



ATIKOKAN
GENERAL HOSPITAL



2022



Annual Report



Healthier Communities Together

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Our **Values**: To epitomize CARE; **C**ompassion, **A**ccountability and Integrity, **R**espect and Dignity, and **E**ducation and Evolution.

Our **Mission**: Provide **inclusive, compassionate,** and **quality** care.

Our **Vision**: Creating healthier communities together.

Introducing our team...

Board Members 2021-2022

Beth Fairfield
Lorraine Gauthier Stromberg
Sally Burns
Jeremy Dickson
Stacey O'Sullivan
Tom Haaney

COVID-19 Incident Management Team

Jorge G. VanSlyke
Stacey Wood
Jennifer Learning
Marie Cornell (Retired)
Cheryl Maki
Dr. Sara Van Der Loo
Michael Ashbee

Management Team

Jorge G. VanSlyke
Chief Executive Officer

Jennifer Learning
Chief Nursing Officer

Dr. Sara Van Der Loo
Chief of Staff

Brittany Beyak-Freamo
Chief Financial & Corporate Services Officer

Stacey Wood
Director of Care

Bridget Davidson
Privacy Officer

Candace Green
Mental Health & Addiction Services Manager

Jessica Gosselin
Rehabilitation Manager

Kristy Matichuk
Lab Manager

Laura Thibodeau
Dietary Manager

Cheryl Maki
Occupational Health, Wellness, and Safety Coordinator

Robert Hermann
Diagnostic Imaging Manager

Krys Cain
Information Systems & Technology Manager

Bonnie Clairmont
Executive Coordinator

HIGHLIGHTS 2021-2022

Finance

- ❖ Major Purchases:
 - Locum rental house
 - Resealing of main parking lot and helipad
 - Safe room construction
 - 19 new computers
 - Oxygen concentrator enhancements
 - Cardiac Monitor
 - Portable Fiber Rhinolaryngoscope
 - 3 IV pumps
 - Bariatric tub and Hoyer lift for ECW
 - GenExpert PCR Machine
 - Rehabilitation Exercise Equipment



AGH hosted a small ceremony to honor the National Day for Truth and Reconciliation and all those affected by Residential Schools.

Human Resources

- ❖ Over 100 postings created for current vacancies and new positions
- ❖ Successfully hired Physiotherapist
- ❖ Successfully created the Occupational Health Wellness and Safety Coordinator role and hired staff
- ❖ Successfully absorbed the Physician Recruitment role
- ❖ Successfully hired Payroll/Accounts Payable position
- ❖ Successfully hired HR Coordinator
- ❖ Successfully hired Admin Assistant
- ❖ Successfully hired Mental Health Counsellor

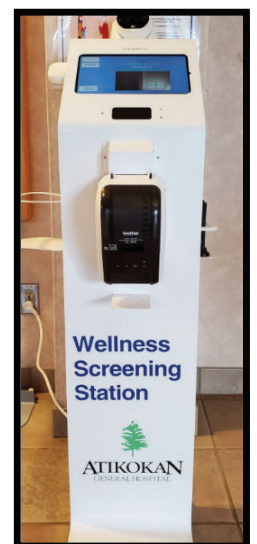


Infrastructure

- ❖ Safe Room was completed after significant delays from the pandemic.
- ❖ Final bids for the installation of the sprinkler system and the long-term care HVAC submitted March 1st, 2022.
- ❖ Windows were replaced in the ECW.
- ❖ AGH has been approved for 22 new LTC beds. Construction is expected to start in spring of 2023.

Technology

- ❖ AGH implemented DarkTrace as an added security for information and technology.



The digital screening kiosk located at the main entrance

Quality Improvement

- ❖ Establishment of a single Patient Family Advisory Council with the three healthcare organizations in Atikokan
- ❖ Regional Pediatric Support established to assist nurses.
- ❖ Chemotherapy services have returned to AGH through a partnership with Thunder Bay Regional
- ❖ Mental Health and Addictions department have started offering 24/7 on-call support services to the Emergency Department.
- ❖ Atikokan Health and Community Services, and the hospital by-laws were reviewed and updated to ensure ONCA compliance.
- ❖ Final stages of renaming process AGH to 'Atikokan Health and Community Services' are in progress.



Care packages donated by The Atikokan Palliative Care Team and Atikokan Pioneer Centre for patients who will be receiving chemotherapy at AGH.

Wellness

- ❖ Several events to celebrate various appreciation days, holidays, and commemorative days throughout the year
- ❖ Implemented several mental health initiatives to support staff



Carnations donated by the Shelter of Hope to recognize the women of AGH on International Women's Day



Corey Lavallee and Liz Shine cooked up an excellent meal for the staff BBQ during Mission Week.

REPORTS



Board Chair Report

Beth Fairfield, Board Chair

The Atikokan General Hospital continued to provide high quality care to its clients throughout the 2021-22 year. The manager team, CEO Jorge VanSlyke, COS Dr. Sara Van Der Loo, CNO Jennifer Learning, CFO Brittany Beyak-Freamo and ECW Director of Care Stacey Wood, worked through the challenges of the ongoing global pandemic, finding creative solutions to staff shortages while simultaneously supporting staff well-being.

During this past year various aspects of the corporation have undergone modernization. An application was submitted and approved for 22 new long-term care beds, a more inclusive corporate name for the organization is in the final stages of being legally changed to Atikokan Health and Community Services, and the hospital by-laws were reviewed and updated to ensure ONCA compliance.

I attended a series of virtual training sessions offered by the Ontario Hospital Association on governance for new directors, led by Nick Pasquino and Heather Pessione. The sessions were excellent and provided information on governance essentials, the duties of directors, role of the Board, governance and management, and hot topics. Our hospital continues to refine its governance practices and Jorge and her team continue to implement and improve best practices to ensure compliance with legislation and to mitigate risks.

During this past year our hospital, along with all of the hospitals in the Northwest has been

engaged by and with the Thunder Bay Regional Health Sciences Centre in an effort to make health care better for the people who find themselves in our hospitals. I sat on the Regional Services Council along with Board Chairs in the District. Although this regional initiative was paused during the height of the Omicron outbreak, it is giving all hospitals a voice to working towards shared solutions that are good for the region and our community.

I would like to thank all of the staff for the part that they have played in keeping our facilities and clients safe during the Covid-19 pandemic. Many have worked long hours under stressful conditions and made personal sacrifices to ensure the health and safety of their clients. The community is most grateful!

Thank you to the members of the Board. Each of you brings a set of strengths to the table that makes the Board function so effectively. Over the course of the year we became very efficient at working in a virtual environment; however, it was wonderful to hold our most recent meeting in person!

In my first year as chair, Jorge and Bonnie have kept me organized and on track. Thank you for the support you have provided to me throughout the year.

In the upcoming year we will continue our work, striving to meet the goals outlined in our strategic plan. I look forward to continuing this work with such a dedicated team of professionals.



President & CEO Report

Jorge G. VanSlyke, President & CEO

“Another exciting year!” or “Time flies when you’re having fun!”

I was thinking of starting with those lines for this 2021-2022 report but it was too “positive” and not a true reflection of what health care workers have gone through this past year. The adrenaline rush caused by an unknown virus has long since faded. The Delta variant made sure it touched almost every staff member at some point. People were exhausted, disillusioned, and had definitely entertained thoughts of switching workplaces, perhaps changing careers. From being “superheroes”, staff had to defend following masking and other mandates. We became the villains against people’s rights.

The possibility of closing the Emergency Department has also been weighing on everybody’s minds especially with the ED closure that happened in Red Lake. We lost four physicians this past year. The remaining local physicians continue to do everything possible to help keep our ED open. We also lost two Nurse Practitioners in the community and have not been successful to date in recruiting their replacements. In fact, the general Health and Human Resources for the Northwest Region and beyond is reaching critical stage with shortage of medical and clinical service providers.

This past year, indeed, was quite grim.

But our story did not end there.

The Hospital Board has gone above and beyond to provide support to the organization. Our Chief of Staff, Dr. Sara Van Der Loo, assumed the Chair role for the Chiefs of Staff for Northwest Ontario, providing regional leadership and representing Atikokan in the

broader community. Our Mental Health and Addictions branch moved to a new location and started offering 24/7 on-call support services to the Emergency Department. Our clinicians are also now trained to provide Critical Incident Stress Debriefing Support and STOP (smoking cessation) to our employees as needed.

AGH has also taken on the physician recruitment role and was successful in acquiring a locum house to ensure availability of support not just for locum physicians but for short-term hard to recruit positions as well. Another highlight is the soft re-launch of chemotherapy services with one patient starting to receive a replacement chemo bottle at the hospital.

