

*“Resilience  
in Times of  
Change”*

---

# 2020

---

**Annual Report**



**Jorge G. VanSlyke, CHE, MPA, MSW**  
President and Chief Executive Officer

---

## Table of Contents

---

	<u>Page</u>
Board Chair Report	3 - 4
President & CEO Report	4 - 6
Chief of Staff Report	6 - 7
AGH Foundation	8
<b><u>AGH Services</u></b>	
Acute Care, Emergency, Telemedicine	8 – 10
Atikokan Community Counselling & Addiction Services	10 – 11
Business Office	11
Diagnostic Imaging	11
Dietary	12
Extended Care Wing	12 - 15
Health Records	16 - 17
Housekeeping/Laundry	17
Laboratory	17 – 18
Maintenance	18
Medical Device Reprocessing/Stores	19
Pharmacy	19 - 20
Procurement	20
Rehabilitation Services	21 - 22

---

## Board Chair Report

Marlene Davidson

---



This has been a most unusual year! In all of the time that I have spent on this Board I don't recall a time when we have gone through so much change. Much of it seems like a dream but I know that everything in the dream has happened. We have been so fortunate to have our Chief Nursing Officer, Jennifer Learning, step in to take over the job as Interim CEO while the Board assumed a search for a new person to take over the position. The Atikokan General Hospital remained under her capable guidance until the new CEO came on board in February 2020. The search for the new CEO began after the Annual Meeting in June 2019 under the direction of a Board Committee and continued until a decision was made. We started out with over a hundred applications and ended up with one successful candidate, Jorge VanSlyke. Chief of Staff, Dr. Sara Van Der Loo, Interim CEO, Jennifer Learning and Executive Assistant, Bonnie Clairmont, were observers. It was a great process and it was something incredible how we, on the Committee, all came up with a similar top list for final interviews.

While the search was going on, three new Board members were oriented to the Hospital Board. It has been heart-warming to see how they and all of the members have stepped up to take on the extra committee positions that are so important to make the Board complete and functional. The change at the CEO level was not the only change that the Hospital experienced. In September, after the Annual Meeting, it was decided to contract our finances out to the Dryden Regional Health Centre. Together, CFO Alex McAuley and Interim CEO Jennifer Learning worked diligently to keep our finances in a good position. It is because of the great work and organizational abilities of Jennifer and Alex that our finances and staffing placements showed good results.

After CEO Jorge VanSlyke came aboard and in the midst of the pandemic, AGH had an opportunity to recruit a highly qualified individual to fulfill the full-time permanent Chief Financial Officer role. We were successful in hiring Brittany Beyak, CPA, CA, LPA, and she will commence her position in August 2020.

Dr. Sara Van Der Loo is on her second year as Chief of Staff, whose expertise is greatly welcomed.

I will mention a last change before I talk about the Coronavirus. The Contract for the Auditors was due so we put out a call for companies to submit proposals. MNP was successful after a rigorous process and we look forward to their first presentation for 2019-2020 Fiscal Year.

It wasn't long after the new CEO, Jorge Van Slyke came on board that the Coronavirus hit the country and Jorge and the staff at the Hospital, in coordination with the health care workers in our community, did a fantastic job of putting together a plan that has kept us all safe from this

virus. Jorge and the staff transformed the Hospital into a place that fit all of the requirements that were needed. I don't have enough words to express the thanks and gratitude that I have for all of the staff who have worked tirelessly to keep us all safe and healthy during this time of the Coronavirus. They did this in addition to their regular jobs of providing health care for ailing clients.

I will end by mentioning that our Hospital had a visit by Anthony Dale, President and CEO of OHA, and his entourage in the Fall. They were on a tour of the region and we were the last stop. They didn't have enough words to express how clean, well kept and well run our Hospital was. We all know this as we hear it from our clients and their families.

Finally, I would like to recognize the contribution of the volunteers who sit on the Atikokan General Hospital Foundation and the charitable philanthropy of the Atikokan citizens. Thanks to all of our citizens who have given their time for the Hospital, the Patient Advisory Council, the Friday singers, the book reader, the Tuck Shop worker, the churches and all of the visitors. All of these efforts are done with a smile and greatly appreciated. I would also like to acknowledge the care and support that I have received from the volunteers who sit on the Hospital Board and all of the support of the staff that we all receive, including supporting the new changes to the Extended Care unit. Everyone works so hard to make experiences at our Atikokan General Hospital the best that they can be.

This year has been a prime example of what it means to put "Patients First"!



---

## **President and CEO Report**

### **Jorge G. VanSlyke, CHE, MPA, MSW**

---



Jennifer Learning, incumbent Chief Nursing Officer and Interim Chief Executive Officer (CEO) for most of 2019-2020, played a key role in helping Atikokan General Hospital transition ably in the midst of significant change. In her interim role, she accomplished the following:

- ✚ developed numerous partnerships with other hospitals through service contracts such as Finance with Dryden Regional Health Centre (DRHC), IT with Sioux Lookout Meno Ya Win Health Centre (SLMHC), and HR with Riverside Health Care Facilities, Inc. (RHCF).
- ✚ actively endeavoured to prepare the stage for chemotherapy to be provided once again in Atikokan by having an RN trained to provide this specialized service and entering an agreement with RHCF to provide the chemo solutions.
- ✚ successfully hired an Occupational Therapist
- ✚ implemented a new staffing model that proved to be successful in reducing sick time and injuries.

