



SIoux LOOKOUT

Meno Ya Win

HEALTH CENTRE

2016

ANNUAL REPORT

SLMHC Board of Directors

First Nations Board Members

John Cutfeet, Trustee – Independent First Nations Alliance

Solomon Mamakwa, Trustee and co-chair, Shibogama First Nations Council

Joe Meekis, Trustee, Keewaytinook Okimakinak (Northern Chiefs)

Mary Anne Panacheese, Trustee, Sioux Lookout First Nations Health Authority

Roy Spence, Trustee, Matawa First Nations

Joe Kakegamic, Trustee, Sandy Lake First Nation

Sadie Maxwell, Trustee, Windigo First Nations Council

James Cutfeet, Trustee, First Nations Member at Large

Leroy Quoquat, Trustee, Lac Seul First Nation

Vacant, Trustee, Mishkeegogamang First Nation

Southern Community Board Members

Barbara Hancock, Trustee

Kai Koivukoski, Trustee and co-chair

Joyce Timpson, Trustee, Municipality of Sioux Lookout

Terry Jewell, Trustee

Knowles McGill, Trustee and Treasurer

Medical Professional Representatives

Dr. Terry O'Driscoll, Chief of Staff

Dr. Mike Kirlew, President of Medical Staff

Teri Fiddler, Traditional Healing Advisor/Elder

Heather Lee, VP Health Services and Chief Nursing Executive

NAN Representative

Alvin Fiddler, Grand Chief

Staff Members

David Murray, President and CEO

Dean Osmond, VP Corporate Services and Performance and Chief Operating Officer

Jennifer Lawrance, VP Quality and Support Services

Douglas Semple, First Nations Advisor to the Board and CEO

Renee Southwind, Community Liaison

Contents

- 3 Message from the CEO and Co-Chairs
- 4 Message from the Chief of Staff
- 6 Foundation President's Message
- 8 Mission, Vision & Values
- 9 Strategic Goals
- 10 Statement of Operations
- 12 Patient Care Services
- 14 Traditional Healing, Medicine, Foods and Support Program
- 15 Our Quest for Quality
- 16 Diagnostic Imaging Notes
- 17 Laboratory
- 17 Pharmacy
- 18 Rehabilitation Services Highlights
- 19 Mental Health and Addictions Program
- 20 Human Resources
- 21 Information Technology
- 22 Environmental Services
- 23 Research at SLMHC

Message from the CEO and Co-Chairs

The past year has seen steady progress in Sioux Lookout Meno Ya Win Health Centre's (SLMHC) move to becoming a Centre of Excellence for First Nations and northern health care. The organization showed strong financial results through the efforts of staff and management to improve operations across the organization.

A major milestone was achieved with the final sign-off of the funding reconciliation for the new hospital with the Ministry of Health. This allowed the Ministry to release hold back funds from the construction project of almost \$4 million which has significantly improved our cash flow position.

We continue to invest in capital assets, and this year we were able to support Sioux Lookout Regional Physicians Services Inc. (SLRPSI) by constructing a clinic that allowed the northern physicians to transfer operations from the old 7th Avenue hospital site to the new building on SLMHC property. The hospital could not operate without the tireless commitment of our physicians. We appreciate their time and dedication in delivering high quality services within our area.

Annually, we purchase over \$1 million of new equipment to keep our facility current and provide those we serve with the most up to date technology allowing us to continue to work toward our goal of "Excellence Every Time." We acknowledge the incredibly important role that the Sioux Lookout Meno Ya Win Health Centre Foundation plays in providing resources to the hospital enabling us to purchase state of the art equipment. Funding for capital equipment is not provided by the Ministry so it is funded internally or through the generosity of our community. We are fortunate to have such a dedicated foundation that raises funds for the hospital!

We continue to provide many services that are unique to our area. Our Traditional Healing, Medicines, Foods



FROM LEFT – Barb Hancock, Heather Lee, Dr. Barb Russell-Mahoney, Knowles McGill, Dr. Terry O'Driscoll, Kai Koivukoski, DGC Derek Fox, Sol Mamakwa, Joyce Timpson, Terry Jewell, Dean Osmond, Leroy Quoquat, Teri Fiddler, Joe Kakegamic, James Morris.

and Supports program continues to expand and helps us to meet the needs of patients from the north with the provision of around the clock access to medical translators supporting our care delivery. We also have entered into a very unique partnership with the Sioux Lookout First Nations

Health Authority and the Keewatin Patricia School Board to operate a classroom at SLMHC that provides educational opportunities to primary, intermediate and high school patients. This program works closely with our Integrated Pregnancy Program to help young mothers and couples to work toward their high school diplomas while they are in Sioux Lookout during their pregnancy and birth of their baby.

Finally we have undertaken a process to review our Mission, Vision and Values and set a new strategic plan for the next three years. This plan will be heavily informed on the recommendations that came out of the Truth and Reconciliation Commission (TRC). We have developed a program to discuss the issues of racism and how to better manage those issues within our facility. This is an ongoing process but one which will continue to make the organization stronger and more accountable.

We continue to be immensely proud of the work we do and the results that we have achieved, but realize that there is always more to do and by working together with our communities, our partners and funders we can continue to improve the services we provide.

Miigwech.

Board Co-Chair, Sol Mamakwa
Board Co-Chair, Kai Koivukoski
President and CEO, David Murray



Message from the Chief of Staff



Dr. Terry O'Driscoll

SLMHC continues to grow in all areas of physician services in keeping with our growing population, increasing services in the hospital and our specific needs in Pediatric and Mental Health services. The hospital supports SLRPSI* in the recruitment and retention of Family

Physicians with interests in northern and First Nations health. All physicians providing services in the region are credentialed through SLMHC.

Family Medicine

This year marked the sixth year since the inception of SLRPSI in May 2010. Over that time there has been a growth in physician services at both the community and hospital levels. While we are happy to have recruited four new full time physicians again this year, we have become increasingly dependent on locum and part time physician services.

