



# St. Thomas Elgin General Hospital

The St. Thomas Elgin General Hospital  
2015/2016 Annual Report

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Welcome to the 2015-2016 St. Thomas Elgin General Hospital's Annual Report. In this year's report, you will find information that highlights our accomplishments and successes from the past year as they relate to our strategic objectives and our vision to deliver an excellent patient experience – every time.

[READ FULL MESSAGE](#)

left to right, Mary Stewart,  
Dr. Nancy Whitmore, Karen Davies and Paul Collins



A message from Paul Collins

A message from Melanie Taylor

A message from Nancy Whitmore



A message from Paul Jenkins

A message from Tonya Sheldon

A message from a patient

*"You were very efficient, the staff put me at ease and were very friendly. You treated me as a person, not as a patient with a number!"*

## STRATEGIC PRIORITIES



QUALITY

PEOPLE

SAFETY

PATIENT EXPERIENCE

FINANCIAL STEWARDSHIP

## Message from the Executive Team

Welcome to the 2015-2016 St. Thomas Elgin General Hospital's Annual Report. In this year's report, you will find information that highlights our accomplishments and successes from the past year as they relate to our strategic objectives and our vision to deliver an excellent patient experience – every time. (To review our Vision, Mission and Values, [click here](#)).

This past year has been an exciting time for STEGH, but it has not been without its challenges. As a leadership team, we faced difficult decisions to ensure we balanced our commitment to patients, families and our community with our commitment to be good financial stewards. We have been able to achieve this due to the tremendous support and efforts of our management team, our staff, physicians, and volunteers. More details, including our audited financial statements, can be found by clicking on the "Financial Stewardship" link.

Our Lean journey, which began in 2011, continues and we are pleased with the successes to date. We truly believe that this approach in healthcare, which focuses on continuous improvement, elimination of wastes, what is value-added, and on respect for people, enables us to create a culture of compassion, accountability, respect, excellence and safety. This lean approach allows us to demonstrate our CARES values each and every day. The "board to bedside" approach focuses on engaging all staff and physicians to identify problems, generate ideas for improvement and provide ongoing support to them to put their ideas to work and then sustain the resulting improvements in the patient experience. Emergency room wait times continues to be the most public example of this work (STEGH has led the province with the lowest wait times for three years) but similar improvement work is happening every day in every part of the hospital.

A significant amount of work has been completed this past year to prepare our staff and patients for the move to the new facilities which will be completed by January 2018. The Operational Readiness team is working alongside staff in each of the four areas which will move, namely the Emergency Department, Surgical Suites, Medical Device Reprocessing Department, and Mental Health. For more information about our Redevelopment Project, [click here](#).

As a leadership team, we will continue to focus our efforts on our patients' experiences at our hospital. Through our Patient Experience Office, we have developed a framework and approach that allows us to listen effectively to our patients and learn from them. We celebrate our successes with them too!

We invite you to learn more about our successes this past fiscal year in each of our strategic priorities, including:

- [Quality](#)
- [People](#)
- [Safety](#)
- [Patient Experience](#)
- [Financial Stewardship](#)

It has been a tremendous year at STEGH – and we extend our thanks and appreciation to all of the staff, physicians, affiliates, volunteers, students, patients and families who have shared and contributed to our successes in 2015-16.

**Paul Collins, President & CEO**  
**Karen Davies, Vice President & Chief Nursing Executive**  
**Dr. Nancy Whitmore, Vice President & Chief of Staff**  
**Mary Stewart, Vice President**



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## A message from Paul Collins

President and CEO

It seems like yesterday to me, but it was in 2011 that I entered into my final contract with our Board of Governors as STEGH President and CEO. That contract comes to a close in October 2016, and I officially informed our hospital Board in early 2016 that I will be leaving STEGH at that time to pursue the next stage of my life and career. Since becoming CEO in 2001, I have had the good fortune to work with countless individuals within our hospital and across our community to address the many challenges faced by STEGH to adapt to our changing and dynamic health care system. I greatly appreciate this experience, enhanced and guided by the wisdom and integrity of our STEGH Board of Governors. It has afforded me the opportunity to learn and to grow both personally and professionally.