- ✚ implemented the Absenteeism management program that reduced sick time, complemented with consistent follow-up through the Occupational Health program.

Jennifer was able to accomplish so much, with the full support of management and staff, and I echo the Board Chair's appreciation for her skills and dedication to accomplish such a feat.

I started in my new role as CEO in February 2020, with much anticipation having met the whole team and the Board Committee members responsible for the selection during the interview process. After a month of orientation, COVID-19 was declared a pandemic. It was a daunting experience to go through with practically strangers in a small community that I knew nothing about. But AGH has proven time and again its resiliency in the face of an unknown pandemic, with changing directives issued almost daily. I have never met such capable, courageous people who forged ahead and worked together to do what needed to be done. People worked tirelessly, made themselves available 24/7, to cast the needed safety net for the whole community. I have never, in my career, been so proud to be part of such a great team.

From March to May 2020, AGH's responded to the pandemic crisis as follows:

- ✚ AGH Immediately restricted access to Extended Care and the whole hospital with the exception of Emergency Services.
- ✚ Successfully opened an assessment centre within two weeks of the declaration of pandemic all due to the responsiveness of our physician group through Atikokan Medical Associates. The assessment centre soon after transitioned to Atikokan Family Health Team to better accommodate the Ministry's requirements. AFHT's whole team shifted their operations and relocated most of their staff within 24 hours of being notified of what needed to be done.
- ✚ AGH increased acute care bed capacity from 15 beds to 51 spaces!
- ✚ AGH displayed innovativeness in using parking lot spaces as an ER overflow
- ✚ Created "hot" and "cold" spaces in the Emergency section and another trauma room for "cold" patients
- ✚ Started active screening through staff re-deployment.
- ✚ Hired 15 staff to build the pandemic pool of HR resources. This included screeners, ward clerks / runners, additional housekeeping and nursing resources.
- ✚ Ensured that staff such as nursing and housekeeping were able to stay in one department for the duration of their shifts
- ✚ Procured a second transport ventilator and oxygen concentrator, the latter in partnership with AGH Foundation who extended support readily.
- ✚ Immediately established communication with community partners, implemented daily staff and management huddles
- ✚ Put together a Personal Protective Equipment Team that developed guidelines for proper PPE use, PPE conservation, tracking, ordering, and ensuring that AGH was well-supplied despite the national shortage for PPE
- ✚ Organized "Mask 4 All" campaign where we received approximately 600 non-commercial masks from community volunteers
- ✚ Staff cooperated with travel restrictions outside Northwest Ontario

✚ Successfully completed surveillance testing with 92% of staff completing the test.

So much more had been accomplished in such a short span of time but the key message is that AGH, and our key partners, our whole community, responded to this pandemic with courage, resilience, and unwavering commitment to ensure everyone's safety. We Got This!



---

## Chief of Staff

Sara Van Der Loo, MD, CCFP, FCFP, FRRMS

---



As I sat down to write this report I tried to think of important events and milestones for our hospital and despite myself was unable to focus on anything but the incredible facts from the last four months. What can I say – this year will be forever marked by the remarkable changes wrought by the COVID-19 pandemic. Despite having only a very small number of cases in town and only one that required care at AGH, the pandemic has immeasurably and likely forever changed the way we do our jobs and the way we view the world. I am immensely proud of how well our little hospital has approached this challenge and succeeded in standing with the best. From being asked to share policies and advice from the management of our LTC to the willingness of staff to submit to COVID surveillance swabbing. The hours of work put in by everyone to make sure that we could continue to care for patients safely and professionally has been simply inspiring. Through it all it has been clear just how much our AGH staff care about their patients and this community, putting themselves at risk and pushing through despite all the unknowns. They have worn uncomfortable PPE, been forced to work in different ways, add new and unconventional tasks to their job descriptions, and create new work spaces, all of which changed on a weekly or even daily basis. All this while also parenting homeschooled children, looking after older or immune-compromised relatives and friends, and worrying about their own health.

I have been privileged to work with an incredible senior management team at AGH including Jennifer Learning, Stacey Wood, Susan Sampson, Marie Cornell and of course our new CEO Jorge Van Slyke. They have all put in countless hours of overtime. Jorge has been a godsend, inspiring us all by diving head first into this unexpected challenge while just getting to know her new town and position. She has been a rock through it all. I have no idea what we would have done without her.