Physicians Services Statistics

	2010/11	2014/15	2015/16	16/17 planned
Contracted Family Doctors	33	43 (^30%)	53(^60%)	TBD
Locums	44	72 (^70%)	71(stable)	TBD
FTE	36	39.3	40	50.7
SLRPSI DAYS	3807	4599	4750	6640
Northern Days	2050	2680	2680	3120
GP-Specialty Days	1142	1170	1362	1395
Totals	6999	8650 (^23%)	8792	11155

*SLRPSI contracts directly or indirectly with primary care physicians for community and hospital based services. It is governed by a board of 3 community reps, 3 hospital reps and 3 physician reps.

Specialty Services

The specialty contingent has remained stable at two full time general surgeons and two contracted radiologists. A number of other specialty services are provided by our family physicians including, operative obstetrics, anesthesia, orthopedics, cardiac stress testing, cancer care and addictions medicine.

We have increased our visiting specialists to include Pediatrics, Child and Adolescent psychiatry, Adult psychiatry, and Infectious Diseases. We continue to support Ear, Nose, Throat (ENT) and nephrology services. The ongoing challenges are in developing models of care and remuneration to move beyond visiting specialists to ensure consistent 'on the ground' presence of specialty physicians services that are required for our region.

The Future

SLRPSI has been awarded 2640 more days of service for the region. The distribution is noted below with hospital services included in the "SLRPSI Days". Currently a working group is in the process of revising scheduling in the emergency department and inpatient care to improve access and continuity of care for all patients given this evolving model of care.





Medical Staff FACTS:

- Physicians have continued to participate in community and hospital based research projects. The third compendium of research projects from 2013 to 2015 was published with the support of SLMHC, Sioux Lookout First Nations Health Authority and the Anishnaabe Bimaadziwin Research Program. There are 26 peer reviewed research projects that cover all aspects of care in the region.
- In 2015/2016 physicians participated in 95 teaching months for undergraduate and post-graduate medical learners as well as additional time for Nurse Practitioner training. Many of our physicians are former students or residents and teaching remains an important recruitment tool.

Foundation President's Message

As always, we are very proud of what we have accomplished to enhance health care in the north, and we continue to work diligently to ensure patients at SLMHC receive the world-class emergency and primary health care that all Canadians deserve.

Recently, we have been fortunate in having Todd Nadon, Tracey Bullock and their energetic staff at Fresh Market Foods organize a new major fundraising event (The Amazing Race) for SLMHC Foundation. We look forward to a long and fruitful relationship.

We could not have done this without you, our donors and volunteers. By working together, we are able to accomplish so much more for our families and our communities.

Your contributions allow us to raise funds that are always needed to support ongoing program, equipment, and education needs at the SLMHC. Together, we are making a difference.

"Thank you for bringing quality health care closer to home. We could not do this without you!"

Terry J. Jewell, President
SLMHC Foundation



Pat Marshall, Volunteer

Foundation Year in Review

Community Fish Fry

Generously sponsored by ARAMARK and SLMHC, the community fish fry is a way of saying thank you to our community members for supporting our vision. In partnership with Sioux Lookout Anglers & Hunters and the Walleye Weekend Committee, the event continues to raise funds and awareness of ongoing equipment and program needs at the SLMHC.

Bearskin Airlines Charity Classic Golf Tournament

This year's event took place on June 23, 2015, and marked the 17th anniversary of the Bearskin Airlines Charity Golf Classic. With over \$48,000.00 raised, it was truly a time to celebrate.



Over the past 17 years, more than \$450,000 has been raised for the health centre as a result of the Bearskin Airlines Charity Golf Classic.

With the support of our many sponsors, local businesses and golfers, we are able to meet ongoing program and equipment needs at the SLMHC. Funds from the event enabled the purchase of a new portable ultrasound machine for the Emergency Department.

We thank Bearskin Airlines, all of our sponsors and the golfers for supporting our fundraising efforts and for helping us to move forward with future initiatives.

Fresh Market Foods Amazing Race Sioux Lookout

Todd Nadon and Tracey Bullock, owners of Fresh Market Foods, and their enthusiastic staff, decided to put on a fund raiser for the Foundation in July 2015 – the Amazing Race Sioux Lookout. It took a lot of time and hard work, but was definitely worth it.



Eleven teams entered the race and it was held on one of the hottest days of the summer. The teams had such a good time. A BBQ, silent auction and social were also held. This was a great effort that raised over \$47,000 for new long term care beds in Sioux Lookout.

Bearskin Airlines Skip to Equip Classic

The spirit of giving was alive once again at the Bearskin Airlines Skip to Equip Classic held November 6th – 8th, 2015 in Sioux Lookout. At the end of the day this fun and exciting event raised \$76,000 for the Long Term Care Building Fund at the SLMHC.

The Annual Bearskin Airlines Skip to Equip Curling Classic in Sioux Lookout has raised over \$305,000 for the SLMHC over the past five years.

Proceeds from this year's event have been earmarked for the building of a new, larger long term care facility

in Sioux Lookout to serve our entire population. The annual November classic is a women's only event where participants of all curling levels enjoy a great weekend while raising funds in support of the health centre. We were thrilled that through the committee's hard work, the sponsor commitment, and the raising of pledges by the curlers, that this event has increased its donation every year since it started.



The foundation is very grateful to the Skip to Equip Committee and thanks all donors, participants, volunteers, and sponsors who generously support this much anticipated annual event.

The Foundation's next project will be fundraising for a C-Arm. A mobile C-arm is a medical imaging device that is based on x-ray technology and can be used in the operating room. The name comes from the C-shaped arm used to connect the x-ray source and x-ray detector to one another. The cost is estimated at \$250,000.



Mission, Vision & Values

The Mission, Vision & Values (MVV) of SLMHC define what we do as an organization (Mission), where we want to go (Vision), and the beliefs and behaviours that will get us there (Values).

During the strategic planning process, the current MVV were modified to better reflect the present reality of the organization.