We have taken another step towards inclusivity by signing a contract with CanTalk to provide language translation services on demand. One Patient Family Advisory Council was also established this past year for Atikokan General Hospital, Atikokan Medical Clinic, and Atikokan Family Health Team.

The Safe Room was finally completed after the pandemic delayed it significantly. This provides a safe space for those with acute episodes of uncontrolled aggression and self-harm. AGH was approved for \$1.8 million to complete the installation of the sprinkler system and the long-term care HVAC.

As we continue advancing the AGH mission, despite existing uncertainties and exhaustion, I would like to commend this organization and the resilience that people displayed. Nothing short of amazing witnessing the many ways that individuals pick themselves up and others. Our community continues to be supportive, and all of us continue to nurture hope for our future.

PROGRAMS AND SERVICES

Acute Care, Emergency, and Telemedicine

Jennifer Learning, Chief Nursing Officer

Staff have survived two years of living with Covid-19 in our province. There have been many changes over the last two years in terms of policies, staffing, room usage and medical directives. Staff are burned out from all the changes and the stress of not knowing what was coming next. Patients continue to be screened for Covid-19 symptoms before coming into the Emergency room. If they screen positive then they are isolated appropriately. Staff continue to wear eye

protection at all times in the ER and N95 masks when working with any patients who may potentially have covid-19. We have been lucky in that our hospital does not seem to be struggling as much as some of the other hospitals in the region with maintaining nursing staff of RNs and RPNs.



The Acute Nursing floor had many different changes in visitor policies over the past year, particularly when Covid-19 was more prevalent in our community. Currently each patient is allowed four (4) Essential Care Partners who can visit. All visitors must be swabbed using a rapid antigen test every two days and the visiting restrictions will remain in place for now. Staff continue to swab every 48 hours as well as doing daily screenings when coming into work. The Rapid testing has caught a few staff who tested positive before starting their shift and they were sent home so the testing and the screening seem to be working.



The Atikokan Foundation was able to purchase three new IV pumps for the hospital. They are the same pumps that Thunder Bay Regional uses and we are looking forward to launching them into use. This pump is what they use to deliver Chemotherapy in Thunder Bay so we wanted to mirror what is used for that program. We currently have a nurse trained in chemotherapy while we continue to work with Thunder Bay Regional to hopefully bring Chemotherapy services back to Atikokan. Staffing issues throughout the region are one of the reasons for the delay.

The Assessment Centre was extremely busy all last year but particularly during the months of January through to May. The government made changes to their testing guidelines a few times in that time period and kept the Assessment Centre busy. OTN

services also picked up during this time as patients did not want to travel to see specialists so Telemedicine and the Assessment Centre was a busy place over the last year. Kim Sportak maintained her smile and worked through the chaos as best she could with the support of other RPNs who were willing to be trained in that specialty area.

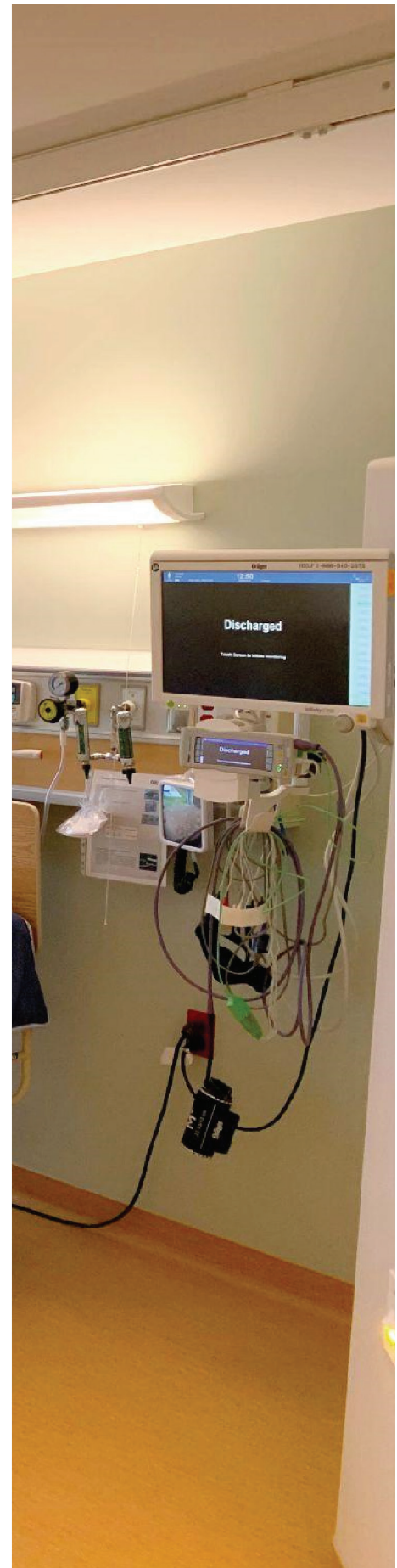
Nursing was able to get their Advanced Cardia Life Support (ACLS) training which they need in order to work in the Emergency room. Nursing and interdisciplinary staff were also able to get their Basic Life Support (BLS) training this spring. ECG reading was also offered this past spring and was well received. Maintaining training has been difficult during Covid but hopefully things are turning around and we will be able to offer more training in the upcoming year.

The hospital was able to accept patients from Kenora and Sioux Lookout when those hospitals were full and patients needed to be repatriated out of Thunder Bay Regional Hospital. The hospital also accepted patients from Red Lake last summer when they had to evacuate their hospital due to the risk of forest fires. The nurses were able to provide excellent care during a very stressful time for everyone. Red Lake was even able to send one of their nurses to our hospital to help the patients adjust to their change in locations which was a great help to the local nursing staff.

The hospital recently changed so that patients now screen themselves and then escort themselves down the hallway to attend to OTN, Lab or x-ray services. This is the first time in two years that staff have not escorted patients to and from their work areas. We are hopeful that this is a sign that things are starting to return to normal.



A few of our awesome, hardworking, and dedicated Nurses ready to enjoy the cake we had to celebrate #NationalNursingWeek! Thank you for all you do!



AG H Foundation

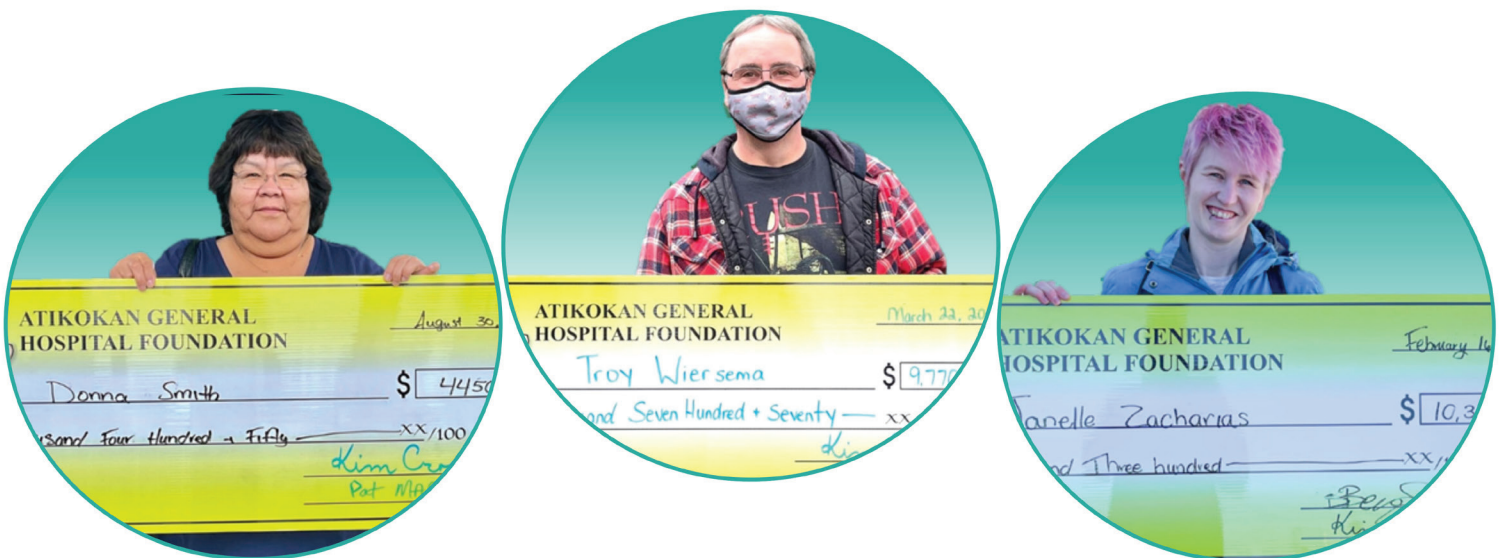
Meghan Zacharias, AGH Foundation Chair

The AGH Foundation is very pleased to report on another successful year. Despite the COVID-19 pandemic and economical downfalls, donations were still well received and many important purchases were made to benefit patient care.