I want to thank many people for supporting the hospital and medical community in Atikokan. The wonderful group of physicians who continued to provide outstanding care to our patients, and especially Dr. Aneesh Vaghadia who worked quickly to draft new procedures and order sets to manage potential COVID patients and to set up patient simulations. Dr. Melanie Rodrigues who put herself forward to be a communication liaison to run question and answer meetings for hospital staff. Our nurse practitioners Laura Hendren and Kristi Withrow and FHT medical director Karen Lusigan plus all the staff at the Family Health Team who quickly rose to the challenge of running a slick and efficient COVID assessment centre which was up and running before many communities had even started. The staff at the medical clinic who quickly adapted to virtual care for patients and juggled many schedules to accommodate endless changes, meetings and new priorities, and who also started out assisting the physicians to run COVID assessments before the assessment centre was transitioned to the FHT. Laura Homer who worked tirelessly to help us all navigate through the public health advice and recommendations and called countless patients. I also want to say a special thank you to Dr. Joseph Barbero and Dr. Aneesh Vaghadia who quickly made the decision that they needed to be in Atikokan to support our community and came back early or delayed travel back to their other homes in Toronto and Vancouver without a second thought. This pandemic has changed almost everything about how health care is provided in Atikokan and although the hospital may be one of the most visible pieces it is only a part of the integrated system which together is weathering this storm.

It is abundantly clear to me that everyone at AGH and in the whole of Atikokan's medical community rose to the challenge of a worldwide pandemic with grace and courage and they continue to do so as we persevere through the ongoing changes that will come before this is all over.

I couldn't be prouder to be a part of this team at AGH and look forward to another year helping to keep our community healthy as close to home as possible.

To steal Jorge's new pet saying. WE GOT THIS!



---

## AGH Foundation Annual Report 2019/20

Kim Cross, Foundation Board Chair

---

The year 2019/20 was a period of transition for the Foundation. It started with the passing of our Board Chair, Cheryl Fairbairn in May and we feel that loss. In January, a founding Board Member Linda Lindsay resigned for health reasons. We wish Linda well and thank her for 16 years of service to the Board. We are pleased to announce a new Board member - Megan Zacharias joined our Board in March 2020 and Bonnie Clairmont is providing Administrative Support from AGH. Thank you goes out to these two ladies for stepping forward.

During the fiscal year, the Foundation has received over \$67,000 in donations which are being used to purchase medical equipment and upgrades to the AGH facility.

Purchases made this fiscal year include 2 raised planters, flower gardens, door murals and a Trishaw Recreation Cycle for Extended Care. The Lab department received a new phlebotomy chair and an ECG machine and trolley were purchased. A new camera was purchased for the Telemedicine program and an Oxygen compressor was purchased for the COVID pandemic. Total cost of these purchases was over \$113,000. These vital purchases could not be made without the generosity of our local citizens. A huge thank you goes out to each and every donor.

In closing, I would like to wish everyone a safe and healthy summer.



---

## AGH Services

---

### Acute Care & Emergency & Telemedicine

Susan Sampson, Manager

Our past fiscal year 19/20 has brought the Acute Care, ER and Telemedicine units a unique variety of successes and challenges. Much of our growth and learning, along with challenges has been new territory for everyone in health care in regards to the Corona virus. The COVID-19 pandemic came on fast and strong towards the end of the fiscal season and required us to all work together as a team to provide exceptional care through this most challenging time in health care history. Continual learning along with patient safety has been a strong focus throughout the past fiscal year.



Education for the departments was an important goal for the fiscal year and we were able to provide a number of excellent and meaningful opportunities locally to the nursing department.

- ✚ During the spring our Health Records Department provided numerous 3 hour sessions of mandatory Meditech Training for the nursing staff. Ensuring updated Meditech training for registration in the ER, admissions, discharges and documentation is imperative to ensure the safety of patient health information. Meditech is a real-time live system that flows patient information to various other government agencies, such as OHIP, billing, Health Information Management, and Statistical Reporting branch to the Ministry.
- ✚ Hands-on Fire Training and Fire Extinguisher practice in the fall lead by Fire Chief Warburton gave all staff an opportunity to extinguish a real fire outside of our building using the proper techniques of fire extinguisher suppression.
- ✚ Our in-house AGH professionals included having the Rehabilitation department provide mandatory annual back care, patient transfer & lift training sessions.
- ✚ TBRHSC's Regional Critical Care Response program staff provided a full day of education at AGH during their annual road trip through the region. Stations were set up to work through ventilation & airway management including a ventilator review and a variety of other skills and algorithms for critical care.
- ✚ Advanced Cardiac Life Support certification for the RN's took place in September over a 2 day period. Instructors from the East provided this certification training. Various areas of the hospital were used with mannequins and set up for various cardiac simulations.
- ✚ Another source of utilizing internal employees to instruct education was having our Telemedicine nurse become a certified instructor in Non-Violent Crisis Intervention Training. She was able to instruct a number of sessions to our employees in the mandatory intervention training for hospitals in dealing with individuals that may pose a risk of violence.
- ✚ Having a strong focus on providing exceptional care to our senior population in Atikokan, we invested in our RPN and RN staff to obtain specialty education in P.I.E.C.E.S. A 16-hour best practice certification that provides an approach to understanding and enhancing care for individuals with complex physical and cognitive/mental health needs and behaviour changes. The acronym **P.I.E.C.E.S.** stands for **Physical, Intellectual, Emotional, Capabilities, Environment, Social** and is a non-pharmacological assessment tool used by health care professionals to help them determine causes for behavioural and psychological symptoms associated with dementia. **AGH is proudly the only hospital in our region that have certified P.I.E.C.E.S.' nursing staff providing care.**