An important learning for me is that the job of a leader is to build a work environment that supports people using their own talents to solve problems, to test their ideas with their teams to find the right solution, and to produce results that matter to the patients and families we serve. I am convinced this is a path, maybe the only path, to sustainable and continuous improvement in both the patient and staff experience. I am not saying that the work of building this environment is finished. That is a long journey. However, I have learned how imperative it is to be on that path.

Throughout 2015, we continued to build and strengthen our lean learning and our lean 'system' at STEGH. Our goal is to enable everyone to bring their unique knowledge, skills and abilities to problem solving to create continuous and sustainable improvement and to pursue our STEGH vision "to deliver an excellent patient care experience, every time."

Some highlights from 2015 include:

- Putting the "shovel in the ground" for our long-awaited Redevelopment Project. In a joint announcement from STEGH and Infrastructure Ontario in November 2015, we shared the news that the contract for this project was awarded to EllisDon and they began to mobilize onsite almost immediately. It is difficult to put into words how rewarding it is to see the project come to fruition after 17 years of efforts!
- Awarded *Accreditation with Commendation* following our June 2015 survey by Accreditation Canada. This is a remarkable accomplishment and confirms that STEGH continues to be a valuable and excellent performing hospital for the communities of St. Thomas and Elgin County. Accreditation is a useful process through which a hospital or health service organization can regularly and consistently be evaluated against consistent national standards. To read our Accreditation Report, click here. ([link to stegh.on.ca/public-reporting](http://stegh.on.ca/public-reporting))
- Achieving the status of 'District Stroke Center' as one of only four hospitals in our LHIN who will provide state of the art stroke care. STEGH is now operating a leading edge, 'integrated stroke care unit', that includes both acute stroke care and rehabilitation on the same care unit.

Finally, I want to say that STEGH remains steadfastly committed to elevating the patient experience, cultivating compassion, and listening to and involving patients and families in redesign, process improvement and quality and safety. STEGH has proven to be an industry leader in this work and has been invited to share its work and learnings across the region, the country and even internationally. To learn more about our Patient Experience Strategy and achievements, [click here](#).

It has been a privilege and an honour to have worked alongside patients, staff, physicians, volunteers and the community this past year, and throughout my time here at STEGH.

Thank you all for the opportunity and for your support.

Paul Collins

President & CEO

The official groundbreaking ceremony for The Great Expansion took place in November 2015. Participating in the sod turning are, left to right, Paul Jenkins, Executive Director STEGH Foundation, Paul Collins, President and CEO, Bill Brown, Chair, STEGH Foundation, Melanie Taylor, Chair, STEGH Board of Governors, and Ken Monteith, Campaign Chair.



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## A message from Melanie Taylor Board Chair

It has been an interesting, rewarding and exciting year for our hospital. Our Redevelopment Project began in earnest in November and the physical space is taking shape quickly. It is remarkable to see what has already been accomplished since the Board signed off on the contract this past year.

Another key milestone in STEGH's history took place this year with the official announcement that our current CEO, Paul Collins, would be leaving the hospital when his current contract ends in October 2016. On behalf of the STEGH Board of Governors and the community, I would like to take this opportunity to express our heartfelt gratitude and appreciation for the exceptional leadership, passion, and dedication that Paul has provided to our hospital and community in his role as President and CEO over the past 15 years.

Paul's vision to develop and implement a continuous improvement culture and quality improvement culture at STEGH has resulted in a hospital that is innovative, highly efficient, and very effective. This approach and shift in culture has allowed STEGH to balance budgets, add new services, increase front-line staff, improve quality of care, and improve patient satisfaction during a five-year period of zero funding increases from the Government.

Paul's vision, commitment, and determination to advocate for and champion the process of approval with the Ministry of Health greatly contributed to the 'Great Expansion' Redevelopment Project, which is the single largest investment in our hospital since it was built six decades ago.

The success of a leader is demonstrated in the success of the organization and STEGH, once again, excelled in a number of areas this past year. STEGH achieved impressive patient satisfaction scores with 94% of patients indicating their stay to be excellent or very good this past fiscal year. STEGH continues to sustain the lowest emergency wait times in Ontario despite a 37% increase in ER visits, resulting in significant Pay for Performance funding from the Ministry. And, this past year, STEGH was awarded Accreditation with Commendation by Accreditation Canada.