*As of March 31, 2022 – our total revenue stands at **\$258,527** (\$119, 841 increase from 2021). Included in this are:*

Fundraiser	2022	2021
General Donations	64,581	33,434
In-Memoriam Donations	51,389	25,194
Christmas Campaign	14,490	25,964
Lottery Revenue	104,010	42,475
Extended Care Donations	18,770	1,464

Although we are no longer offering it, our monthly 50/50 draw was a very big success! I can not emphasize how much time and energy went into this undertaking. I would like to personally recognize Kim Cross, Pat Martin, Jody Labossiere & Robin Johnson for the countless hours they volunteered. Without their efforts, none of this would have been possible.



A few of our lucky lottery winners collecting their prize.

Our annual Christmas Campaign was slightly down from previous years, but given the pandemic this is understandable. We are hopeful that we can boost donations from our mail-out campaign this year, and our “Annual Celebration of Friends” can resume in December.

As of March 31, 2022 – our capital purchases were \$158,070 (\$125,552 increase from 2021). As always, these purchases would have not been made possible without the exceptional generosity of our donors. The ongoing support we receive is truly appreciated.

In regards to Board composition, we seen a few changes this past year. Kim Cross made the decision to step down as Chair. At that time, I, Megan Zacharias took over the position. I would like to thank Kim for everything she has done for the AGH Foundation over her tenure as Chair, and am very appreciative of her support and guidance as I have transitioned into my new role. Additionally, we have welcomed Tom Hainey to our team. His wealth of knowledge and dedication has proven beneficial, and we are very happy to have him.

In closing, I would like to again thank our entire Board, and support staff (Bonnie Clairmont and Brittany-Beyak-Freamo) for the valuable work that is continuously volunteered. We are so lucky to have such a wonderful group of individuals who all share the common goal of benefitting both patient care and our community.

Donation Statistics

We received donations came from
276 individuals and
18 organizations.

We received **\$154,000** in donations and the
50/50 lottery brought in **\$104,000** in revenue.

Over **\$258,527**
in revenue this year!

Capital purchases included:

- ❖ ECW Stove
- ❖ Flowers for courtyard/gazebo area
- ❖ Shed
- ❖ Shed Foundation
- ❖ Projector and screen (for ECW recreation)
- ❖ OTN Laptop
- ❖ ECW Tub and lift
- ❖ GeneXpert- Lab
- ❖ Upright bike- rehab
- ❖ Rehab treadmill
- ❖ Cardiac monitor (ER)- purchased by OPG
- ❖ Rehab- neurogym STS
- ❖ Rehab BMI Scale
- ❖ Rehab- Pulley system
- ❖ Rehab- vital signs machine
- ❖ ECW- Hoyer lift
- ❖ ECW- lift system
- ❖ IV pumps (3)- Acute

Atikokan Mental Health & Addictions Services

Jorge Van Slyke, Manager of MHAS

Name Change

Since the move to the new office location on Main Street in May of 2021, we have undergone a name change to Atikokan Mental Health and Addictions Services (MHAS), which we believe better reflects the services we offer. The next step for us is to look at re-branding (logo, etc.).

Staff

There have been many staffing changes at MHAS in the past year, the retirement of Candace Green, Cathy Barnard, and Barbara Jackson. The retirement of these staff with their combined 66 years of service left a huge hiring endeavor to replace them. We miss them and wish them much success as they move to their next adventure.

Since the retirement of Candace Green, I have been directly managing the MHAS department. In that role, I have access to clients' files as needed for supervision. But due to possible conflicts of interest, we have come up with a process so I can continue to provide clinical supervision without access to identifying information. We are auditing my access regularly to reassure clients, as needed. We are actively recruiting the MHAS Manager position and hope to fill it very soon.

Tanya Ross was the successful applicant for the position of Administrative Assistant. Tanya is originally from Atikokan and we welcome her to AGH and back home to Atikokan.

Sherri Nolan was the successful applicant for the position of Counsellor. Sherri is also an Atikokanite and we extend a warm welcome to our new clinician!

Communication

MHAS is now networked with the Atikokan General computer and telephone systems. What this means is that for the first time in at least 30 years, our MHAS Team can now access our computer system and use the file locations in order to expedite transition of files.

Programming

Critical Incident Stress Debriefing: One of the requests from our staff is to have a formal and timely Critical Incident Stress Debriefing when crisis happens that impact our employees. We are happy to announce that our MHAS clinicians are ready to offer this support effective May 1, 2022. Our on-call clinician will provide you with support after hours.

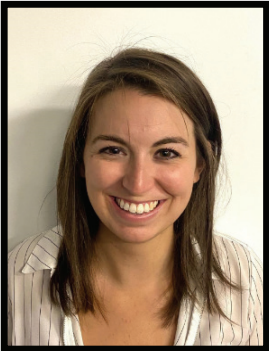
Smoking Cessation "STOP" Program is offered with free Nicotine Replacement Therapy (NRT) along with counseling support. This is available to our staff and our community, please pass along!

Services

MHAS is now offering computer use services to their clients. We have set up a system for their use to ensure they are able to access online programs and supply mandatory reports to providers, etc.

Business Office

Brittney Beyak-Freamo, Chief Financial and Corporate Services Officer



Brittney Beyak-Freamo

This year, the staffing in the business office changed. We continued to have our two office staff, Wendy Kempf and Cyndy Ellek, but we were also fortunate to receive funding through the Northern Ontario Heritage Fund to have an intern start in June 2021. We were successful in recruiting Tei Kho, who was a huge help throughout this year. She will be with us until June 2022 and we are going to miss her greatly when her contract is done!

Another big upcoming change we have in the office is Wendy's retirement in July 2022. In preparation for her departure, Wendy began job sharing with Brianna Coulson in January 2022 to ensure that her successor would have adequate time to learn this role. Though we are all sad to see Wendy go, we wish her all the best in this next chapter!



Cindy Ellek

As usual, the biggest project we have (aside from all the extra reporting we have to do due to COVID-19) is our year end audit. For the first time since 2019, we were able to have the auditors here in person. I must say, things go far more smoothly when they are here in person! The only portion of the audit that was done remotely, was the inventory count. Thank goodness for technology!



Brianna Coulson

Throughout the year, our cash flows remained strong, and we did not have to use our line of credit at all. This is due to many receivables being reimbursed over the last year and the Ministry of Health catching up in reimbursing COVID-19 expenses. Unfortunately, due to various pressures, both in terms of staffing and supplies, we saw a deficit for this fiscal year. The increases in supplies due to inflation was at a minimum 3.5%, and even higher for some goods.



Wendy Kempf

We faced numerous staffing issues due to COVID-19, resulting in higher wages and benefits. Though the amount of pandemic related funding we received from the Ministry of Health declined by approximately \$600,000 as compared to the 2020/2021 fiscal year, we were still able to receive some financial aid for COVID-19 related costs, such as COVID-19 Incremental Operating Costs, Capital Costs, Assessment Centre and the PSW Temporary Wage Enhancement. Even though we were in a deficit operationally, since our cash flows remained in a good position, we were able to purchase \$837,168 in capital! These were purchased with provincial grant funding of \$331,771, donations of \$160,611 and operating cash flows of \$344,786.

Some of the bigger purchases this year included:

- ❖ Resealing main parking lot and helipad
- ❖ Completion of the safe room
- ❖ 19 new computers
- ❖ Increasing the capacity of oxygen concentrator
- ❖ Cardiac Monitor
- ❖ Eye Slit Lamp
- ❖ Portable Fiber Rhinolaryngoscope
- ❖ 3 IV pumps
- ❖ New stove, windows, cinema projector system, Bariatric tub, and Hoyer lift for ECW

- ❖ GenExpert
- ❖ Temperature Monitoring System
- ❖ Rehabilitation Exercise Equipment
- ❖ Locum rental house
- ❖ And numerous others!

These were purchased with the assistance of the AGH Foundation. We truly appreciate all the do for the hospital. And we also want to thank all of you who have donated to the AGH Foundation whether through regular donations or through the 50/50 lottery.