Vision

We will be a Centre of Excellence in First Nations and northern health care by working together to improve the health status of individuals, families and communities now and for generations to come.

Mission

Mission

Caring for people
Embracing Diversity
Respecting Different
Pathways to Health

Vision

Values

Values

We value compassion, respect, quality and teamwork.

Values Statements

- Compassion: We promise to provide care that is compassionate and reflects humility, caring, dignity, empathy and love.
- Respect: We promise to be respectful and embrace honesty, integrity, humility, engagement, accountability, responsiveness and truth.
- Quality: We promise to provide high-quality, individualized care that is innovative, meets best practice standards and reflects our awareness of cultural safety.
- Teamwork: We commit to working as a team and collaborating in a care planning that involves the patient. We value leadership, wisdom, and bravery.



Strategic Goals

As a result of the strategic planning process, the following strategic goals and strategies will set the direction for SLMHC from 2016-2019. Please refer to the *2016-2019 Strategic Plan* for complete details.

Strategic Goal One

Explore new and expanded hospital services

The SLMHC is committed to exploring new and expanded hospital services that meet the needs of the population and places emphases on our role as the District Hospital in our Local Health Hub/Integrated District Network.

SLMHC provides fully accredited services including specific accreditation in Pharmacy, Diagnostic Imaging, and Laboratory. Any new or expanded services will meet the expectation of enhancing the patient experience through the provision of high-quality, patient-centered care that meets and exceeds Accreditation standards.

Strategic Goal Two

Advocate for high-quality health services through financial growth and sustainability

The SLMHC is accountable for the provision of high-quality health care services in a continuously evolving health care environment. External influences play a major role in the financial viability of the organization over the long-term, requiring adequate planning and flexibility for the future.

SLMHC is committed to developing a financial growth and sustainability plan to ensure financial viability of the organization to meet the needs of the population over the long-term.

Strategic Goal Three

Invest in People

The recruitment and retention of qualified staff, committed to the provision of high-quality care in alignment with the mission, vision and values, is a high organizational priority. Effective Human Resource practices will help to ensure on-boarding of the right people into the right jobs. SLMHC commits to fostering a collaborative relationship with the Municipality of Sioux Lookout in regards to community development initiatives to attract and retain staff who will live in the area.

SLMHC will encourage professional development and opportunities for advancement in the organization for existing and potential staff. This support will help to achieve ongoing service sustainability and organizational succession planning given ongoing recruitment and retention challenges.

SLMHC is committed to recruitment of a diverse workforce and the promotion of cultural awareness within our environment.



Engagement with staff and physicians related to cultural safety and awareness is a high priority for the organization.

SLMHC aims to be an employer of choice. Working toward achievements such as Best Practice Spotlight Organization designation will be explored during this strategic planning phase.

Strategic Goal Four

Innovations and Partnerships

The utilization of virtual technology is an important link between health care services/providers and the population we serve. SLMHC has the capacity to lead our service area and partners in

the advancement of virtual technology to improve access to health services.

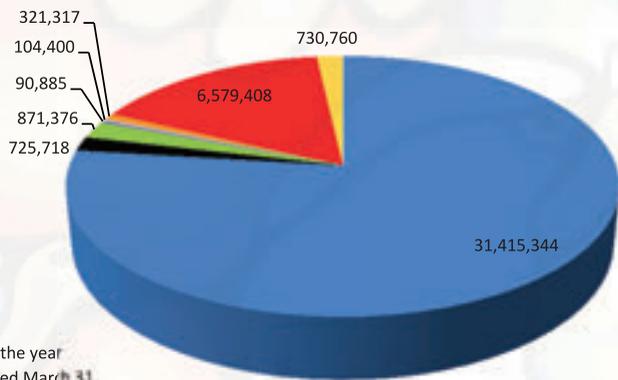
Leveraging innovative utilization of virtual technology in the hospital setting and through partnerships with regional, provincial and First Nations providers, SLMHC will improve access to health care services.

The creation of the Northern Integrated District Network (NIDN) as part of the Northwest LHIN Health Services Blueprint has created a venue for health service planning and delivery across our region. SLMHC has facilitated the inaugural meeting to bring local and regional health and social service providers together as a health hub model that will support value-based client care.



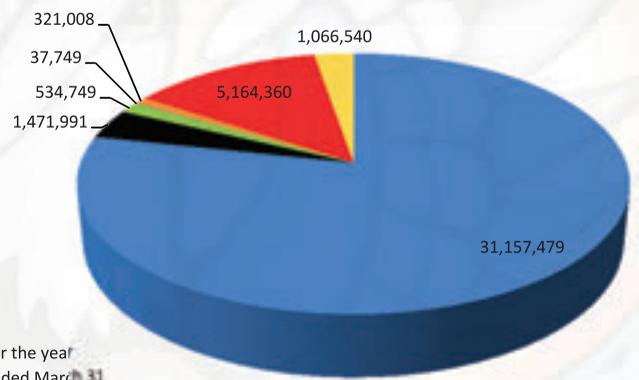
Statement of Operations

Revenues



For the year
ended March 31
2016

Ministry of Health Base Allocation	\$ 31,415,344
Ministry of Health One Time Payments	\$ 725,718
Paymaster	\$ 871,376
Visiting Specialist	\$ 90,885
Cancer Care Ontario	\$ 104,400
Health Canada	\$ 321,317
Other Revenue	\$ 6,579,408
Amortization of Donations and Grants for Equipment	\$ 730,760
Total	\$ 40,839,208