- ✚ Gentle Persuasive Approach (GPA) training was also provided to include the PSW group. Seniors and their families being cared for at AGH can expect exceptional care that is individualized.
- ✚ Monthly MOCK codes with the nursing and physician groups have provided the staff with opportunity to work through potential real-life scenarios and gain confidence in our skills and abilities and set up of our departments to respond in emergency situations. Examples include cardiac situations, motor vehicle crashes, traumas, sepsis, drowning, paediatric scenarios, and more recently a number of COVID and surge capacity situations.
- ✚ A big accomplishment has been implementing Surge Learning for all employees at AGH. Surge is a web-based on-line learning system that every staff member at AGH is using to complete their orientation and annual mandatory training requirements. Surge is a Canadian company that provides up to date training modules that are mandated by the MOL, Accreditation Canada and MOH for health care employees. Surge includes modules and training materials on COVID-19, PPE, Infection Prevention & Control, care of residents on LTC, communication, WHMIS, and numerous other subjects. All staff can access any of the modules and Surge tracks employee educational certificates and training obtained outside of the Surge Learning system as well.
- ✚ A new and improved Patient Oriented Discharge Summary (PODS) was created for use and is accessible for nursing to prepare and review with discharged patients and their families. The PODS is type-written for legibility and includes sections for medication information, any follow-up appointments and home care services, along with local phone numbers to reach health care partners in the community.
- ✚ A staff relaxation room has been created for staff to use during times when they need a safe space to rest, de-stress or unwind. It is a shared space with the physician group and includes a yoga mat, yoga hand-outs & instructions, a salt lamp and a view of the outside.

The end of our fiscal year concluded with focus on managing the COVID-19 pandemic which included a restructuring of our ER department to accommodate patients presenting with COVID and non-COVID related symptoms into separated areas within the department. The areas are termed HOT for potential COVID and COLD for non-COVID. The restructuring included ensuring vital equipment and supplies are available for both the HOT & COLD sections. Multiple new policies and procedures were formulated and amended frequently according to the Ministry's Guidance Documents, for example screening protocols and Personal Protective Equipment use. COVID flow and safe procedures for providing various urgent care protocols were developed, including protected CPR and protected intubation.

Additional spaces in the Acute Care were created to handle a surge in patient volumes. **Our 15 bed current capacity was turned into an over 40+ bed capacity** by utilizing all available types of beds, stretchers, spaces and lounge chairs etc. Both acute care meeting rooms were turned into multi-bed capacity areas and the patient rooms created to accommodate double or triple capacity from single capacity.



### **Atikokan Community Counselling & Addiction Services** **Candace Green, Manager**

The Atikokan Community Counselling and Addiction Services continue to be innovative as we adjust to the new normal that COVID-19 brought to our practice:

- ✚ We implemented Reminder Phone Calls in the Fall of 2019 which significantly reduced our “no show” by 50%
- ✚ We made improvements on how we are tracking and reporting our numbers which improved our overall statistical reporting to the Ministry
- ✚ We were able to start two groups for gambling support
- ✚ We adjusted rapidly to the demands of the pandemic including work from home, virtual staff meetings, and virtual counselling support
- ✚ We were able to prepare the Haarala Lane Transition House as an overflow site for non-acute mental health patients requiring low-risk observation support.
- ✚ We continue to provide on-call service to AGH Emergency Department for patients presenting with mental health and addiction issues.

We continue to have **challenges** that we are actively addressing:

- ✚ Ongoing statistical collection, review, and reporting to ensure that it accurately reflects daily operational realities for our department.
- ✚ Inadequate staffing for the Transition House. Staffing schedule was modified to provide safe staffing support to transitional clients but it is still not the optimum solution because there are still supervision gaps that leave clients on their own at the Transition House

#### **Quick Facts:**

- Had **3,049** visits for 2019-2020
- “No Show” reduced by approximately 50% when reminder phone calls were implemented in the Fall of 2019



## Business Office

### Cyndy Ellek and Wendy Kempf, staff

AGH business office has two full-time employees who managed their department with very little supervision due to the transition in the CFO role. As for most AGH staff, they quickly adapted to the rapidly changing demands in operation when pandemic was declared. They had to figure out how to continue doing business without physical contact and pushed most transactions virtually.

For this fiscal year, two new casual staff were trained to provide coverage. Also, through diligence and attention to detail, Accounts Receivable was able to collect over \$24,000 above what normally would have been collected!