Atikokan General Hospital - Statement of Operations		
For the year ended March 31,	2022	2021
Revenue		
Ministry of Health and Long-Term Care Base Allocation	\$ 8,448,348	\$ 8,282,748
Ministry of Health and Long-Term Care One-Time Payments	546,459	1,059,614
Hospital On-Call Coverage	93,984	93,984
Visiting Specialist Funding	21,512	21,512
Other Revenue (Schedule 1)	1,336,471	1,518,644
Amortization of Equipment Grants/Donations	112,431	113,461
Provision for Recoveries	(81,067)	(63,939)
Total Revenue	10,478,048	11,025,934
Expenses		
Salaries and Wages (Schedule 2)	6,259,666	6,258,685
Employee Benefits (Schedule 3)	1,576,513	1,577,326
Employee Benefits Future Costs (Note 13)	15,800	5,800
Medical Staff Remuneration (Schedule 4)	181,838	134,662
Supplies and Other Expenses (Schedule 5)	1,870,971	1,875,313
Drugs and Medical Gases	69,482	63,395
Medical and Surgical Supplies	256,710	443,416
Bad Debts	2,172	8,864
Amortization of Software Licenses	64,481	68,324
Amortization of Equipment	276,735	250,258
Total Expenses	10,574,368	10,674,443
Surplus (Deficiency) of Revenue over Expenses from Hospital Operations	(96,320)	351,491
Other Items		
Amortization of Building Grants/Donations	408,833	411,295
Amortization of Land Improvements and Building	(485,255)	(484,810)
Loss on Disposal of Capital Asset	1,195	(829)
	(75,227)	(74,344)
Other Votes and Programs - Revenues (Schedule 6)	658,075	669,400
Other Votes and Programs - Expenses (Schedule 6)	(608,830)	(607,529)
Other Votes and Programs - Provisions for Recovery (Schedule 6)	(49,245)	(61,871)
	0	0
Surplus (Deficiency) of Revenue over Expenses for the Year	\$ (171,547)	\$ 277,147

COVID-19 Response Highlights

Jorge VanSlyke



AGH is offering COVID-19 Assessment Centre Services as of Monday, August 16th, 2021! For the full details, how to book, contact etc. please visit this page on our website: <https://aghospital.on.ca/services/assessmentcentre/>

Vaccination Rate in Atikokan is 73! As of June 1, 2021, we were leading the northwestern health area.

ECW Suspect Outbreak

For the first time since COVID-19 started, we had a resident that tested positive on March 25, 2022. Lots went on but here's what I will remember:

We worked like a well-oiled machine! The IMT has a WhatsApp group that was activated right away and within a few hours of finding out that a resident tested positive, with the help and initiative of the entire ECW team and our charge nurse, we were able to set up protocols such as:

- Closed off the unit to general visitors.
- Essential caregivers allowed to visit one at a time.
- Signs posted.
- Families notified
- Outings discontinued

- Additional housekeeping shifts booked
- Meals served on trays for a few days
- Positive resident and close contacts immediately isolated
- Screening including temperature checks were initiated twice a day

The whole team followed protocols and made suggested changes based on ongoing assessments. The whole team mobilized and just did what was best for our residents. It was incredible to witness. The families were overwhelmingly supportive.

We are doing three main audits weekly: Distancing, PPE, and Hand Hygiene to comply with Ministry requirements and our own internal commitment to keep all of us safe.



It is our priority to ensure that patients and residents in our care have a safe environment and that staff, physicians and learners are protected at work, so they remain well, and we can avoid any disruption to patient care.

As masking continues to play an important role in limiting the risk of COVID-19 transmission and outbreaks, and masking mandates remain in place for Long Term Care facilities, Atikokan General Hospital will maintain our current requirement that outpatients, visitors, staff, volunteers, and learners wear hospital-approved masks at Atikokan General Hospital for the foreseeable future.

Thank you for your cooperation and commitment to ensuring a safe environment for patients, residents, our team and everyone who depends on us. As we continue adapting to co-existing with COVID-19, we will share further updates as they become available.

Diagnostic Imaging

Robert Herrmann, Diagnostic Imaging Manager



Robert Herrmann, X-Ray/Ultrasound

Accomplishments:

- New addition to DI staff (Amanda DeCorte) has worked out very well; excellent patient care skills, and as a female tech gives female patients the much-appreciated option as to who provides their ultrasounds.
- Robert passed his CMRITO (college) audit in February 2022.

Technology Improvement:

- 3-Day Holter Monitors for improved patient comfort and no return appointment required; also accommodates increased no. of Holter exams with fewer delays compared to older system. Started use Feb 2021.
- Radiologist Voice Recognition Software for increased turn-around-time of reports (started April 2022)
- Acquired a specialized X-Ray chair for high quality patient exams and safety
- New office chairs and a patient turning disc for X-Ray room table (suggestion from annual back-care staff)

Process Improvement:

- Nurse ECG training (started May 2022) on regular basis, to improve data entry compliance and reduce DI staff involvement in ECG clerical work.
- Tracking report delays/errors caused by new Voice recognition software by CTS radiologist group and alerting them to make corrections as needed.
- Coordinating exams with Lab, so patients receive same-visit service from both departments.



Katrina Grainger, X-Ray



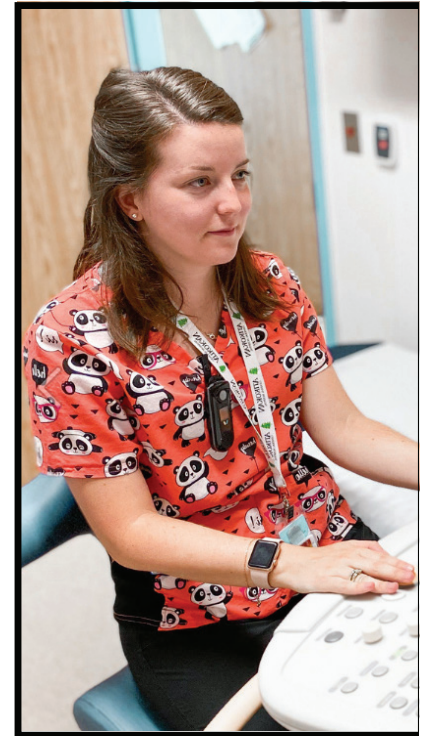
■ 1613 X-Ray Patients ■ 890 Ultrasound Patients