STEGH has benefitted tremendously from Paul's leadership, mentoring, passion and drive. We wish him health and happiness as he moves on to new challenges and opportunities. Our Board of Governors began recruitment efforts in early 2016 with assistance from a reputable firm that specializes in senior executive health care recruitment. We look forward to working with Paul's successor to continue supporting this important work.

In early 2016, the Board of Governors began planning for a community engagement session with our community partners. Our Board is strongly committed to working with our partners to fully understand the critical issues in our community, and to ensure there is clarity of the role of the hospital in the future from the healthy community perspective. Collectively, we can create a system in our region that is collaborative and patient centred.

As Board Chair, I wish to extend my personal thanks to the Board volunteers for their tireless efforts, commitment and passion. Together, we are making a difference in our community!

Melanie Taylor  
Chair, Board of Governors

Board Chair, Melanie Taylor, stands by the strategy wall outside the hospital board room. The Strategy Wall highlights STEGH's key priorities and metrics.



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## A message from Nancy Whitmore

Chief of Staff

In November 2015, the St. Thomas Elgin General Hospital (STEGH) was pleased to announce that it would become one of four District Stroke Centres within the Southwest LHIN. STEGH opened this unit in early April. The District Stroke Centre is a specialized unit on D Wing of the Continuing Care Centre (CCC), dedicated to providing both acute and rehabilitative care for all stroke patients. In this new integrated model, our stroke patients will remain on the same unit, in the same bed, surrounded by health team members with expertise in stroke care to help them through their entire patient journey. This unit meets best practice standards in the delivery of care.

This is an exciting time for our hospital and our community. As well as opening our new Stroke Unit, we also opened our newly renovated Special Care Nursery on the third floor. In the new SCN there have been significant upgrades that will improve the developmental care for all babies during their stay in the unit, including environmental controls for lighting, temperature and noise, as well as security system access at the door. The new physical space also includes an improved nurse call system, the installation of headwalls, ongoing newborn resuscitation space, improved infection control, lockers for parents' belongings, and space for important private consultations.

During the past fiscal year, STEGH also welcomed 10 new physicians to our hospital. The Redevelopment Project and the highly anticipated new space has made STEGH an attractive choice for professional staff. Attracting highly skilled, motivated and experienced practitioners has allowed STEGH to continue to provide safe, high quality care to our community.

As a longtime supporter and partner of Trillium Gift of Life, we are now pleased to be actively engaged in organ and tissues retrieval at our hospital, allowing us to honor the wishes of those individuals who express a desire to be a donor.

Safe care is vitally important and to help ensure we deliver this care, STEGH implemented 11 different "Safety Bundles" from Safer Healthcare Now, which is the flagship program of the Canadian Patient Safety Institute. CPSI is a not-for-profit organization that exists to raise awareness and facilitate implementation of ideas and best practices to achieve a transformation in patient safety. It is a resource for frontline healthcare providers, health organizations, health quality committees and councils, and health ministries. To learn more about the safety bundles, and other activities at STEGH to advance safe care, [click here](#).

On behalf of the professional staff at STEGH, I thank our community for allowing us the privilege to care for you in our award winning hospital.

Dr. Nancy Whitmore  
Chief of Staff

Mike Lalonde, physiotherapist, and Vicky Kazmer, physiotherapy assistant, work with patient Henry Marissen in STEGH's new Stroke Unit. Henry was the first patient to be discharged from the new unit.



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## A message from Paul Jenkins

Executive Director

### Friends!

What a year it's been for the St. Thomas Elgin General Hospital Foundation! Our mission of partnering with the community to support **OUR** award-winning Hospital in the delivery of an excellent patient care experience extended across Elgin County and took place in all four seasons in 2015/2016!

Here are just a few highlights of what donors and volunteers accomplished last year:

- It was an auspicious spring for the Foundation as we followed in the footsteps of the Hospital itself in winning an Award of Merit from the St. Thomas & District Chamber of Commerce!
- In the summer, we were taking mulligans at the Turk Turley Memorial Golf Tournament in Union, the Port Stanley Lions 6th Annual 'Marr Family' Golf Tournament & Fish Fry in Port Stanley, the Condie Cancer Cup in St. Thomas, and the second-ever It's **OUR** Hospital Golf Tournament in Dutton.
- In the fall, we shuffled our way through the Railway City Road Races, hosted Chef Michael Smith at Black Tie & Pearls, our third-annual Gala, and partnered with the Elgin Theatre Guild on a 2016 calendar.
- And in the winter, we hosted the first-ever, no skills necessary, World Tubing Championships, which attracted 39 teams and raised more than \$50,000 to renovate **OUR** Special Care Nursery.

