDMH continues to have a strong Auxiliary with tremendous support from all its members. During the past year our members contributed over 12,500 hours of their time.

To support the purchase of new capital equipment at WDMH, the Auxiliary held the following fundraisers:

Fashion Show	\$755.00
In Memoriam	\$25,865 .00
50/50+ Donations	\$1,050.50
Wine Draw	\$5,000.00
Ladies Night	\$1,285.00
Puddings	\$866.00
Gift Shop	\$25,000.00
TOTAL	\$59,821.50

Going forward all our fundraising activities will concentrate on purchasing an Infant Abduction Prevention Machine at a cost of \$200,000.00.

Finally, an appreciation for the continued support of the Administration and staff of the Winchester District Memorial Hospital.

Sincerely,

- Elino Gardan

Elinor Jordan Co-Chair, WDMH Auxiliary

Helping Patients, Staff and Visitors 566 Louise Street, Winchester, Ontario, KOC 2K0 (613) 774-2420



Report of the Board Chair - WDMH Foundation WDMH Annual General Meeting June 25, 2020

I am pleased to provide a report from the Board of Directors of the WDMH Foundation.

Over the past few weeks, one thing has been clear. In small communities like ours, you just need to ask for help and people step up. In fact, at the WDMH Foundation, we already knew this. The recent outpouring of donations of supplies, food and well wishes has been incredible – and it is an extension of what we see at the Foundation every day.

Understandably, everyone is talking about COVID-19. In this report, we want to focus on the year leading up to the pandemic. We have some wonderful news to share.

I'm pleased to report that in the last year, there have been 4,442 gifts to the WDMH Foundation. As a result, we were able to purchase 43 pieces of medical equipment for the hospital, totaling \$1,187,112.71!!

It would take too long to describe all 43 pieces of equipment. But please know that they are having an impact throughout WDMH, from the operating rooms to obstetrics to the emergency department. Some things are small such as specialized thermometers. Other things are large and complex such as the surgical towers that house vital equipment in the OR. These towers house high-definition cameras, light sources, two flat-screen LED monitors and a computer processor, providing crucial information to WDMH surgeons.

Our donors support health care close to home in so many different ways. The 2019 "Boots & Bling" event raised \$57,651. The Judy Lannin Christmas Wish Tree raised \$43,139 more. We also hosted a Family Event in Ingleside last September, bringing local communities together to learn more about WDMH and our Foundation, while raising close to \$6,000. All these events supported the Foundation's Family Care Fund. And a new event called Sip, Savour & Support, held in January, raised just over \$6,000 for the General Equipment Fund.

There are also events that individuals and community groups organize themselves as a way of saying thank you to our local hospital. 21 of these types of events were held last year raising \$75,208.71.

For donors who want to provide ongoing monthly support, we have Lynne's Club. There are currently 163 active members. Since 2011, this program has raised more than \$329,749.

Some donors want to leave a legacy gift. Our planned giving programs offers a special way to do so. Last year, we were very honoured and touched to receive 22 planned gifts totaling almost \$1.5 million.

And finally, grateful patients continue to say thank you to staff and volunteers through our Honour Your Caregiver Program. 71 people did so last year, raising almost \$113,675.

In February, we officially announced a new name and mandate for the Foundation. The Foundation already works alongside donors in support of compassionate care in our community from babies to seniors. Now we will build upon that commitment as the fundraising partner for the new Dundas Manor Long-Term Care Home. We are excited to take on this challenge, and as always, we are confident that local communities will once again step up to help.

On behalf of the WDMH Foundation Board of Directors, I would like to recognize our hardworking Foundation team for the incredible relationships they have built with our donors. Thank you as well to my fellow Board Members and to the Hospital Board for your gifts of time and expertise. And thank you to the WDMH staff, physicians, and volunteers for the compassionate care you provide every day.

The WDMH Foundation is especially grateful to our donors. The need will always be here – but we know that our donors will be there too. They have proven that over the past few weeks, during this past year, and for many years before that. We want to thank them for the trust they have placed in us and for their ongoing commitment and generosity.

Thank you and stay safe,

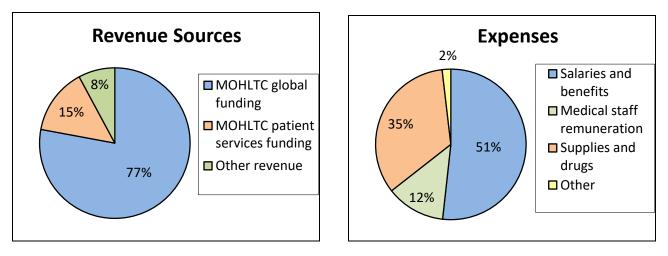
Peter Krajcovic Chair, Board of Directors WDMH Foundation