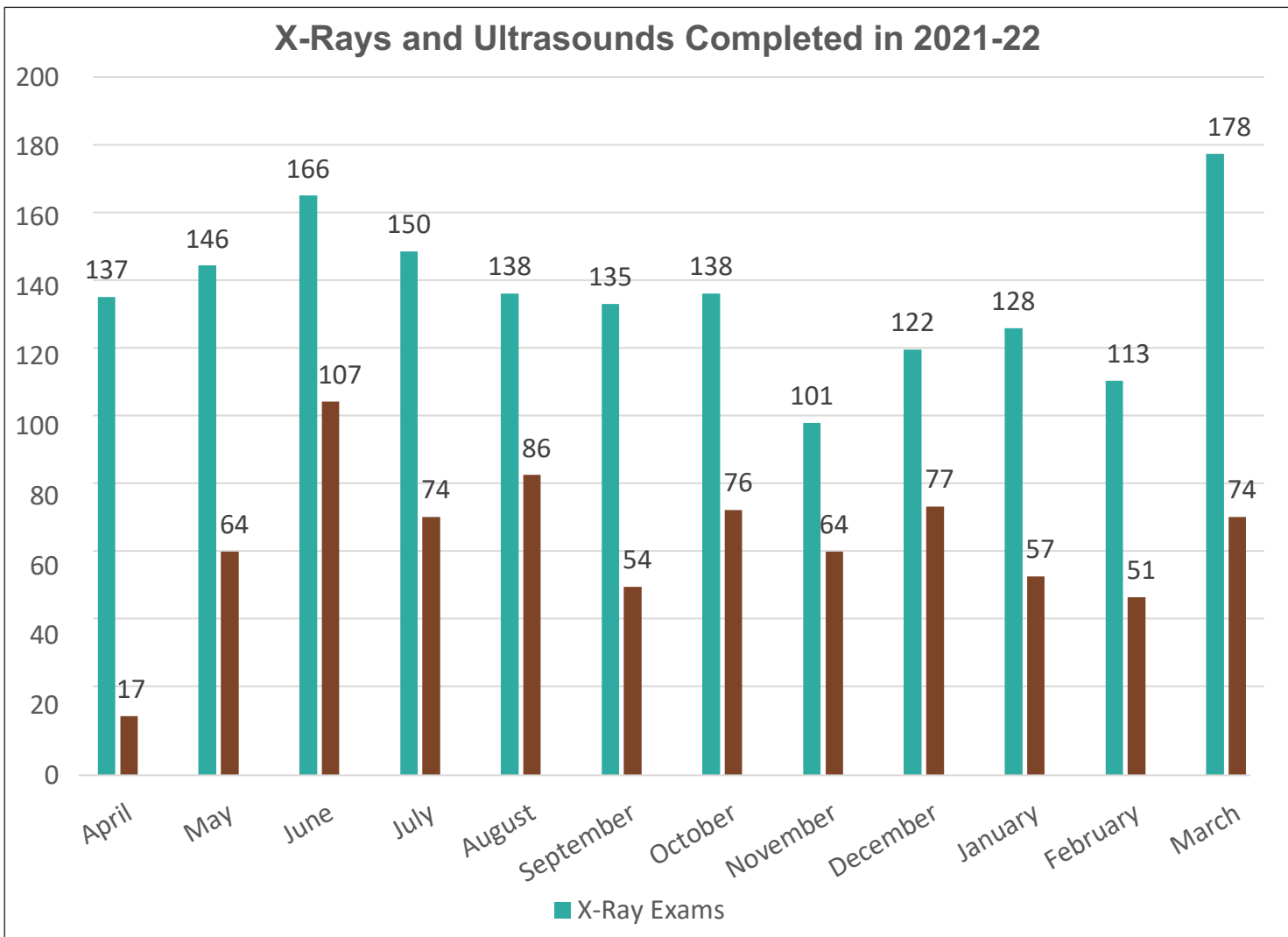
Emily Butts, X-Ray

Ongoing Challenges:

- Portable X-Ray machine software failures requiring use of back-up equipment until GE pays service visit
- X-Ray room software failures interrupting exams (GE expected to replace computer June 1st and fix portable machine issue, as well)
- Voice recognition software still delaying reports (up to ten days) or generating print errors
- Ultrasound room temperature control
- Ultrasound machine requires eventual replacement
- Creation of VPN tunnel for remote X-Ray troubleshooting by GE hits wall due to Thunder Bay Regional IT restrictions (Our new IT specialist wishes to re-initiate discussions with TBRHSC, since GE uses a VPN tunnel to service their equipment, and the issue for us has caused loss of images –directly impacting patient care)



Amanda DeCorte, X-Ray/Ultrasound



Dietary

Laura Thibodeau, Food Services Manager and Registered Dietitian

Accomplishments: Over the past year there has been a mix of successes and challenges for the dietary department. Like the rest of the organization, we worked to maintain high quality services for our patients and residents despite the pandemic restrictions. We are proud to report that:

- ❖ Modifications were made to our operations to reduce the spread of COVID-19.
- ❖ In the past year we were able to resume our meals on wheels services to pre-pandemic levels (offering soup and dessert with meals).
- ❖ We implemented a new Staff training policy to align mandatory training with LTC legislation.
- ❖ We have also implemented a more regimented audit schedule to ensure compliance and quality assurance.
- ❖ Updates have been made to the AGH diet manual to reflect best practice guidelines.
- ❖ We have adopted an orientation guide to streamline the orientation process for new hires in the department and a Surge Learning schedule to support staff with their training.
- ❖ Registered Dietitian Laura Thibodeau shadowed at Diabetes Health and the Eating Disorder Clinic in Thunder Bay for professional development and to improve services offered to clients with the Atikokan Diabetes program and outpatients through the FHT. Laura was also pleased to offer the first group education session through the Pioneer Centre since the pandemic (more in the works for the fall!)



Some of our Dietary staff preparing delicious food as usual.

Food Services Manager and Registered Dietitian:

2021-2022 was my first full year as the Registered Dietitian and Food Services Manager and in 2021 I accepted the position permanently. Covering management, acute care, long term care, outpatient nutrition and homecare services make every day new and exciting. The variety of the job is both the most challenging component of my role and the best part. The support from the management group, especially my direct supervisor, Stacey Wood has been incredible and has fostered so many opportunities for professional development. I am also proud to work with such an excellent team in the kitchen who demonstrate their care and compassion for our patients and residents daily. **A huge thank you to them for their fantastic work!**



Kryz receiving a few of her retirement gifts.

Happy Retirements!

We bid **Kryz Bednarski** a Happy Retirement after an amazing 41 (!!!) years of dedication to AGH. We were able to successfully replace Kryz and have had some shifts of staffing in our department.

We also said our goodbyes to **Jill Leduchowski** who retired at the end of June, 2022. Jill has done an excellent job as the dietary Lead Hand for the past several years.

We wish them both the best in this new and exciting chapter in their lives.

Extended Care Wing

Stacey Wood, Director of Care

Another year has come and gone and we continue to celebrate the tiny steps we are making in returning back to some sort of “normalcy” from this pandemic! The residents have been able to welcome back all types of visitors, volunteers and have also been able to enjoy outings again with families and friends! The hard work, diligence, and swift action of our staff was proven to pay off throughout the last year as we managed to get by with only one “suspect outbreak” case in March of 2022 when one of our residents tested positive for COVID-19. The resident was isolated quickly and measures were put in place right away to contain and prevent the spread within the home. Increased cleaning measures, temporary visitor and outing restrictions and ongoing infection control measures were put in place right away and we are happy to report that the single case was contained with no further spread to any other resident, staff, or visitor!



Although we continue to follow directives from the Ministry of Health and Long-Term Care that help protect our residents such as masking, rapid antigen testing and daily screening of symptoms – we continue to work towards balancing the quality of life and rights of our residents while protecting residents from COVID-19 the best we can! This has also been the focus of the Ministry of Health and

Long-Term Care over the past year as they recently introduced the NEW – Fixing Long-Term Care Act, 2021 (FLTCA) and Regulation 246/22– which replaces the old Long-Term Care Act, 2007.

The Fixing Long-Term Care Act, 2021 is the legislation in which all Long-Term Care homes are governed by in Ontario. The new Act came into force on April 11, 2022 with a greater focus on ensuring residents are receiving better quality care and enjoying a better quality of life by supporting three main pillars of the ministry’s plan to fix long-term care: **Improving staffing and care; protecting residents through better accountability, enforcement, and transparency; and building modern, safe, comfortable homes for residents.**

The new Fixing Long-Term care Act supports these pillars by:

- ❖ Mandating an average of four hours of direct care per resident per day by **March 31, 2025;**
- ❖ strengthening the Residents’ Bill of Rights to align with the Ontario Human Rights Code and recognizing the role caregivers play in resident health and well-being
- ❖ implementing new requirements for annual resident, family and caregiver surveys
- ❖ establishing new compliance and enforcement tools, including doubling the fines on the conviction of an offense under the legislation
- ❖ introducing a Minister’s review of a Director’s decision in the licensing process.



The Atikokan General Hospital Extended Care Wing will continue to work towards meeting these new requirements set out by the Ministry and anticipates some improvements and changes in staffing, environment, and quality improvement initiatives for our home.



Residents enjoying the Trishaw Bike

Health Records

Bridget Davidson, Health Information Manager

Staffing: The Health Records department is staffed with 3 full-time staff members, Bridget Davidson, Amber Horricks and Emily Butts.

Accomplishments:

- ❖ Emily Butts completed her two-year health records technician program through CHA in June 2021 and successfully challenged the Canadian Health Information Management Association certification exam in September 2021. Congratulations to Emily!
- ❖ Emily has become full-time which has allowed Bridget to take on the role of Physician Recruitment and Retention. Bridget has been able to offset some of her health records tasks to take on more for recruitment as the number of physicians in the community has dropped to a critically low level.

Health Records staff submitted clinical data to CIHI for 4108 emergency room records (↑743 compared to fiscal 2020) and 197 acute care discharged charts (↑14 compared to fiscal 2020). AGH's previous years' data submitted to CIHI is available to the public at: <https://yourhealthsystem.cihi.ca/hsp/?lang=en>

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

Access to Patient Information: There were 51 access requests for personal health information processed (↑15 compared to fiscal 2020), resulting in \$1,226.25 fees collected (↑237.21 compared to fiscal 2020 for processing the requests).

For the calendar year 2022, to date, **228** professional staff credentialing applications have been processed and approved by the Board.



Health Records Office



Emily Butts and Amber Horricks

Housekeeping/Laundry

Ruth Sportak, Lead Hand

Staffing: There are 5 full-time, 5 part-time and 6 casuals in this department.