#### Quick Facts:

- AGH provided 640 ultrasound exams, up by 26% compared to previous 5 years
- X-Rays provided were 794, up by 12% compared to previous 5 years

## **Diagnostic Imaging**

### **Robert Herrmann, Manager**

- ✚ Hired a casual dual X-Ray/Ultrasound Technologist providing better coverage for staffing and increasing range of ultrasound exam competencies
- ✚ Fourteen months of problematic functioning of GE portable X-Ray unit culminates in permanent acquisition of loaner unit with much better functionality
- ✚ Upgrade of our GE X-Ray service contract (initiated by review of multiple service visits for the portable X-Ray machine) provides more cost-effective way of maintaining our equipment and servicing down time.
- ✚ With the help of the Nurse Manager, improvements made to ER and Acute Care ECG performance by nursing staff which helped streamline the administrative component of these tests by our department.



## Dietary

### Jill Leduchowski, Lead Hand

Our current staffing are as follows:

- 5 Full-time staff
- 5 Part-time staff
- 2 casuals staff
- 1 temporary part-time staff added for pandemic coverage

Our department continues to follow best practice on Food Safety including fridge and freezer temperature monitoring And daily food temperature checks at every meal.

Covid-19 was a very stressful time for myself as a lead hand and for other staff who are still worried and stressed wondering if this will all be over. We are doing our best to operate our department with the support of Stacey Wood, who is our interim manager. We are looking forward to having a more permanent reporting structure in the future!



## Extended Care Wing

### Stacey Wood, Manager

Extended Care Wing has seen many changes over the course of 2019 and into early 2020. Here are some key points to highlight:

- ✚ We successfully changed our pharmacy service provider for ECW in February 2020. We ended our previous contract and transitioned to Rexall Health Solutions out of Sudbury. Our community Rexall pharmacy provides back-up support for any urgent medication needs and this has been working extremely well! Rexall Health Solutions provides all of our medication management needs which includes all resident medications, equipment and software, support from pharmacists and IT in addition to financial assistance with our Surge Learning software and an annual charitable donation to ECW of \$1,500.00. The staff and families have expressed positive feedback with this change and has been viewed as a big improvement from our previous provider. We have signed a 3-year contract with Rexall Health Solutions.

## Quick Facts:

We served:

- 35,187 resident / patient meals
- 3,238 Meals on Wheels
- 1,272 staff meals (not including catering events and guest meals)

- ✚ The Foundation approved the proposal to purchase resident door murals for ECW. These murals were put up this year by our maintenance crew and provided a sense of home, colour and personality to the environment.

The murals resemble house doors and each door is of a different colour and design. The purpose is to assist in wayfinding which has shown to be quite successful for our current resident population. There has been a notable decline in residents entering the wrong rooms since the murals were implemented. The residents also expressed feeling that they bring brightness and homelike feel to the unit.



- ✚ Education/Training: A large focus for training this year was around understanding dementia and managing responsive behaviours. In addition to the implementation of our new staff training program (Surge Learning), staff were provided Gentle Persuasive Approach (GPA) training in November 2019, P.I.E.C.E.S training in February 2020 and two RPNs attended a conference in February 2020 in Thunder Bay with the Nurse Manager that focused on Dementia & Responsive Behaviours.

- ✚ Ministry of Health & Long-term Care Visits: The MOHLTC visited our home in January 2020 and conducted an on-site inspection of the home as well as follow-up to critical incidents involving falls with injury. During the course of the inspection, the inspector issued 3 written notifications of non-compliance. In regards to the falls follow-up inspection, an additional 3 written notifications of non-compliance were issued. No orders were received. All non-compliance notices were rectified shortly after the inspection was completed.

- ✚ Outbreaks: ECW experienced 4 Respiratory Outbreaks from April 2019 - present.
  - **April 8<sup>th</sup> - 19<sup>th</sup>** - Influenza A Outbreak (11 cases / 1 hospitalized / 3 deaths)
  - **May 9<sup>th</sup> - 21<sup>st</sup>** - Respiratory Outbreak (Parainfluenza) (7 cases / 0 hospitalized / 0 deaths)
  - **September 29<sup>th</sup> - October 11<sup>th</sup>** - Respiratory Outbreak ( 11 cases / 1 hospitalized / 0 deaths)
  - **December 17<sup>th</sup> - 26<sup>th</sup>** - Influenza A Outbreak ( 4 cases / 0 hospitalized / 0 deaths)

It is noteworthy to mention the acknowledgement that AGH received from Northwestern Health Unit for the outstanding management of the outbreak in ECW in December 2019 which was concluded in 10 days:



*“Congratulations to the staff and administration at the Atikokan General Hospital on the successful management of the recent Influenza Outbreak on the long term care unit Dec 17-26, 2019.*