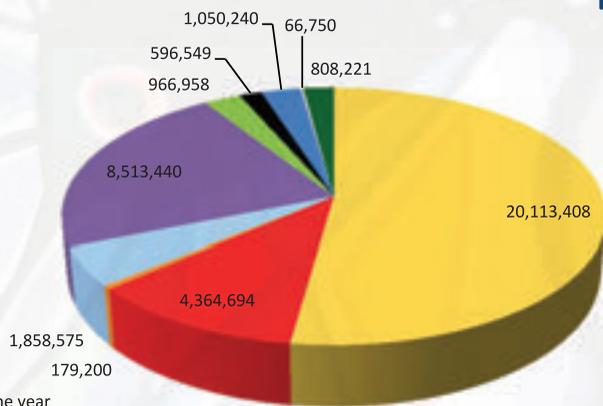


For the year
ended March 31
2015

Ministry of Health Base Allocation	\$ 31,157,479
Ministry of Health One Time Payments	\$ 1,471,991
Paymaster	\$ 534,749
Visiting Specialist	\$ 37,749
Cancer Care Ontario	\$ -
Health Canada	\$ 321,008
Other Revenue	\$ 5,164,360
Amortization of Donations and Grants for Equipment	\$ 1,066,540
Total	\$ 39,753,876



Expenses

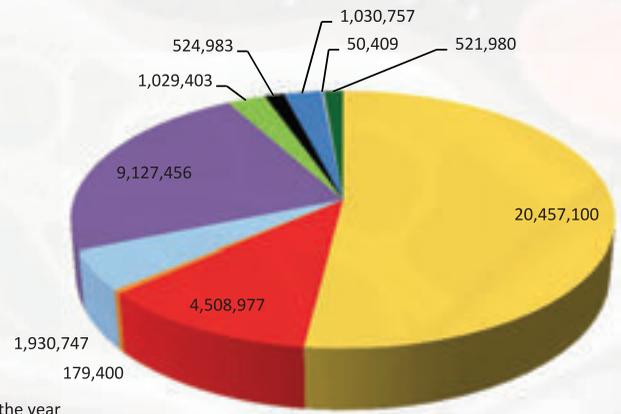


For the year ended March 31

2016

Salaries, Wages and Purchased Services	\$ 20,113,408
Employee Benefits	\$ 4,364,694
Employee Future Benefits	\$ 179,200
Medical Staff Remuneration	\$ 1,858,575
Supplies and Other Expenses	\$ 8,513,440
Medical and Surgical Supplies	\$ 966,958
Drugs and Medical Gases	\$ 596,549
Equipment Amortization	\$ 1,050,240
Software Amortization	\$ 66,750
Bad Debts	\$ 808,221
Total	\$ 38,518,035

Excess of Revenue over Expenses from Hospital Operations	\$ 2,321,173
--	--------------



For the year ended March 31

2015

Salaries, Wages and Purchased Services	\$ 20,457,100
Employee Benefits	\$ 4,508,977
Employee Future Benefits	\$ 179,400
Medical Staff Remuneration	\$ 1,930,747
Supplies and Other Expenses	\$ 9,127,456
Medical and Surgical Supplies	\$ 1,029,403
Drugs and Medical Gases	\$ 524,983
Equipment Amortization	\$ 1,030,757
Software Amortization	\$ 50,409
Bad Debts	\$ 521,980
Total	\$ 39,361,212

Excess of Revenue over Expenses from Hospital Operations	\$ 392,664
--	------------

Audited financial statements for the year ending March 31, 2016 are available on our website at www.slmhc.on.ca.

If you have questions regarding our financial statements, please contact the Finance department at (807) 737-6550.



Patient Care Services

Acute Care Inpatient Program

Committed to providing high-quality and culturally-safe care, the team of professionals on the acute care inpatient unit work collaboratively to meet the diverse needs of our patients. Throughout the past year, the unit has averaged over 90% occupancy with many days over 100% occupancy to accommodate patient volumes. The unit has welcomed and supported many learners over the past year including five nurses through the provincial Nursing Graduate Guarantee Initiative who have subsequently joined our nursing team on a full-time basis.

Obstetrical and Integrated Pregnancy Program

SLMHC provides a robust obstetrical program that continues to grow; delivering approximately 450 births over the past year. Our dedicated team of Obstetrical nurses and physicians have completed the Managing Obstetrical Risk Efficiently (MORE OB) program and provide family centered, evidence-based care that meets the holistic needs of our patients and their families. An exciting initiative currently underway is the Baby Friendly Initiative (BFI). The BFI designation is a lengthy process to re-establish breastfeeding as the exclusive means of nutrition for babies up to six months of age. We anticipate receiving the Baby Friendly designation by 2020.

Complementing the Obstetrical program is our Integrated Pregnancy Program (IPP). The dedicated team of professionals who operate this clinic provide support to families throughout the continuum of care including pregnancy, breastfeeding, parenting and addictions support for nearly 10,000 visits over the last year. Both teams in IPP and Obstetrics work closely together to ensure culturally-safe, high-quality care to families and their newborns.

Surgical Services

The Operating Room staff deliver real time expertise and care for individual patients.

- They ensure patients are equipped with information required to make an informed decision about their care.
- OTN is utilized by the surgeon to consult with patients in the north eliminating unnecessary travel.
- Before surgery, the patient is seen again by the surgical team, enabling the patient to choose a surgical time that is convenient for them.
- We support other hospital needs through increased access for routine planned C-sections. This service helps to decrease costly after-hour procedures in the OR.

Day Medicine

Day medicine is an extremely busy clinic utilized by physicians to manage complex follow-up appointments and for patients to receive intravenous infusions or dressing changes. An expanded waiting area and one clinical space was added to the department in response to increasing demands for service provision. The clinic is also utilized for pre and post-operative clinics, visiting pediatric clinics, and visiting Ear, Nose, and Throat surgical clinics.



Baby Marigold breastfeeding with her mother, Shayla Bradley.





Telemedicine

Telemedicine provides access to care from remote locations. Patients are able to access specialists without having to leave the community (i.e., palliative care, chemotherapy, and orthopedic follow-up). This past year, the telemedicine department, in conjunction with the Ottawa Hospital formed a partnership to address infectious disease. As a result, patients now have timely access for consultation with infectious disease physicians who recommend treatment plans for various infections. Approximately 2,400 patients are seen through telemedicine technology each year.