Lead Hand: I became the lead hand in July 2021, when Heather Desgroseilliers retired after 35 years of service! During the COVID-19 pandemic our housekeeping girls were busy spring cleaning, getting extra hours to do an evening shift and let me tell you, they did one heck of a good job. We only had one outbreak of COVID-19 and because of that the hospital could not do activities or have any inside visitors. A huge shout out to the whole hospital for following the PPE protocols. Our QI project was to keep track of how much linen we wash for the year. We do not only wash the hospital linen but we also wash EMS, Atikokan Medical Associates, and the personal clothing that comes down from the Extended Care residents. It has been a very interesting year for me as a new lead hand, but I am happy to have the staff in this department!

*Laundry Poundage for the year was
153,820 lbs:*

Source	Pounds Laundered
AGH Linen	143,674 lbs
EMS Linen	2,686 lbs
AMA Linen	170 lbs
Personal Linen	7,290 lbs



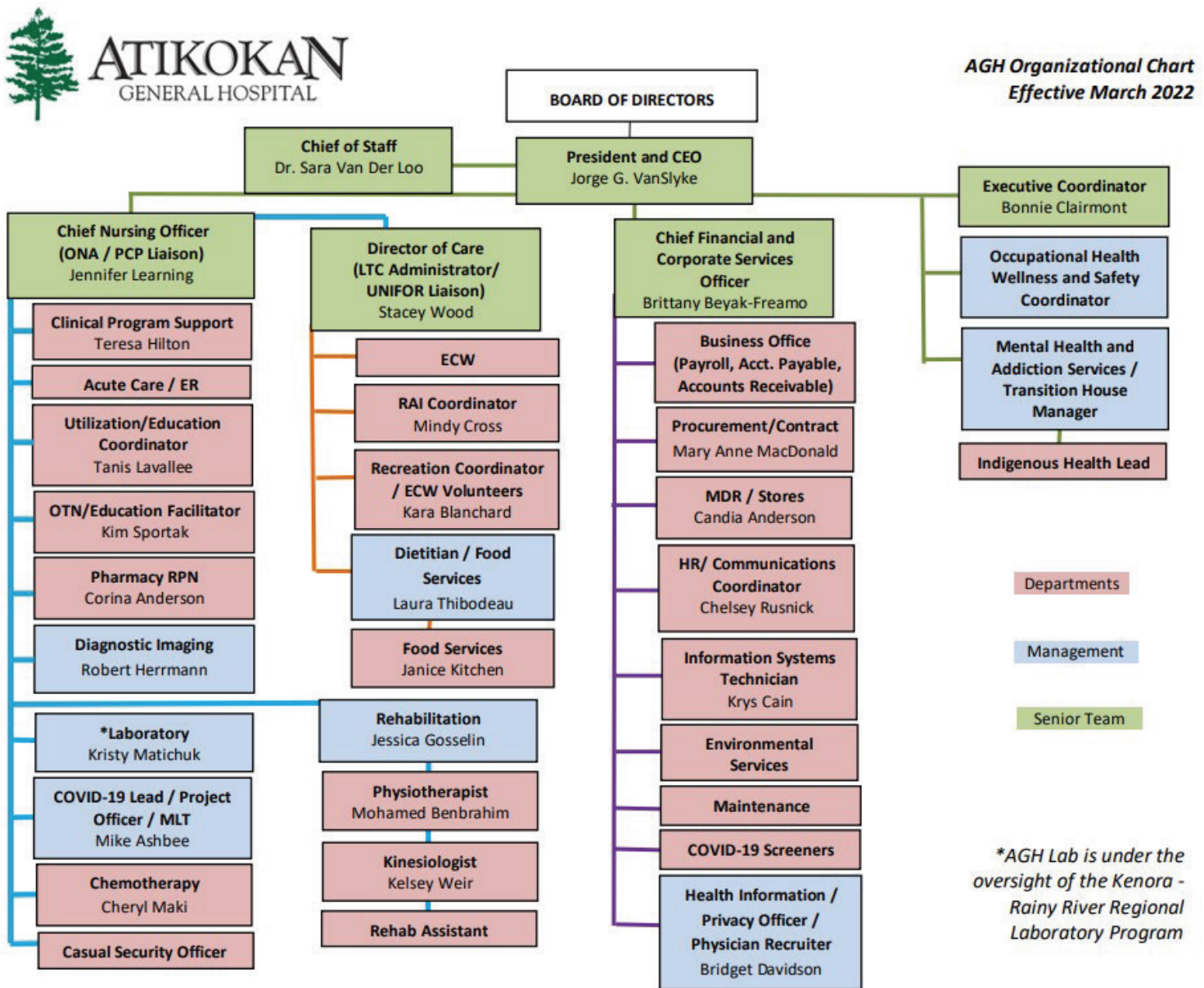
Lead Hand, Ruth Sportak.

Human Resources

Chelsey Rusnick, Human Resources/Communications Coordinator

Throughout 2021/2022, we hired a full-time Human Resources/Communications Coordinator, Chelsey Rusnick. Chelsey started in January 2022 after the departure of our previous HR Coordinator. HR has been very busy this year as we had 100 postings, both for vacancies of current positions and some new positions. Chelsey has been also working on revamping our orientation process, our employee handbook and our hiring process. Going forward she will continue to support the management team with their hiring and any other employee related tasks, and relaunch our employee assistance program with LifeWorks. This program has numerous benefits and we are hoping that with a relaunch more employees will take advantage of all that it has to offer!

Atikokan General Hospital Organizational Chart



Moving forward, our strategic priorities are...

2021-2022

Review and Initiate

Patient Experience

Enhance the patient/client experience

- ❖ Stronger integration of patient experience
- ❖ Increasing available care closer to home
- ❖ Focus on quality improvement

2022-2023

Monitor and Sustain

Healthy Workplace

Co-create a healthy workplace culture.

- ❖ Continue to strengthen effective communication internally and externally
- ❖ Better risk management and compliance
- ❖ Advocate for quality improvement towards a thriving culture
- ❖ Stronger focus on continuous learning

2023-2024

Refine-Redefine-Reimagine

Infrastructure

Modernize Infrastructure.

- ❖ Physical infrastructure
- ❖ Information systems infrastructure
- ❖ Workflow infrastructure
- ❖ Strongly support fundraising initiatives and grant applications to increase capacity beyond regular funding
- ❖ Systems infrastructure

Information Systems and Technology

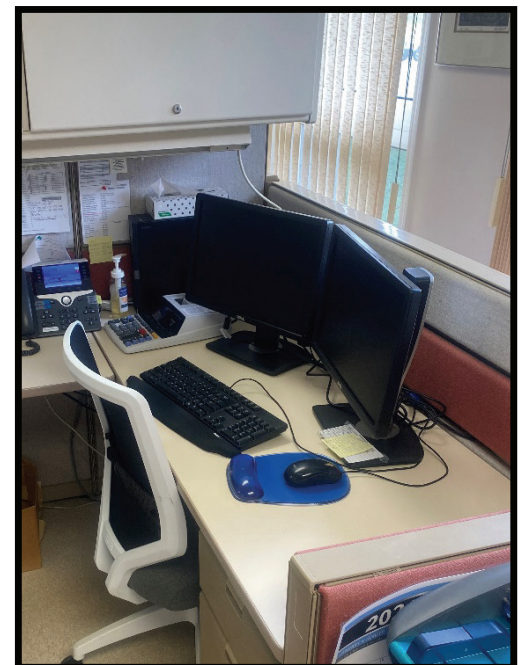
Krys Cain, IT Manager

This year, with the growing concern across all sectors regarding cybersecurity, AGH implemented DarkTrace. DarkTrace monitors all network traffic and builds a baseline of how devices should be acting on the network. It will take automatic action to quarantine devices if they start to behave outside of that baseline.

You can find out more about the abilities of DarkTrace at:

<https://darktrace.com/>

DARKTRACE



Our technology is safe and secure

Laboratory

Kristy Matichuk, Laboratory Manager

Staffing Resources: (1) Full time lab manager; (1) 0.4 MLT - Senior Charge Technologist; (1) Full time MLT; (1) Casual locum MLT; (1) Full time MLA; (1) Part time MLA; (1) Student lab aide (ended August 2021).