*Key factors associated with the timely resolution of this outbreak included:*

- *Notification of reported respiratory illness circulating in the community by the Northwestern Health Unit*
- *Active surveillance, early detection and isolation of symptomatic cases*
- *Prompt reporting of the situation to the Northwestern Health Unit*
- *Same day collection, delivery, testing, and reporting of nasopharyngeal samples by the Public Health Lab in Thunder Bay*
- *Comprehensive department representation on the Outbreak Management Team*
- *Timely and effective internal and external communication with staff, residents, visitors and community partners*
- *Implementation of enhanced infection prevention and control measures*
- *Up to date renal function results were readily available for all residents. This resulted in early antiviral treatment of cases, and prophylaxis of well residents, within 48 hours of symptom onset in the index case*
- *Up to date lists of influenza vaccination for residents, patients, and staff*
- *High vaccination rates in the resident population*
- *Initiation of the staff exclusion policy for unimmunized staff*

*These responsive and decisive actions effectively stopped transmission and resulted in resolution of the outbreak in 10 days. We applaud your efforts and ongoing willingness to work in partnership with the Northwestern Health Unit.”*

To read the message directly from Northwestern Health Unit, visit:

<https://www.nwhu.on.ca/Audiences/Pages/Congratulations-Atikokan-General-Hospital.aspx>

#### COVID-19:

- We have not seen any positive cases of COVID within our home.
- Visitor restrictions have been in place since early March and residents are managing well for the most part. We have broadened our abilities to communicate virtually with

families by providing residents and families to visit through Skype, Face-time, Google NestHub, phone, and through the “visitor’s window”.

- Recreation activities continue for the residents as this is considered to be very essential for their well-being. Volunteers are connecting virtually to provide added activities / visits with residents.
- Residents and staff are screened for any COVID symptoms twice daily and residents who display any symptom are isolated in their room and tested immediately.
- All residents have been relocated to provide them each with their own room to minimize the spread of COVID.
- Seating in the dining room as been limited to two residents per table to allow for social distancing.
- Surveillance testing of all residents and staff were conducted at the end of April. All results came back negative. More staff testing will take place this month as directed by the Ministry.

#### Family / Resident Councils / Family Engagement:

- Since COVID-19, our communication with families has increased as we are offering virtual meetings with the Nurse Manager every 2 weeks. They are also updated via email on a regular basis.
- Resident Council Meetings continue every 3 months
- There still is no Family Council formed, however I hope that the regular virtual meetings with families during COVID will help them form a bond and allow me to introduce a new way for families to meet and form a council if they wish.

#### Resident Satisfaction Survey:

- 2019 survey was distributed in December to all 26 residents
- 12 Surveys were completed and returned
- Most surveys were completed by family or with help from a family member

Mainly positive feedback with some concerns in quality of food, personal grooming, medical services, and input into activities offered. Feedback from the survey will be used for goals in improvement and communication



## Health Records

Bridget Davidson, Manager

✚ During fiscal 2019/20, the Health Records Department completed the transition to a centralized patient filing system. This will contribute to streamlined and consistent management of patient information. Various modules in the Regional Electronic Medical Record (EMR) and Meditech, were also implemented to improve processes that were previously completed manually. These included:

- Record locator module
- Release of patient information module
- Physician Incomplete Record module

### Quick Facts:

- Health Records submitted clinical data to CIHI (Canadian Institute for Health Information) on **4025** Emergency Room records and **166** acute care discharge charts.
- 278 professional staff credentialing applications were approved by the Board

✚ Health Records submitted clinical data to CIHI (Canadian Institute for Health Information) on **4025** Emergency Room records and **166** acute care discharge charts. As a quality improvement initiative, staff is working to improve timeliness of data submission to CIHI, as well as the quality of the data. AGH's previous year's data submitted is available to the public at <https://yourhealthsystem.cihi.ca/hsp/?lang=en>.

✚ AGH is now contributing patient data into the eHealth Ontario Clinical Viewer. As a participant of the Clinical Viewer, AGH health care providers are able to access provincial health information on patients under their care. In order to become a participant, AGH's privacy policies were updated to ensure compliance with eHealth Ontario standards.

✚ Legislated mandatory annual reporting to the Information and Privacy Commissioner for the calendar year 2019 included the following:

#### *Under the Personal Health Information and Protection of Privacy Act (PHIPPA):*

- Access to Patient Information: There were 57 access requests for personal health information processed, resulting in \$1831.50 fees collected by AGH for processing the requests.
- Breach Reporting: There was one potential breach investigated, zero proven.

#### *And under the Freedom of Information and Protection of Privacy Act (FIPPA):*

- Public Access to AGH Information: There were no requests for access to AGH public information.

- During the calendar year 2019, **278** professional staff credentialing applications were processed and approved by the Board.

Staff Status	Reappointments = Total 238	New Appointments = Total 40
Active	6	1
Associate	2	0
Locum	24	0
Courtesy	23	5
Regional	183	34



### Housekeeping/Laundry Heather Desgroseilliers, Lead Hand

Our current staffing area s follows:

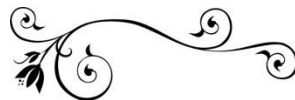
- 5 Full-time staff
- 5 Part-time staff
- 2 casuals staff
- 4 temporary part-time staff added for pandemic coverage

#### Quick Facts:

- 140,361 lbs of laundry for 2019-2020!