Chronic Disease Prevention and Management

The Chronic Disease Prevention and Management (CDPM) program provides services on an outpatient basis through a team-based model of care. The program includes specific services such as Systemic Therapy (chemotherapy), Stroke Prevention, Smoking Cessation, Diabetes, Centre for Complex Diabetes Care, Wound Care, and Infectious Disease. The inter-professional team works together to assist patients and their families with managing and coping with chronic disease. Along with a focus on prevention of chronic disease, the team helps patients to live healthier which decreases the need for future hospital admissions.

Emergency

The emergency department's volume has seen an increase of approximately 4,000 patient registrations over the past two years. Recently, in partnership with the Intensive Care Unit (ICU) at Thunder Bay Regional Health Sciences Centre, (TBRHSC) our emergency department has embarked in a new program; the Regional Critical Care Response Program. When a critically ill patient presents to the emergency, the physician in Sioux Lookout consults an ICU physician at TBRHSC and the patient is assessed utilizing telemedicine video technology and a plan of care is developed. With this new consultation service, unnecessary transfers out of Sioux Lookout can be avoided and patients have access to critical care consultations in a timely manner.

Long Term Care

The William A. George Extended Care facility has been awarded the opportunity to become a Best Practice Spotlight Organization for Long Term Care. We have entered a three year contract with the Registered Nurse Association of Ontario (RNAO) to implement several best practice guidelines that are evidence-based and research-focused that will improve the overall well-being of our residents. The practice guidelines we have chosen to implement in year one focus on care around continence, fall prevention, and oral health. In year two, we will focus on pain management and pressure injuries. In year three, we will concentrate on keeping the practice changes sustainable as well as evaluating the effectiveness of the changes in years to come. Once all criteria have been met, the William A. George Extended Care facility will be a Designated Best Practice Spot Light Organization.



Traditional Healing, Medicine, Foods and Support Program

Over the past year, the THMFS program leadership and staff have been developing and implementing strategies that begin to address the recommendations set out in the December 2015, Truth and Reconciliation Commission report. In a multi-year plan, the strategies will focus on five of the seven recommendations for health while also addressing two of the educational recommendations. Program objectives expand on the following high level strategies:

1. Share our knowledge and expertise widely as it pertains to cross cultural care and the Anishinaabe Culture.
2. Endeavour to provide culturally appropriate meals through an enhanced Miichim program.
3. Develop and fully implement the Mashkiki (traditional medicine) program.
4. Provide guidance and support in building a sweat lodge.
5. Become leaders in a fully integrated THMFS program.



From left: Kathy Loon, Andy Lac Seul, Damin Crowe, Tony Monias, Joan Winter, Isiah Kanate, Eva Rae, Tommy Spade, Esther Beardy

Elders Council

The Elders Council is a group of dedicated elders who provide guidance and feedback to the SLMHC Board of Directors regarding internal and external issues, policies and services as they affect the First Nations communities. Meeting two times per year, the council is provided with updates from the Senior Executive team and provides valuable feedback that assists with improvement and future planning. Additionally, two Elders in Residence, along with our dedicated team of Medical Interpreters meet with our First Nations patients to support their care and ensure any needs are addressed.

Teri Fiddler and Kathy Loon sitting together in the Chief Sakatcheway Aandaaw'iwewgamic - Healing Room



Our Quest for Quality

SLMHC continues on our journey to be a centre of excellence in First Nations and northern health care by working together to improve the health status of individuals, families and communities, now and for generations to come.

We are committed to achieving "Excellence Every Time" and enhancing the patient experience through the provision of high quality, patient-centred care. The 2015/2016 fiscal year marked an ambitious platform for change, putting the patient at the centre of everything we do.

SLMHC provides fully accredited services, including specific rigorous accreditation in Pharmacy, Diagnostic Imaging, and the Laboratory. Any new or expanded services will enhance the patient experience through the provision of high-quality, patient centred care that meets or exceeds Accreditation Canada Standards.



Sheryl Melnichuk,
Admitting

SLMHC is committed to:

- Developing a financial growth and sustainability plan to ensure viability of the organization while meeting the increasing needs of the population over the long term.
- Being an employer of choice.
- Recruiting staff and physicians committed to the provision of high quality care in a unique environment.
- Leading quality improvement in small rural hospitals through the Northwest Quality Improvement Scorecard project.
- Engaging patients, residents, and their families/ caregivers in care planning.
- Providing an exceptional experience.
- Patient safety.
- Creating an exceptional patient experience.

Patient satisfaction surveys are one way we measure patient experience. Our surveys have undergone significant improvements over the last few years to align with provincial legislative changes, accreditation requirements, our revised mission, vision, and values, and to align with the other small hospitals in the North West Local Health Integrated Network (LHIN).

SLMHC 2015/2016 Patient Satisfaction Survey Results

Our patient satisfaction surveys have undergone significant improvements over the past few years to ensure alignment with provincial legislation, accreditation standards and our Mission, Vision and Values.

	Inpatient	ER	Maternity	MHAP	Rehab	Lab	DI	LTC
Staff always explained their role before they offered care	80%	83%	81%	67%	100%	65%	73%	Not Asked
Staff always treated me with courtesy and respect	87%	100%	96%	72%	100%	Not Asked	75%	100%
Overall rating >8 of SLMHC*	84% (↑9%)	75% (↑8%)	89% (↓4%)	76% (↓4%)	100% (↑7%)	86% (↓3%)	91% (↓7%)	80%

*Reflects change since 2014/2015



Diagnostic Imaging Notes

External Stakeholders and Partners

- Diagnostic Imaging has a seat on the Medical Radiation Technologist (MRT) Advisory Committee of Confederation College.
- We provide placements for Confederation College MRT students.
- We work with the Basic Radiation Technicians (BRT) Program to provide basic radiological examinations in the northern communities.
- We support and assist with the Northern Ultrasound program to provide sonographic exams in the northern communities.
- We are affiliated with the Ontario Breast Screening Program (OBSP) and provide breast screening to women of the area.
- We assist the Speech Language Pathologist with swallowing studies for patients with difficulty swallowing.