Accomplishments:

- ❖ Installation and validation of the Siemens Dimension EXL 200 chemistry analyzer
- ❖ Expansion of license scope to include immunoassays
- ❖ Validation of CRP, Magnesium, and quantitative BhCG on the EXL 200
- ❖ Introduction of an appointment booking system for outpatient collections
- ❖ Expansion of license scope to include virology and immunology
- ❖ Procured funding from the Foundation to purchase a BD Bactec FX40 blood culture incubator, the Cepheid GeneXpert for PCR testing of Covid-19/FLU/RSV and MRSA/VRE and also the Cellavision - an automated haematology slide reader
- ❖ Installation and implementation of a Biofire Torch for PCR testing
- ❖ Installation of the Cepheid GeneXpert for PCR testing
- ❖ Validation of Covid-19, RSV and Influenza tests on the Biofire
- ❖ Assisted in the development, implementation and continuously providing support to the in-hospital Covid-19 Assessment Centre
- ❖ Successfully met or exceeded provincial standards for reporting Covid-19 swabs throughout the on-going pandemic
- ❖ Digitization of all Point of Care Training Materials
- ❖ Developed a venipuncture educational resource for nursing staff
- ❖ The lab passed IQMH mid cycle accreditation
- ❖ AGH Lab group completed Virtual Microbiology Symposium for continuing education
- ❖ Active participation in the KRRRLP (Kenora Rainy River Regional Laboratory Program).



Michael Ashbee, Liz Shine, and Ying Zhu busy with the Biofire.

Quick Facts

- ❖ **97%** of outpatients would recommend AGH's outpatient lab.
- ❖ Staff attended more than **30 continuing education opportunities** across the Laboratories disciplines.
- ❖ The Laboratory participated on **9 hospital committees**

Maintenance



Corey Lavallee, Greg Armstrong, Richard Bowes

Our maintenance department is staffed with 3 full time employees, Richard Bowes, Corey Lavallee and Greg Armstrong. They work extremely hard to ensure our facilities are operating in a safe and efficient manner and provide 24/7 coverage for all our properties, which include the hospital, ambulance base, support house and locum house, while also maintaining our plant and equipment. Throughout this year, we were lucky to have a co-op student from AHS join our maintenance crew for a few months. This extra hand was great and also provided this student with some great experience. In 2021/2022, our maintenance team answered over 700 requests in our online ticketing system!

As our building continues to age, we are faced with ongoing pressures, particularly in terms of our HVAC system. Luckily, throughout this year we began working with RVI Group to develop a design to replace the HVAC in our Extended Care Wing. Through this, we also began to note the deterioration of the HVAC system in our service wing. In 2022/2023 we will begin the process of replacing the HVAC in our entire facility.



Locum House

In addition to this, we also have to meet fire code by 2025, which means our sprinkler system must be upgraded. This will also be completed this upcoming year. And, we have to replace our sewage pump and storm water drainage!

There's a lot of upgrades that will be happening this upcoming year!

Quick Facts

Our maintenance team answered **over 700 requests** in 2021/22 using our online ticketing system!

Medical Device Reprocessing/Stores

Candia Anderson, Lead Hand

MDR:

Responsible for the cleaning, disinfecting and sterilization of basins, instruments and equipment such as IV pumps, MDR has worked tirelessly to maintain standards. We serve ER, ACT, ECW, AMA (clinic) and FHT. MDR works closely with the Utilization Coordinator, Infection Control and consults with the CMO. This requires strict attention to detail, much record keeping and considerable paperwork. In addition to the daily paperwork, MDR goes above and beyond to write over 70 Policies & Procedures and over 60 reports a year.



Lead Hand, Candia Anderson

Stores:

Stores is responsible for supplying every department of AGH and the FHT with supplies ranging from facial tissue to IV solutions. Stores works closely with the Procurement Agent, Utilization Coordinator and listens to what everyone wants. Stores also involves a plethora of paperwork. There are currently over 740 items in the Stores inventory. Every item delivered to a department has to be recorded in 'the Book' and the computer. Over the years, I have done usage analyses on IV Solutions, Dressings, Catheters etc. to assist in the endeavor to reduce stock. Stores has been tracking our PPE usage since the start of Covid and provides Health Records with that information for their report to the Ministry of Health. Stores staff fills in when the Procurement Agent is away. Stores also assists Procurement in compiling all departments' Year End Inventory for the Auditors. Caitlyn Griffiths is training for the part-time position for MDR / Stores.

The Covid crisis was very stressful on Stores right from the beginning with general panic on what should be procured. Spaces had to be re-designed, PPE supplies were short and had to be secured. A job well-done to our MDR/Stores staff!

Reports Completed by MDR/Stores:

- ❖ Instrument Usage
- ❖ Report annually in January Test Failures
- ❖ Report annually in February Point of Care Cleaning
- ❖ Report twice a year September & March IV Pump Cleaning
- ❖ Report annually in October Rejected Instruments (discarded because no longer sterilizable)
- ❖ Report annually in November starting November 2022 Supplies Lost to Expiration
- ❖ Quarterly PPE Usage-Weekly
- ❖ Supply Usage- On Going

Patient and Family Advisory Council



Another exciting development is AGH's partnership with Atikokan Medical Clinic and Atikokan Family Health Team to share one Patient and Family Advisory Council (PFAC). We are actively recruiting for members so kindly share the news! AGH is also looking for more ways to integrate our patients' lived experiences in how we do things so suggestions are welcome.

About Us

Atikokan General Hospital, Atikokan Family Health Team and Atikokan Medical Clinic have created **ONE** Patient and Family Advisory Council. Our goal is to give patients/advocates the opportunity to give input and feedback on our services. Through this council, we hope to continue to provide excellent care for all those who require our services.

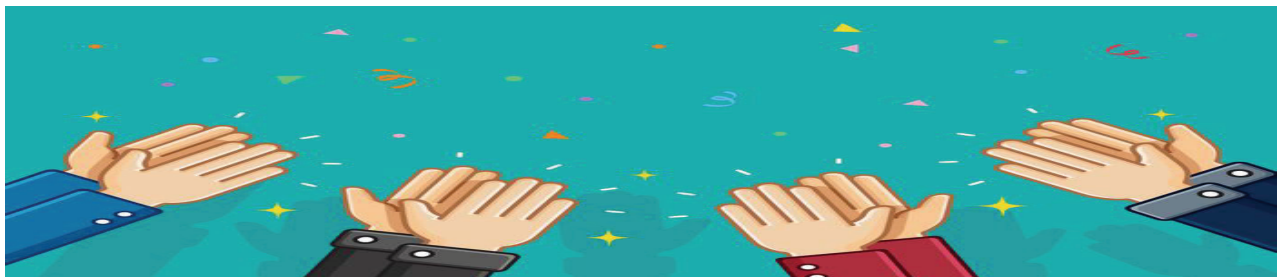
What Are Our Goals?

- Share feedback from community regarding health care in Atikokan.
- Help design patient/ community surveys.
- Review strategic plans, policies and practices affecting patient care.
- Advocate for excellent quality patient care.

Membership

- Patients, families and/or caregivers
- Atikokan General Hospital, Atikokan Family Health Team and Atikokan Medical Associates representatives.

Note of Thanks: Staff at Atikokan Hospital: *“Just to let you know how much I appreciate the care I received while a patient at your hospital. Everyone – doctors, nurses, physio, OT, cleaning people, meal servers and preparers, was so cordial and pleasant. I actually got a chance to heal and feel better. Thanks to all of you, I will never forget you.*”



Pharmacy

Corina Anderson, Pharmacy RPN

Staffing

1 Full-Time Pharmacy
RPN Department
Lead

1 Full-Time remote Regional
Pharmacist (TBRHSC)
shared between 5 regional

1 Casual Back
Up/Relief

The Pharmacy is responsible for reviewing, updating and following current contract pricing for the procurement (ordering and receiving) of all medications used in the hospital (Acute/ER). The Pharmacy staff deal with supply issues and ordering allocations regularly when medications are unavailable or in short supply.

There were many challenges this year due to COVID-19 and medication demand and supply restrictions. Despite all of the issues/challenges in the last year, the pharmacy has been able to maintain an adequate supply of medications during the pandemic.

The Pharmacy conducts several medication related audits throughout the year and shares this information with the staff. Audits help us to identify risks, issues or gaps in processes and allow us to make necessary updates or changes for ongoing quality improvement.

Medication safety for our patients and the staff of AGH is of highest priority for the Pharmacy Department. In the ever-evolving world of health care and with all the regulations and standards that must be met, the Pharmacy staff are constantly reviewing, updating and creating policies and procedures to ensure that processes are clear and are followed for all patients and staff.



Pharmacy Accreditation 2021

The AGH Pharmacy Department had its 6th annual Hospital Pharmacy Accreditation completed by the Ontario College of Pharmacists (OCP) on May 31, 2021. This year was a little different from the usual as we completed the assessment virtually instead of on-site/in-person.

The hospital assessment is divided into categories and for each category there are specific standards which have been taken from relevant legislation, policies, guidelines or standards of practice that outline specific criteria that is used when conducting the assessment.

The Pharmacy had a very successful assessment this year and received a PASS with no action plan required. Congratulations to all staff involved.