Just as importantly, and again only because of our donors and volunteers, we invested in a state-of-the-art Digital Mammography Unit, a new Patient Family Resource Centre, and provided nearly \$200,000 for the purchase of advanced medical equipment.

Of course, the Great Expansion continued in earnest throughout 2015/16 and we reached some important milestones. First, we met and then surpassed our \$13 million fundraising goal – tip of the hat to Campaign Chair, Ken Monteith for his tenacious work. Second, we reset our fundraising goal to \$16 million to include the purchase of a CT Scanner so that **OUR** Hospital would have the very best equipment to keep us safe when we open our doors to this transformational project. Finally, we received our first-ever \$1 million gift from two local factories.

It's **OUR** Hospital is not just a slogan. It's much more than that. It's the recognition that our shared community plays an integral role in the delivery of an excellent patient care experience. It's acknowledgement that **OUR** Hospital needs our support. It's a commitment to ensuring the healthcare our families and friends deserve is available at STEGH during each visit, at every stage of life, and as close to home as possible.

Warm Regards & Appreciation,

Paul Jenkins  
Executive Director

STEGH recently opened newly renovated Special Care Nursery space on its third floor made possible due to the STEGH Foundation's generous support.



## BY THE NUMBERS

Measuring our success

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**865**  
STAFF

**200+**  
PROFESSIONAL STAFF



**9,101**  
TOTAL SURGERIES



**1,790**  
IN PATIENT SURGERIES

**7,311**  
OUT PATIENT SURGERIES



**240**  
VOLUNTEERS

**80**  
AUXILIARY VOLUNTEERS

**10**  
PATIENT ADVISORS

**765**  
CONTINUOUS  
IMPROVEMENT  
PROJECTS  
COMPLETED



**51,543**  
EMERGENCY  
DEPARTMENT  
VISITS



**1,961**  
DISCHARGE PHONE CALLS

**1,961**  
FOLLOW-UP APPOINTMENTS BOOKED

**4,286**  
DISCHARGED SUMMARIES DICTATED WITHIN 48 HRS



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## QUALITY

### Read about our Quality Improvement Plan

STEGH's commitment to quality care is a key driver and a strategic priority. Each year, STEGH submits a Quality Improvement (QIP) to the Ministry of Health and Long Term Care. The QIP is developed with active input from hospital leaders, board members, staff and physicians. In its 2015/16 QIP, STEGH highlighted six priority objectives for improvement, all of which align with our vision to deliver an excellent patient care experience. A number of metrics are tracked to measure success and sustainment of quality improvement efforts.

#### Patient Satisfaction

STEGH relies on a short internal patient feedback survey administered at discharge to measure patient satisfaction. Responses, including all written comments, are processed in a seven-day cycle with results posted visibly on huddle boards across the hospital. The questions were revised this past year to better align with the National Research Council of Canada survey process and to allow for increased understanding of patient experience. STEGH is driving patient experience and patient centered concepts into care processes and is supported by the hospital's patient experience council.

The QIP included tracking the question, "Overall, how would you rate the care you received?" and set a target of 92% answering excellent or very good across all inpatient units. We are pleased to report that we exceeded our target this year with an average of 94%.

#### ED Access

A second metric in the QIP relates to access in the Emergency Department. STEGH set an aggressive target of two hours for physician initial assessment (PIA) for CTAS 3 patients. CTAS is the Canadian Triage Acuity Score – a five level scale used to assess priority of patients. CTAS 1 is the highest severity (resuscitation) and CTAS 5 is the lowest (non urgent).

The PIA time for CTAS 3 patients continues to be a challenge due to the increasing ED volumes and longer time to address medical needs of less urgent patients in the ED. At the end of this past fiscal year, our average PIA CTAS 3 wait time was 2.6 hours.

STEGH staff and physicians are proud of the continued ranking of STEGH as the #1 ER wait times hospital in Ontario in 2012, 2013, 2014 and 2015. STEGH carefully monitors levels of quality/safety while continuing to drive wait times lower.