#### Some of the year's highlights:

- We washed a total of 140,361 pounds for 2019!
- We switched to a new floor scrubber – easier than mopping, less strain on backs
- We hired additional staff to cover additional shifts as a response to COVID-19. We added an evening shift to Extended Care and an evening shift to Acute Care
- For Quality Improvement, we started tracking isolation linen bags to ensure that items are properly bagged. Our goal was for all isolation linen bags to be properly handled to reduce transmission rates for infection.



### Laboratory Michael Ashbee, Interim Manager

- We purchased a Siemens Dimension EXL analyzer. This is a random-access clinical chemistry and immunoassay system with LOCI® chemiluminescence technology. This allows us to run 627 tests per hour with electrolyte results in under a minute compared to our previous system which could run 300 tests per hour. Cutting our average time to results in half. This system can run 91 different tests,

an increase from 40 on our old system. We have already added on site testing for CRP a measure of inflammation and are hoping to add more on site testing in the future.

- ✚ We have hired 1 Medical Laboratory Technologist and 1 Medical Laboratory Assistant.

- ✚ Recruiting continues to be a challenge due to a national shortage of Medical Laboratory Technologists.

- ✚ We processed 12,874 samples this fiscal year conducting over 27 thousand tests on site. We have processed 346 Covid-19 swabs and due to a new shipping method significantly reducing our turnaround time. Transportation post pandemic continues to be a concern.

- ✚ We switched to an appointment system for outpatients reducing the risk to our patients by keeping them separate from each other.



## Maintenance

**Richard Bowes, Maintenance Staff**

- ✚ Our current staffing is 3 FTE with on call 24/7 coverage.

- ✚ Highlights of 2019-2020:

- Parking lot lighting upgraded to new efficient LEDs
- New LED lighting was added in the ECW around the nursing desk and main halls as the old fluorescent lighting was dim. This was brought up as a Health and Safety concern.
- A new HVAC unit was installed for the lab
- A new chiller for the Extended Care wing.
- The backup Generator fuel supply system was also replaced and is up to current code.

- ✚ Our main challenge is struggling to maintain the integrity of the plant, hospital, ambulance base, supportive house and equipment. The heating, cooling, and plumbing systems in the hospital are now 35 (ECW) and 45 (service wing) years old and obsolete and require constant attention to try and maintain some level of comfort within the hospital.

- ✚ For 2020 the maintenance department is hoping through capital and HIRF funding to start the process of replacing the Emergency entrance ramp, as well major plumbing and HVAC upgrades for the wings built in 1975 and 1985.



## Quick Facts:

- Siemens Dimension EXL Analyzer rocks! From 300 tests to 627 per hour!
- Lab processes 12,874 samples and over 27,000 tests on site.

### Quick Facts:

- 214 loads of instruments were disinfected
- 131 loads of instruments were sterilized
- 838 items currently in inventory

### Medical Device Reprocessing/Stores Candia Anderson, staff

AGH has 1 full-time staff for MDR / Stores. Stocking departments was a huge challenge during the pandemic where conservation and supplies control were needed.

Some of the initiatives for this department:

- Created a supplies map for nursing staff to find items easier after hours
- Secured supplies area
- Conducted a satisfaction survey with physicians to ensure that their instrument/tray needs were being met and they responded positively.
- Created a booklet for doctors with inventory of reusable instruments and trays in ER with pictures of trays included



### Pharmacy

#### Corina Anderson, Pharmacy Assistant

✚ The Department is staffed by:

- (1) permanent full time (department head), (1) permanent casual, (1) emergency backup (in house so available on short notice), and (1) vacant permanent part time (1 day per week/vacation coverage).
- (1) permanent full time regional pharmacist (TBRHSC) shared between 5 regional sites
- And to ensure service continuity, the Chief Nursing Executive and the Utilization Coordinator are both trained to provide emergency coverage for the department

✚ Quality Improvement initiatives were as follows:

- In January 2016, access to the pharmacy department was restricted after hours as per Ontario College of Pharmacists (OCP) guidelines
- In May 2019, AGH Pharmacy reached 95% of compliance targets
- Changes included procurement of ER crash cart replacement kit, installing purpose built fridges, temperature monitoring of MESA labs 24/7, creating and implementing new policies & procedures

✚ Our Department's Accomplishments

- Successful Pharmacy Accreditation since 2015 by OCP. Next site visit will be in 2021
- During the Accreditation Canada visit in 2019, pharmacy department was positively highlighted in a few different areas of the final report, including: medication



management safety and organization, QI initiatives, and regional pharmacy collaboration.