CT (Computed Tomography)

- There were 5,769 CT exams in 2015/2016 up from 3,923 the year before, a 46 % increase.

Ultrasound

- We average over 10,000 ultrasound exams including over 500 echocardiograms annually.

Mammography

- We performed over 1,300 exams in 2015 and also provide breast biopsies in support of the mammography program.

Radiology

- We provide general exams as well as fluoroscopic studies, and modified swallowing studies with the Speech Language Pathologist.
- We perform over 8,300 studies a year in radiology.
- We offer pain management injection clinics with a Radiologist for the relief of chronic pain.



Laboratory

The laboratory is in the process of implementing a new analyzer (MALDI TOF mass spectrometer) in microbiology. This analyzer is the most up to date technology available to identify bacteria. The turnaround time is significantly shorter enabling physicians to make an informed treatment decision usually a day sooner. We hope to be live with this analyzer in October.

In the Fall of 2016 accreditors from the Institute of Quality Management (IQMH) in Healthcare will be onsite to assess the SLMHC laboratory for ISO 15189 Plus accreditation status. The Laboratory currently holds a four year accreditation status from IQMH for ISO 15189 status. The ISO 15189 "Plus" accreditation status is the highest possible accreditation level a medical laboratory can attain worldwide.



Senior Laboratory Technologist Brad Caughell

Pharmacy

The Pharmacy Department is working through standards for two accreditations this coming year, one through Accreditation Canada and the other through the Ontario College of Pharmacists which is a new accreditation initiative in the province of Ontario.

In compliance with updated standards and requirements for pharmacy operations, we plan to implement a rigorous training program for staff involved in chemotherapy preparation. We are also required to make some structural changes to improve safety for staff in the chemotherapy preparation area. These changes will enhance both patient and employee safety.





Rehabilitation Services team - Back row: Stacey Lukye, Clint Lorteau, Jana Kiefl, Danielle Tavares, Nicole Wooden, Middle row: Katie Beck, Natalie Jefferson, Erica Ogilvie, Adrienne Crosby Front: Greg Rooke (Missing from photo – Sarah Watson, Suad Musse and Karen Parent)

Rehabilitation Services Highlights

The rehabilitation team provides physiotherapy, occupational, and speech therapy to in-patients of the SLMHC and residents of the William George Extended Care Facility. In addition, the rehabilitation team provides the following services:

Fracture Clinic:

- Half-day weekly clinic.
- Involves physician and rehab team, with telemedicine access to an orthopedic surgeon.

Cardio/Pulmonary Program:

- Liaises with Cardiologists at Thunder Bay Regional Health Sciences Centre for holter monitor tests interpretation.
- Saw 50% increase of onsite testing in 2015/2016.

Outpatient Community Physiotherapy Program:

- The team offers outpatient physiotherapy services to the community following Ministry criteria.

Physical Demands Analysis/Testing:

- In collaboration with staff health, assess physical demands of the job to the employee improving safety.
- Supports staff through education and training to reduce injuries in the workplace.



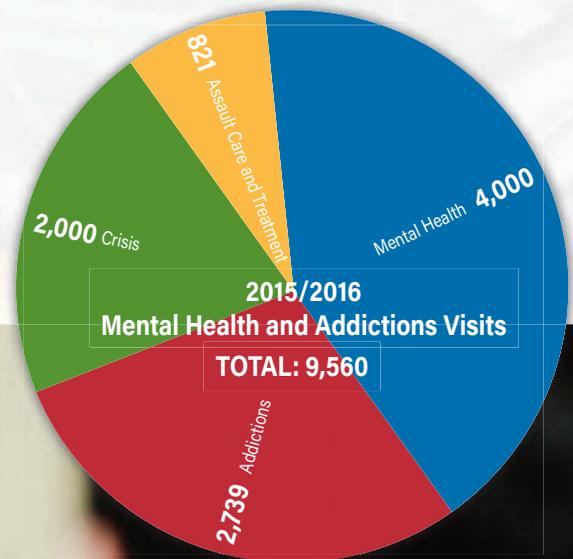
Mental Health and Addictions Program

The Mental Health and Addictions Program (MHAP) at SLMHC provides service geared to the individual and their context in a collaborative, client-centred and culturally appropriate way. The inter-professional team includes counsellors, nurses, recreation therapy workers, and clerical staff. The team provides a variety of services to people as outpatients, in hospital, at the shelter and community, including:

- Medical assistance with drug and alcohol detoxification and treatment.
- Harm reduction and opportunistic medical care.
- Individual and group counselling.
- Case management, health teaching and life skills.
- Trauma and grief counselling.
- Suicide risk assessment, safety planning and intensive support.
- Assault care and treatment for victims of sexual assault and domestic violence.

Program highlights

- Successful pilot project with OPP placed a counsellor on-site at the OPP station to reach high risk clients and provide support where they are.
- Enhanced partnership with the Integrated Pregnancy Program to provide counsellor and outpatient withdrawal services to expectant mothers and their partners.
- Increased access to nursing and counselling for assault care and treatment.
- Visits to the Out of the Cold Shelter to provide opportunistic care and another door to service.



Ray Legros, Counsellor



Human Resources

HR General

Recruitment and retention remain a priority. Last year, a total of 100 staff were hired. Since January 1, 2016, we have hired 70 new staff. Currently, we employ 411 staff. Our Celebration of People Committee continues to successfully coordinate various staff appreciation events such as Christmas dinner and party, Celebration of People recognition dinner, and staff appreciation BBQ. The Wellness Committee also strives to support staff health and well-being with events throughout the year to promote a healthy work-life. Both CUPE and ONA local contracts were successfully re-negotiated and ratified.

HR Workshops

In January 2016, we began conducting HR workshops with managers to review key topics and facilitate communication within the management team about common issues. Topics have included Interviewing and on-boarding; the Attendance Support Program; Performance Appraisals; Morale, Motivation and Discipline; and Mental Health in the Workplace.