#### Best Possible Medication History (BPMH)

STEGH committed to a target of 85% completion of Best Possible Medication History (BPMH) within 24 hours for all admitted patients to Intensive Care, Medical and Surgical Units. A BPMH is a history created using a systematic process of interviewing the patient/family and a review of at least one other reliable source of information to obtain and verify all of a patient's medication use (prescribed and non-prescribed). The BPMH is a 'snapshot' of the patient's actual medication use, which may be different from what is contained in their records. This is why the patient involvement is vital. BPMH is easily measured on our computer order entry system and this is the basis for an effective medication reconciliation process on both admission and discharge.

#### Safety Bundles

STEGH committed to implementing all 11 Canadian Patient Safety Institute "Safety Bundles" into at least one area by end of 2015. This was a stretch goal, but one in which STEGH leaders were committed to given the reliable nature and the practicality of the tools for improving quality and patient safety. For more information on Safety Bundles, [click here](#).

#### Discharge Summaries and Follow Up Appointments

STEGH was experiencing higher than expected readmission rates and implemented two key strategies to address this situation. These included increasing the proportion of acute medical patients discharged from STEGH seeing primary care provider within seven days of discharge and to increase the proportion of discharge summaries sent within 48 hours from hospital to primary care or community provider for acute medical patients. The QIP target was to have 85% of discharge summaries completed within 48 hours for all discharged inpatients – a target which we met! The completion of discharge summaries is highly dependent on the medical staff and STEGH leadership worked collectively and collaboratively with the Medical Advisory Committee, department chiefs, and entire medical staff to achieve this target. The target for booking follow up appointments with primary care providers at the time of discharge from medical units was 90% and we are pleased to report that we exceeded that target.



Chemotherapy nurse, Janice Purcell, attends to a patient in STEGH's Chemotherapy Clinic.



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## PEOPLE

Learn how we equip our team to provide the best care

Respect for people is a central pillar in a Lean organization. Our approach at STEGH is to respect people's knowledge, talents and skills in continuous improvement aimed at improving health care services to our patients. Our goal is to engage, enable, and empower all of our people to become creative problem solvers and to do work which they find rewarding and meaningful.

During the past fiscal year, STEGH targeted four areas of focus for improvement which were identified in our results from an Employee Experience Survey. These areas of focus included:

- Recognition
- Adequate Resources & Equipment to do daily work
- Employee Development Opportunities
- Communication of the Goals of the Organization

### Recognition

Recognition is important to everyone! Our patients acknowledge staff, physicians and volunteers every week when completing our Patient Satisfaction Surveys. We specifically list the names of all those mentioned, add a photograph of one of our colleagues who received special mention, and post this information on huddle boards across the hospital. A personalized note of thanks from the President and CEO follows! What better source for recognition than from our patients themselves!

However, there are many staff who rarely come into direct contact with our patients/families, and so will not be recognized through this source. In keeping with our Lean approach to respect people's expertise and talent, STEGH began another recognition program this past year to acknowledge those individuals who have contributed to continuous improvement at our hospital.

On July 12, 2015 we began tracking service area improvements and the executive team meets every week to review the list of improvements. The complete list is posted on all huddle boards and each week, two initiatives are highlighted and a personalized recognition card is sent by the President and CEO.

### Adequate Resources and Equipment

A daily team huddle is held on every unit and service at STEGH. This daily huddle is a place to ask the team every day this

simple question: Do you have adequate resources and equipment to do your work today? We began asking this question during the past year and have found that this stimulates problem-solving to begin immediately! This question is now part of the daily huddles across the organization.

### Employee Development

STEGH is committed to employee development and educational support for our staff and renewed focus was spent on communicating the opportunities that are available to staff. In addition, we launched a new 'Performance Excellence Program' this year that shifts away from the traditional 'annual performance evaluation' process toward a system of more regular "coaching" conversations and real time feedback between employees and their managers. An important part of the conversation is to learn about the employee's aspirations and development goals.

STEGH continued to offer Yellow and Green Belt training to staff during the past fiscal year. This is a key strategy to build capacity within the hospital to sustain our Lean journey and we now have 190 staff who have completed Yellow Belt training and 31 staff who have completed Green Belt training since we began offering this to our staff. This training provides an understanding of Lean, the tools and techniques and the benefits that can be achieved through Lean methodology in the healthcare environment. It also provides staff with the opportunity to fully utilize the tools and techniques to complete a continuous improvement project.