### AGH Pharmacy Quick Facts:

- Acute Care had 189 admissions, Emergency Department had 4025 visits.
- 6755 physician orders were entered
- 29,242 units of medication were packaged for Acute Care and ER
- Pharmacy staff packaged 2,690 units of “cold seal” unit dose packages (hazardous medication, highly allergic & narcotics).



### Procurement

**MaryAnne MacDonald**

- A quality improvement made was building a locked/ secure area for storing Medical supplies.
- The biggest challenge this year for Procurement was COVID-19. With a global shortage of PPE the cost of securing normal supplies skyrocketed. Although I continued to source PPE through our Regional Supply Chain contracts in the event of an outbreak, stock was either delayed/delivery uncertain or not available at all. I have taken advantage of purchasing opportunities through Mohawk Med Buy GPO and Ontario Health COVID-19 to secure PPE but at a cost.
- To me my accomplishment was that I purchased/secured all that was asked to make sure we were prepared in the event of a COVID outbreak in a very short time, it was over whelming!!!  
And in the middle of all this Year End inventory was thrown in that added more stress but we did it!
- Prior to COVID-19 it's almost hard to think back to my normal day to day job. I worked on quotes, purchase orders needed for projects like the Emergency parking lot lighting, the Safe Room and Supply Agreements/Contracts for Medical Supplies to participate in and also a Save On Energy rebate for interior and exterior lighting that was replaced.



### Quick Facts:

- 117 outpatients served with 1233 visits
- 218 Occupational Therapy clients
- 99 Kinesiology clients served:
  - 27 clients for GLAD (group)
  - 21 clients for Chronic Pain (group)
- 63 physiotherapy clients served (contract basis)
- Total revenue generated: \$30,665

\*Total clients include ECW, Acute Care, Outpatients, and LHIN & Firefly contracts

### Rehabilitation Services

Christine Grant/Jessica Gosselin/Kelsey Weir

Right before COVID-19 was declared a pandemic, there were 4 staff members in the Rehabilitation Department:

- Jessica Gosselin - Occupational Therapist (full-time)
- Christine Grant - Rehabilitation clerk (full-time)
- Kelsey Weir - Kinesiology/ Rehabilitation Aid (full-time)
- Ruth Sportak – Rehabilitation Aid (full-time, temporary)

### Quality Improvement Initiatives

- Aesthetic updates to the department: painted walls, rearranged layout, and moved splinting room to increase functionality.
- Ruth was hired as a temporary full time rehab assistant in December 2019 to assist the department in managing the increasing caseload.

### Continuing Education

- Our OT obtained her acupuncture certification from a 13 week program incorporating Chinese medicine and a western rehabilitation approach. This modality was highly requested by our clients, and we are happy to be able to offer it.
- Updated wheelchair assessment tools: Our OT and Kinesiologist attended the Superior Seating Conference to learn updated gold standard wheelchair assessment skills.
- Our Kinesiologist took a soft tissue release course and persistent pain course. In her personal time she became a fully qualified yoga teacher and incorporates some of what she learned into her treatment/groups.
- Our Kinesiologist and Rehabilitation Clerk have been attending bundled care webinars to update the department's knowledge on new government billing requirement in preparation for when the Physiotherapist position is filled.

- Our Rehabilitation Clerk has been attending webinars to further her education on Practice Perfect (Rehab's stat/finance/documentation program) in order to improve flow of administration.
- The department has been working to switch to Meditech documentation for all outpatients. This is ready to roll out when given the go ahead, aiming for June 2020. This will eliminate most of the paper documentation with the exception of LHIN contact clients.

### Challenges

- We have a vacant PT position since January 2019 with intermittent coverage since.
- The OT position was vacant as well from January 2019 with intermittent coverage until our current OT started under contract and then eventually was hired full-time.
- Not having a regular PT / OT limited AGH's capacity to provide appropriate service to the community
- Unfortunately, all post operative lower body injuries (or complex cases) must go to Thunder Bay or Fort Frances for PT services
- Communication between healthcare stakeholders has been a historical challenge. We have been trying to bridge this gap by sending updated reports to primary care providers and work towards information sharing that works best for all groups. i.e. using Meditech so physicians can review their patients' progress.
- Communicating to the primary care providers the array of services we can offer can be challenging vast. We are currently working on creating a document for Physicians and Nurse Practitioners to reference when having questions regarding what they can refer to/consult each therapist for.

### Accomplishments

- Our OT is fully qualified to offer acupuncture as a treatment modality.
- Our Kinesiologist has stepped up into this role, which she is fully qualified for, to help manage the large waitlist. The OT has been managing all upper body injuries while the Kinesiologist manages lower body injuries (as long as they are not post-operative).
- Our Kinesiologist created a falls prevention program for ECW. She offers exercise prescription and KIN therapy for eligible residents.
- The chronic pain group program has added one-on-one sessions which incorporate mindfulness and pain education; inspired by the Kinesiologist's education in persistent pain.
- Our Rehab clerk has worked tirelessly to update our documentation and statistic protocols to ensure appropriate resources are available in the case of her absence *(without her we would be lost!)*