There were three standards in the assessment that were partially met without an action plan. These are areas that we did meet the standard but the OCP hospital advisor will be looking to see continued improvements going forward.

These partially met standards included:

- ❖ The auditability and traceability of all medication doses to the patient level
- ❖ Increased awareness and education for health care professionals in the understanding of and reporting process for adverse drug reactions
- ❖ The medication reconciliation process must be clearly documented, transparent and reflect accountability.

Our next OCP assessment will be scheduled for the spring of 2023.

Categories:

❖ **General**

Medication Security,
Medication Storage,
Medication Safety,
Controlled Substances in the Patient Care Areas
Record Retention including Auditability and Traceability.

❖ **Pharmacy Standards of Operation**

Patient Medication Policy,
Record Retention including Auditability and Traceability,
Technology in Pharmacy,
Packaging and Repackaging of Medications
Controlled Substances within the Pharmacy.

❖ **Pharmacy Standards of Practice**

❖ **Automated Dispensing Cabinets**

❖ **Delegation**

❖ **Telepharmacy**

Rehabilitation

Jessica Gosselin, Occupational Therapist and Manager

Accomplishments:

- ❖ Collaboration with Family Health Team: FHT funded Rehab Aide working in AGH from October 2021-March 2023 (with possible extension)
- ❖ Planned collaboration with town of Atikokan to run falls prevention programs in Community Centre.
- ❖ During rehab rounds on Friday mornings we are now doing check ins- regarding staff wellness
- ❖ Virtual Chronic Pain- to increase capacity during Covid and to promote home exercise
- ❖ Hybrid GLA:D- to increase capacity during Covid by rotating in-person and virtual sessions.
- ❖ Outpatient Stats have improved for Priority 1 and 2.
 - P1 As of May 2022: **4 day wait** (Compared to September 2021: average **33 day wait**.)
 - P2 As of May 2022: **7 day wait** (Compared to September 2021: average **144 day wait**.)

New equipment / technology update:

- ❖ Shockwave funded by Atikokan Hospital Foundation in 2021
- ❖ New Exercise Bike, cable machine, treadmill which were funded by the foundation
- ❖ Platform walker and expanded inventory for equipment sales.

Ongoing challenges:

- ❖ Waitlist management for outpatients. Priority 4 and 5 continue to experience long waitlists.

Process improvements:

- ❖ Group program initiatives and partnerships/grants have allowed for additional staff to be hired.
- ❖ Self-care / staff-care initiatives: Created a meditation/quiet room for rehabilitation staff. This will allow breaks to be taken in a quiet area and will also allow for a safe place for religious needs.



Rehabilitation Meditation/Quiet Room



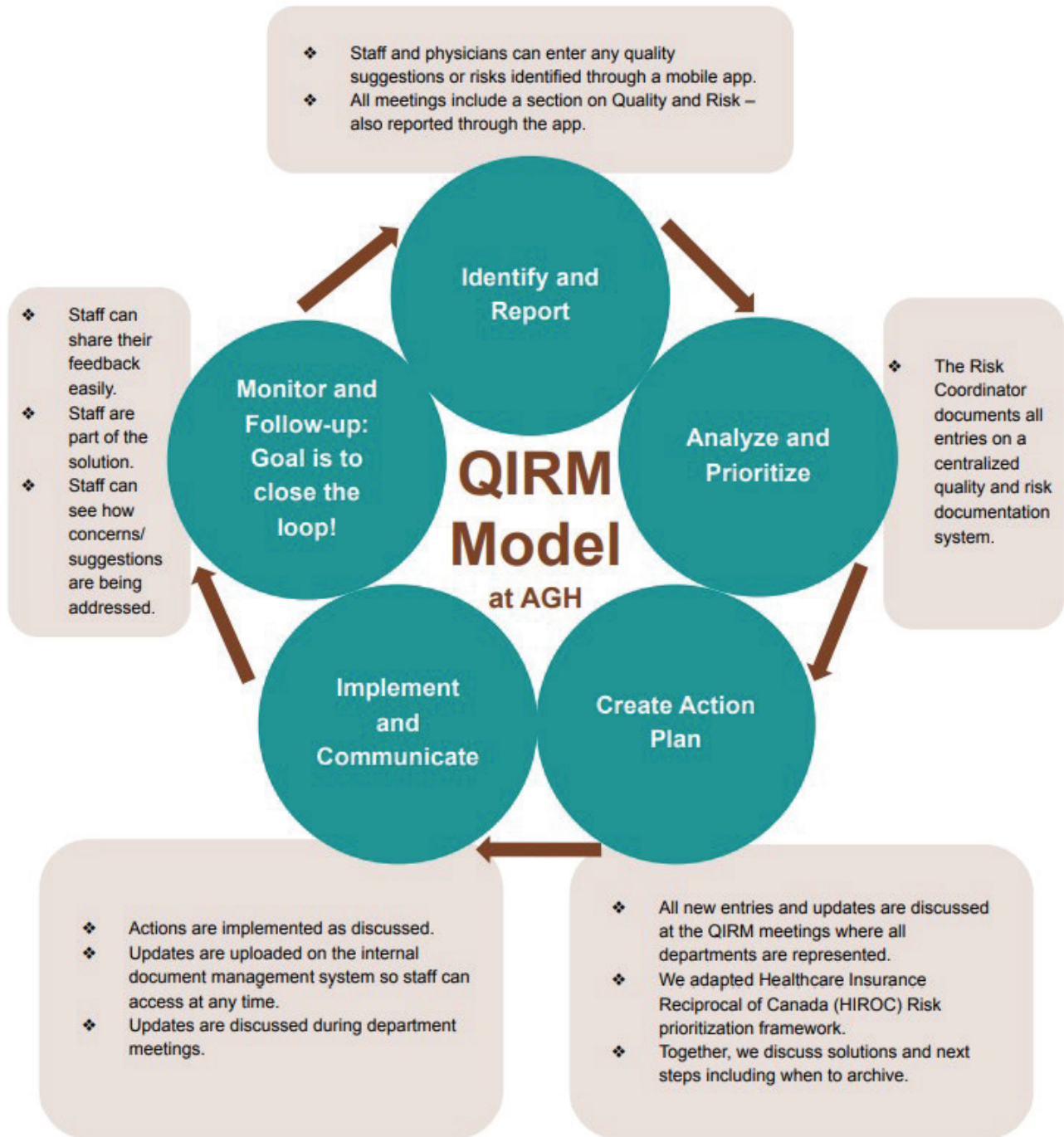
Jessica Gosselin, Kelsey Weir, and Mohammed Benbrahim

Risk Management and Infection Control

Cheryl Maki, Occupational Health, Wellness, and Safety Coordinator

Quality Improvement & Risk Management (QIRM)

- ❖ A comprehensive, organization-wide QIRM program was launched!



All About Risk Management

CareQ – We tested CareQ on July 15 at 1:05pm and we were able to send out 123 calls and 128 text messages. In less than 5 minutes, we received 97 responses! This is a game changer in increasing our efficiency when responding to an emergency. All managers on-call are now able to activate this as needed. CareQ tests are regularly scheduled to ensure we are ready for emergency situations.

Code Red – new process was introduced in June and trialed again in July. We will continue to evaluate with the hope that an updated plan is completed by the end of this year.

Code Green - the raging fires in Northwestern Ontario and the subsequent evacuation of LTC and acute care patients in Red Lake prompted us to review our own Code Green.

We are pleased to share that we are partnering with Ontario Northland Bus Line as we plan a stronger protocol for emergency evacuation. The Ministry has also released an emergency evacuation document that we will incorporate in our own plan.



Staff Retirements 2021/2022



<i>Krys Bednarski</i>	<i>41+ years</i>
<i>Bonnie Gouliquer</i>	<i>40 years</i>
<i>Jill Leduchowski</i>	<i>32+ years</i>
<i>Heather Desgroseilliers</i>	<i>35 years</i>
<i>Cathy Barnard</i>	<i>33 years</i>
<i>Marie Cornell</i>	<i>34+ years</i>
<i>Wendy Kempf</i>	<i>28+ years</i>
<i>Barbara Jackson</i>	<i>20 years</i>
<i>Candace Green</i>	<i>13 years</i>

Staff Service Awards 2021



5 Years

Meaghan Kerr

Jennifer Learning

Diane Meilleur

Benilda Motilla

10 Years

Teilor Chumway – Kehler

Amy Boileau

15 Years

Robert Herrmann

Holly Mosbeck

25 Years

Bridget Davidson

Sandra McIntyre

30 Years

Mary-Anne Blanchard

40 Years

Krys Bednarski