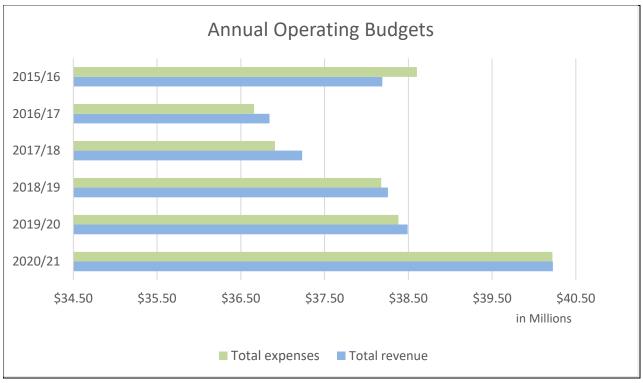


ANNUAL REPORT OF THE TREASURER 2019 – 2020

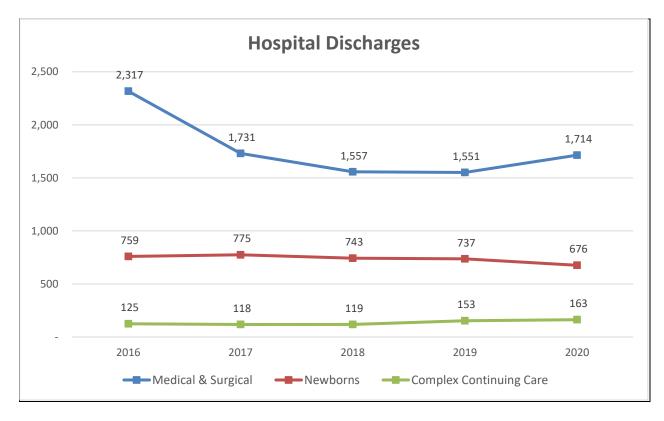
Financial Results:

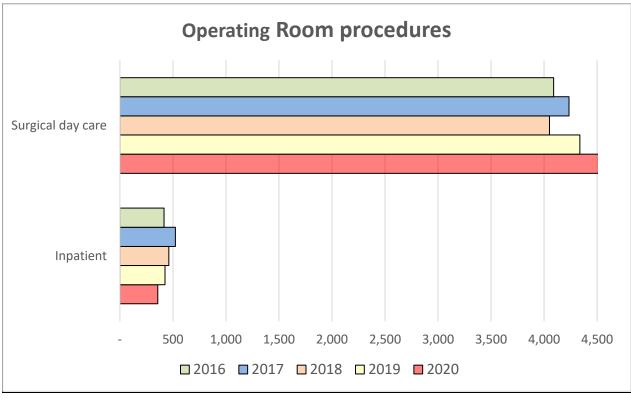
The hospital reported a yearend deficit of \$51,735 from hospital operations and a total deficit of \$218,518 for March 31, 2020. For the first time in several years, WDMH has ended the year with a financial deficit. The shortfall will be funded from existing reserves and will not impact the hospital's ongoing financial stability. The hospital has taken action to ensure a balanced financial position for the upcoming year.

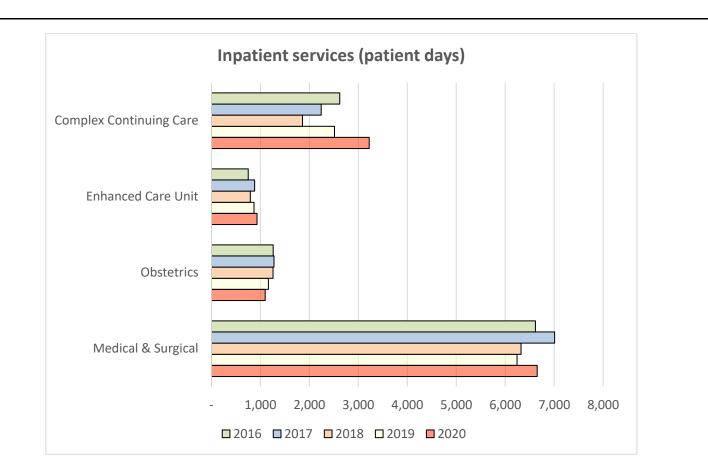




Activity:







Outpatient services (visits)

	2015/2016	2016/2017	2017/2018	2018/2019	2019/2020
Emergency visits	23,699	23,756	23,618	23,150	23,625
Ontario Breast Screening Program	2,209	2,325	2,496	2,720	2,735
Chemotherapy	2,440	2,578	2,373	2,610	2,304
Hemodialysis	3,617	3,619	3,517	3,441	3,230
Gynecology Clinic	1,252	1,942	1,875	1,887	1,462
Prenatal Clinic	1,812	2,151	2,373	2,118	2,057
Pediatrics Clinic	716	482	-	-	—
Cardiology	1,581	1,499	1,590	1,618	2,354
Ophthalmology Clinic	2,523	2,271	2,105	1,923	1,615
Medical/Surgical Clinics	9,754	9,322	8,677	9,880	8,745

As Treasurer, I would like to take this opportunity to thank the entire Leadership Team.

Respectfully submitted,

Bruce Millar CIM, FCSI, FICB, MBA, CPA, CMA Treasurer