### Communication of Goals

The Executive Leadership Team also recognized the importance of ensuring that everyone knows where STEGH is going as a community hospital within a very dynamic and changing healthcare landscape. Our Executive Team and Strategic Leadership Team worked with our Strategic Communications and Stakeholder Relations Lead to broadly and more comprehensively communicate this to all staff, leaders, and the community.

STEGH's vision to deliver an excellent patient experience, every time, is integrally linked to staff experience. We want our staff to feel valued, appreciated and be recognized for their role in helping us meet our vision.



Our Respiratory Therapy Team provides care throughout the hospital. Respiratory therapists are advanced-practice clinicians in airway management and are often in charge of initiating and managing life support for people in intensive care units and emergency departments, stabilizing, treating and managing hospital-to-hospital patient transport by ambulance.





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## SAFETY

Learn about our safety measures and initiatives

For the past five years, healthcare organizations across the country, including STEGH, have been improving patient safety and preventing patient safety incidents through the use of *Safer Healthcare Now!* interventions – a series of customizable, reliable, tested, and practical tools for improving quality and patient safety. During the past fiscal year, STEGH focused a number of interventions to improve patient safety and outcomes.

Practicing hand hygiene is a simple yet effective way to prevent infections, and while it may seem simple, it is in fact a complex cultural change for many hospitals. Ensuring hand hygiene is practiced appropriately is a cornerstone activity of STEGH's safety strategic priority. Cleaning your hands can prevent the spread of germs including those that are resistant to antibiotics and are becoming difficult to treat.

According to the Canadian Patient Safety Institute, 220,000 people are afflicted with healthcare-associated infections in Canada every year and 8,000 to 12,000 of those individuals will die as a result of acquiring a healthcare-associated infection. We owe it to our patients and their families to prevent harm by practicing hand hygiene!

STEGH's commitment to ensuring staff, physicians, affiliates, patients and visitors are compliant with safe hand hygiene practices is evident in its ongoing hand hygiene audits, the development and dissemination of information and education materials, and participation in the Canadian Patient Safety Institute's annual "Stop Clean Your Hands" campaign.

Hand hygiene audit results are tracked and reported each week at STEGH's leadership huddle and we are pleased to report that our overall compliance rate for fiscal year 2015/16 was 98%.

Another key component of our patient safety program at STEGH is a Falls Risk Reduction and Prevention Program as falls put patients at risk for serious injury and harm. It is a shared responsibility and it starts with prevention, assessment, identification of risk, implementation of strategies to mitigate risk, visual cues, or even with the activation of the bed alarm to alert staff if the patient is getting out of bed.

STEGH revised and launched a new Falls Risk Reduction Clinical Practice Guideline to provide the current knowledge of fall risk factors and interventions in the acute and post-acute care setting into a suggested best-practice protocol that applies to all STEGH patients, regardless of age or admission status. Universal falls precautions have been developed and apply to all patients regardless of age or admission status.

All areas of the hospital are expected to be aware of and implement strategies to ensure compliance. Currently, all patients are to be screened for risk of falling regardless of age or admission status.

STEGH's commitment to patient safety is also demonstrated by its implementation of 11 patient safety bundles during the past fiscal year. Safety bundles are a structured way of improving processes of care and patient outcomes by utilizing evidence-based practices that, when performed collectively and reliably, have improved patient outcomes. While the practices themselves may not be new, they historically may not have been performed uniformly or consistently, making treatment less reliable. By bundling the interventions together into a package and successfully completing each step, there is no controversy, debate or variance in the approach.

Examples of the safety bundles implemented at STEGH this past year include:

- Medication reconciliation, a formal process in which healthcare providers work together with patients, families, and care providers to ensure that accurate, comprehensive medication information is communicated consistently across transitions of care, to prevent medication errors and adverse events
- Prevention and management of delirium, a syndrome characterized by a disturbance of consciousness and a change in cognition that develops over a short period of time. Delirium affecting ICU patients is complex and still poorly understood. The most important step in delirium management is early detection. If delirium is detected, efforts should focus on managing the symptoms while identifying the cause and minimizing the impact of risk factors.
- Ventilator-associated pneumonia (VAP) is a serious complication of hospital care. Prevention of VAP with bundles of evidence-based practices when implemented together result in consistent reductions in the incidence of VAP.