Performance Management

Over the past year, the organization has moved to an on-line performance management system called HealthStream. This system eliminated the previous paper-based model offering managers the necessary tools to complete performance assessments in a more efficient and timelier manner.

Education

The mandatory training policy was updated in July to include Non-Violent Crisis Intervention (NVCI) training for all staff. Next year, recertification will be offered via HealthStream. Staff education has partnered with the Traditional Healing, Medicine, Food and Supports program to offer Culturally Safe Care and Anishinaabe Cultural training on a monthly basis. This has greatly increased the completion rate. New hires are automatically enrolled in the next available sessions for both NVCI and cultural training.



Norm the training mannequin

Infection Control, Hand Hygiene, Customer Service, Harassment and Respectful Workplace, and Accessibility training modules were significantly revised with the goal of increasing understanding and efficiency of annual mandatory training (held every September). Tracking for training has been enhanced to ensure accountability that staff complete mandatory training within reasonable time frames.

Celebration of People Event, Spring 2015



Information Technology

The SLMHC's Information Technology and Systems (ITS) department received its second leadership award from Infotech Research by receiving 90th percentile satisfaction scores based on the results of feedback from SLMHC's management team. This marks the second award from Infotech Research for the ITS department for its high satisfaction scores.

SLMHC will be hosting lab test and quality control results for some of the regional hospitals. SLMHC's major investment in technology, to support and enhance care, was a major factor in the health centre being chosen to host the service.

The 2015/2016 year is one of renewal for SLMHC's ITS department. All of the major systems supporting IT in the hospital have, or will require, replacement this year. To date, we have replaced our entire data network. The new network is designed to meet the needs of the future and be upgraded as requirements increase.

Completed Projects

The phone system has been upgraded to the latest hardware, with half the system in SLMHC's data centre, and half in the William George Extended Care facility's server room.

Working with a regional partner, we have replaced old copiers and printers with new models offering a much lower cost per copy.

The Local Health Integration Network (LHIN) has completed an update of our electronic health record program.

In Progress

SLMHC's server and storage hardware has been completely replaced, and the move of key servers is nearly complete.

We are increasing our cellular reception in the building, improving reliability for our patients, staff, and physicians.

Our databases are being moved to new virtual servers, resulting in better performance of our many applications that rely on databases, and in the retirement of old hardware.

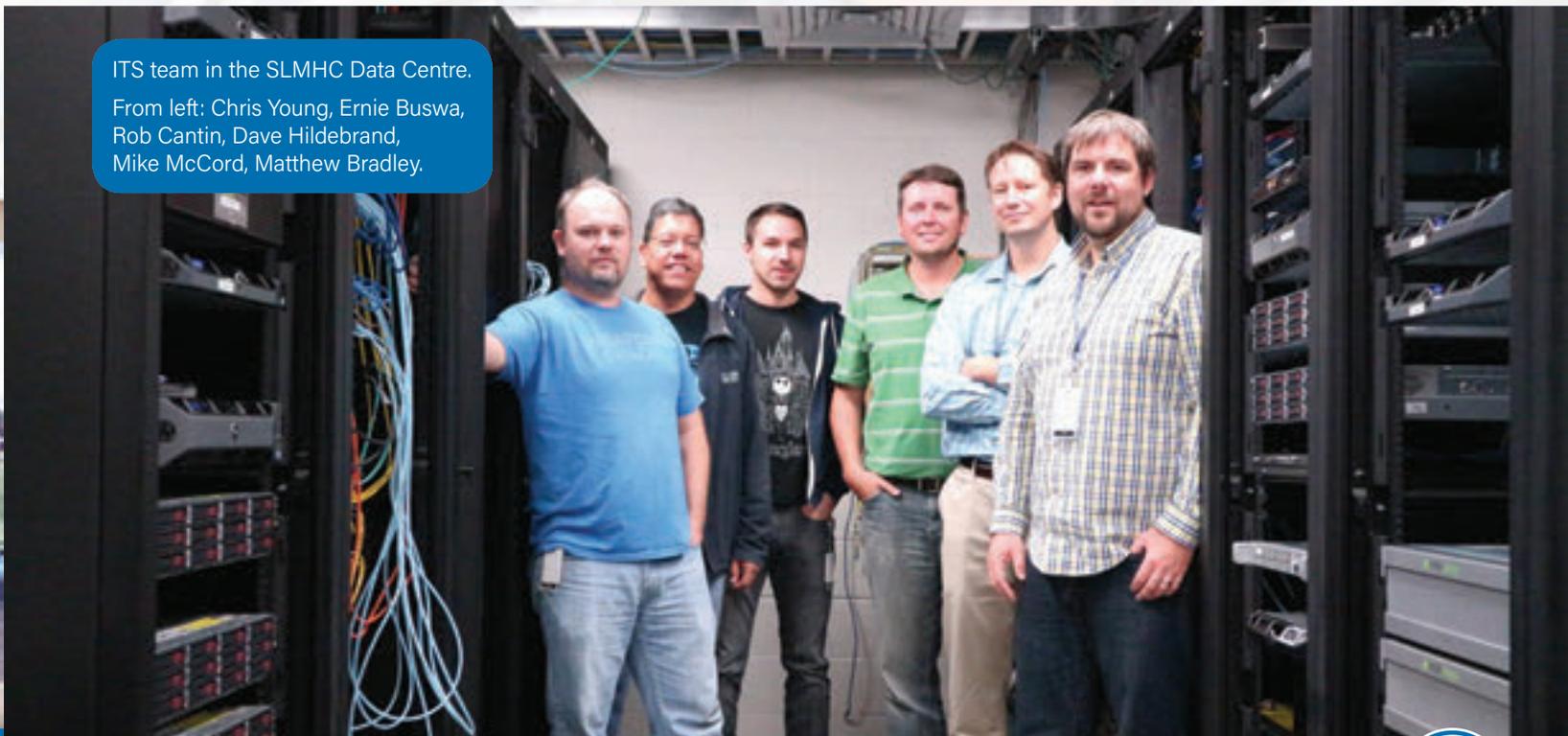
Future Projects

Installation of new patient bedside televisions will provide our patients with reliable TV service with 43 channels to choose from.

We will continue to work with the other small hospitals in the region to improve ITS.

ITS team in the SLMHC Data Centre.

From left: Chris Young, Ernie Buswa, Rob Cantin, Dave Hildebrand, Mike McCord, Matthew Bradley.



Environmental Services

Materials Management

Inventory bar code technology has been implemented in all hospital and Extended Care Unit (ECU) supply stock areas allowing for an integrated wireless stock replenishment process through the use of barcode scanners. This process allows for immediate stock top up by using integrated order quantity formulas and predetermined stock area profiles for each unit. Wireless technology allows for procurement staff to apply a seamless process for stock order, issue, charge to correct budget and delivery to the right place at the right time.

Our hospital is a member of the Northwest Supply Chain (NSC) collaboration, established in 2011 which is a shared service organization (SSO) that focuses on establishing best practices in supply chain through improved technology, group sourcing and contracting to generate overall purchase price savings for its member hospitals. The program includes the thirteen hospitals in our LHIN. The savings for our facility is projected to be \$250,475 through the results achieved by combined strategic sourcing contracts and initiatives.

Laundry

The laundry team processed 419,653 lbs of laundry last year (2015/2016).

Security

We are currently reviewing our existing surveillance camera system for upgrade to new digital technology and the incorporation of one system for both sites.

Dietary

Ready to Serve (RTS) patient meal carts were implemented in Spring 2016. The new heat/chill carts for patient meals increases temperature control for patient meals keeping hot food hot and cold food cold through a uniquely designed division in the cart. This increases patient safety and patient satisfaction.

An new electronic dietary management system will be implemented in the Fall of 2016 to collect dietary information from patients to improve service delivery.

Housekeeping

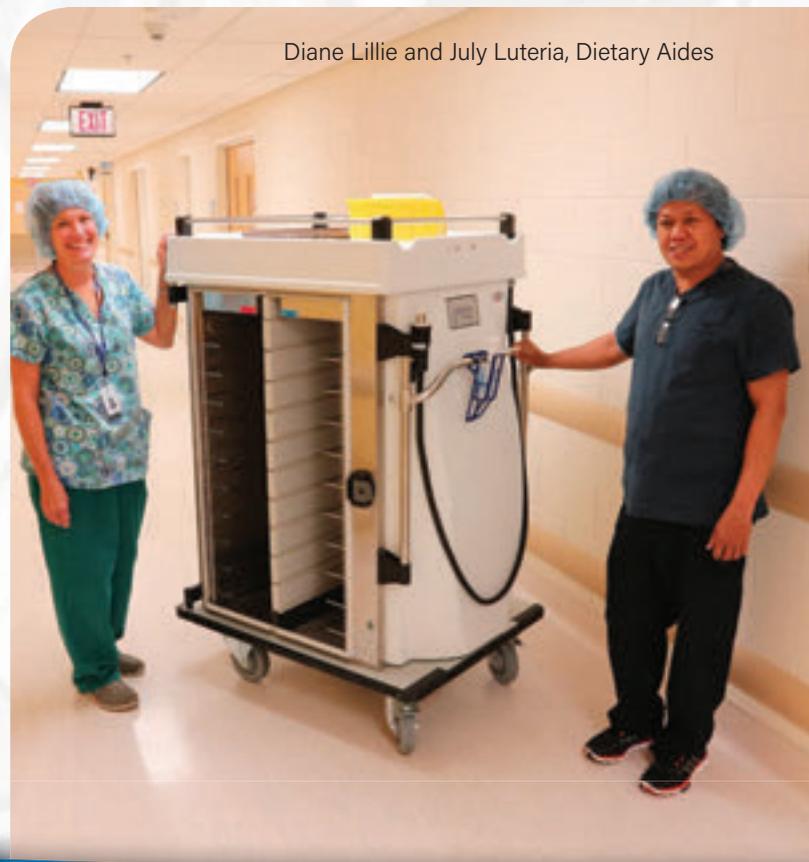
In order to improve patient safety, we have implemented new facility housekeeping audit software which is tablet driven. This software allows updating and tracking of room cleanliness and audits in real time.

Maintenance

We completed the construction of the Northern Medical Clinic in December 2015 which houses the SLRPSI northern appointment clinic.

The following improvements are planned at the hospital and William George Extended Care Facility:

- Upgrading installation of ductless air conditioning.
- Refresh to resident rooms by repainting and adding new closet doors, plumbing, etc.



Diane Lillie and July Luteria, Dietary Aides



Research at SLMHC



Dr. Len Kelly



Research is a key component of the SLMHC's strategic plan and our board of directors and administration fully supports staff and physicians participating in relevant research. SLMHC has also engaged with outside research partners on topics appropriate to our area; and has partnered with the Sioux Lookout First Nations Health Authority to create the Anishinaabe Bimaadiziwin Research Program to advance community-based research projects and regional capacity development.

A Research Review and Ethics Committee oversees the research topics and approves safe and meaningful projects. The committee ensures cultural safety is paramount in conducting any research. SLMHC's

efforts have produced valuable collaborations and dozens of peer reviewed publications.

SLMHC believes in creating a culture of inquiry that will foster local, relevant research to better inform health care providers and act as a catalyst in promoting excellence in the delivery of optimal health care to all patients and clients.

In 2015, research through SLMHC resulted in eleven peer reviewed publications, and was awarded the Best Original Research Article of 2015 from Canadian Family Physician Journal for the article acute rheumatic fever in First Nations communities in northwestern Ontario.

To download research compilations and more visit: www.slmhc.on.ca/research



ANISHINAABE
BIMAADIZIWIN
RESEARCH PROGRAM



A joint initiative of Sioux Lookout Meno Ya Win Health Centre and Sioux Lookout First Nations Health Authority.



**This year marks a
full five years in our
new facility providing
“Excellence Every Time”.**



SIoux LOOKOUT
Meno Ya Win
HEALTH CENTRE