To read more about all 11 Patient Safety Bundles, [click here](#)



Pharmacy staff complete a Best Possible Medication History (BPMH). A BPMH is a history created using a systematic process of interviewing the patient/family and a review of at least one other reliable source of information to obtain and verify all of a patient's medication use (prescribed and non-prescribed).



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## PATIENT EXPERIENCE

Read our patient experience report

The Patient Experience movement is gaining momentum across North America. Rising health consumer expectations, significant demographic shifts and an increase in healthcare performance transparency are driving this movement and it is of particular importance to STEGH, whose vision is to deliver an excellent patient care experience – every time. Relying on best practices, a commitment to re-invigorating compassionate care, and promoting patient, family and community engagement, the Patient Experience Strategy guides this important work to elevate the patient experience at STEGH.

STEGH's Patient Experience Council consists of 10 community volunteers – known as Patient Advisors – and six staff advisors. The council is in its second year and has achieved many successes during the past fiscal year. STEGH's inclusion and willingness to let the "voice of the customer" help frame quality improvement, and its successful launch of this highly engaged and effective Patient Experience Council, has been acknowledged and recognized by peer hospitals, Accreditation Canada, and the Patient Experience industry across North America. STEGH presented its utilization of Lean methodologies to guide its patient experience strategy at a Beryl Institute webinar and has contributed to the course curriculum development of a new Patient Centred Experience and Design Program for HealthCareCAN, the national voice of healthcare organizations and hospitals across Canada with a focus on informed and continuous, results oriented discovery and innovation across the continuum of healthcare.

In April 2015, STEGH formally launched its Family Presence Guidelines, eliminating set visiting hours and welcoming family members as partners in care 24 hours a day according to the patient's preference. STEGH believes it is important for patients to experience the support of family and friends if this is their wish.

The Family Presence Guidelines were developed and informed by STEGH's Patient Experience Council to ensure the voice of the patient was included in the process. For patients, evidence suggests that supporting family presence and participation according to patient's preferences decreases anxiety and confusion, makes the patient feel more secure and increases patient satisfaction, quality and safety. The presence of family members also promotes better communication and allows for more opportunities for patient and family teaching.

In June, 2015, STEGH moved to a decentralized patient registration process. The decision to have patients go directly to their point of care to registers enhances the patient experience, respects people's time, and minimizes travel for our patients and families. The decision was made after careful consideration that involved feedback and input from Patient Advisors, our outpatients, their families and our staff.

Our new Patient and Family Resource Centre (PFRC), located in the South Building Atrium, opened in November 2015. This Centre provides patients and families with health consumer information as well as information on community resources in Elgin County. Having a centralized resource centre avoids duplication of patient education efforts and can support many diverse departments within our hospital. It also provides a quiet, non-clinical space for families to rest while waiting for their loved ones receiving care in hospital.

STEGH's Patient Advisors volunteer in the PFRC to assist patients and families in accessing information and in wayfinding.

STEGH continues to actively recruit volunteer patient and family advisors. For more information on the role of an advisor and how to apply, [click here](#)



Nancy Lawrence, Strategic Communications and Stakeholder Relations Lead, in the Patient Family Resource Centre. In her role, Nancy has oversight of the Patient Experience Strategy and Office.



A message from Tonya Sheldon  
Chief Financial Officer

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## FINANCIAL STEWARDSHIP

View our financial statement

The healthcare funding environment was, once again, extremely challenging this past fiscal year as the hospital dealt with overall funding reduction culminating over the past four years due to the Health System Funding Reform by the Province. Strategically, STEGH continued on its Lean transformation journey which was launched in 2011. This approach shifts focus to designing safe, quality-driven care and service around the patient experience, and enabled STEGH to meet our increased funding pressures by reducing waste. From a financial perspective, this change in thinking and in practice at STEGH has helped us to do more with less, but also to receive additional 'incentive' funding as we exceeded the targets set by the Southwest LHIN.

Although the hospital ended the year in a deficit position, we met our debt obligations and reduced our long-term debt by \$1 million while also investing \$4 million in capital equipment and building enhancements.

I would like to take this opportunity to thank all of the staff, physicians, volunteers and auxiliaries who contribute every day to support the operations of the hospital. Also, thank you to our many donors and volunteers who have contributed over \$622,000 towards patient care equipment and over 28,664 hours of volunteer time. Together we make STEGH strong.

### Summary Statement of Financial Position

SUMMARY STATEMENT OF FINANCIAL POSITION	March 31, 2016 (000's)	March 31, 2015 (000's)
as at		
<b>ASSETS</b>		
Current Assets	8,234	11,204
Restricted Assets	25	42
Capital Assets	61,083	58,311
<b>Total</b>	<b>69,342</b>	<b>69,557</b>
<b>LIABILITIES, DEFERRED CONTRIBUTIONS AND NET ASSETS</b>		
Current Liabilities	13,306	12,324
Long term liabilities and deferred contributions	44,097	42,959
Unrestricted Net Assets	11,914	14,232
Restricted Net Assets	25	42
<b>Total</b>	<b>69,342</b>	<b>69,557</b>

### Summary Statement of Operations

SUMMARY STATEMENT OF OPERATIONS	March 31, 2016 (000's)	March 31, 2015 (000's)
Year Ended		
<b>REVENUES</b>		
Ministry of Health and Long-Term Care and South West Local Health Integration Network	71,106	71,369
Other	19,184	19,107
<b>Total</b>	<b>90,290</b>	<b>90,476</b>
<b>EXPENSES</b>		
Salaries and benefits	54,191	53,747
Other	36,882	36,522
<b>Total</b>	<b>91,073</b>	<b>90,269</b>
Excess of revenues over expenses from operations	(783)	207
Other revenue (expenses)	(1,553)	(1,724)
<b>Excess of revenues over expenses</b>	<b>(2,336)</b>	<b>(1,517)</b>

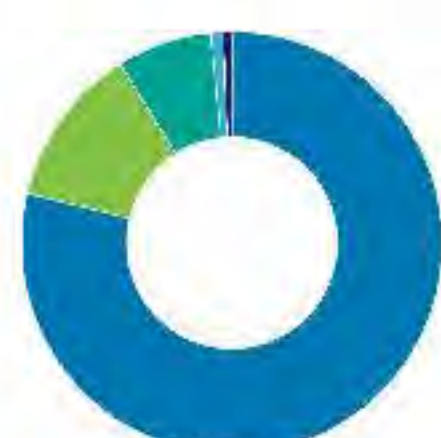
### Summary Statement of Cash Flows

SUMMARY STATEMENT OF CASH FLOWS	March 31, 2016 (000's)	March 31, 2015 (000's)
Year Ended		
<b>CASH PROVIDED BY (USED IN):</b>		
Operating Activities	540	5
Financing Activities	2,703	5,575
Investing Activities	(6,737)	(8,935)
<b>Net decrease in cash</b>	<b>(3,494)</b>	<b>(3,355)</b>
<b>Cash, beginning of year</b>	<b>\$7,012</b>	<b>\$10,367</b>
<b>Cash, end of year</b>	<b>\$3,518</b>	<b>\$7,012</b>

### Basis of Presentation

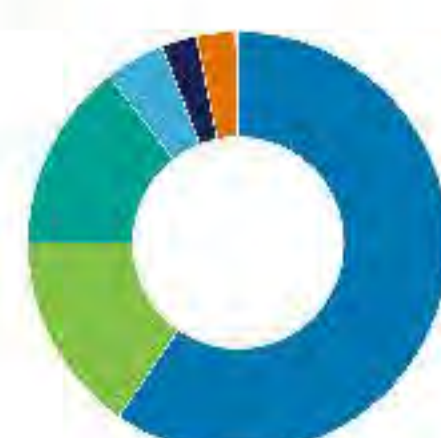
The information contained in the summary financial statements is in agreement with the related information in the complete audited financial statements. The summary financial statements contain major subtotals and totals from the complete audited financial statements.

#### Total Revenue by Type



- MOHLTC and SW-LHIN – 78.75%
- Patient – 12.32%
- Non-Patient – 7.31%
- Preferred Accomodation – 0.93%
- Amortization of Deferred Capital Contributions – 0.69%

#### STEGH Operating Expenses



- Compensation – 59.5%
- General Supplies – 15.4%
- Medical Staff Remuneration – 14.4%
- Medical and Surgical Supplies – 4.6%
- Amortization of Equipment – 2.7%
- Drugs – 3.1%
- Short Term Interest – 0.1%
- Bad Debts – 0.1%