

100 Health Village Lane



The new professional building opened September 5, 2017.

BUDGET

We are pleased to report that we have achieved a balanced budget for the 28th consecutive year with a small surplus of \$358,738 combined operating and capital for the period ending March 31, 2018.

ACCREDITATION

RVH has been accredited since 1971! In December 2017, RVH received accreditation with Exemplary Standing. This is for organizations that go beyond the requirements of Accreditation Canada and demonstrate excellence in quality improvement. This is the highest level of accreditation.

PROFESSIONAL BUILDING

The new professional building located at 100 Health Village Lane was completed on time and on budget (\$6.6 million). The building was designed by architect, Brian Dickey, and constructed by Argue Construction. This 18,900 square foot facility was completed in July 2017, and the tenants officially opened their offices on September 5, 2017. Three physicians, Dr. Tara Avelino, Dr. Anthony De Jesus and Dr. Amanda Low are renting space with room for seven more physicians. As well, the Sleep Products Store, Foot Care Clinic, Renfrew Family Chiropractors and the DynaCare Laboratory are tenants.

EPIC – PROJECT FUSION

RVH joined with The Ottawa Hospital to participate in a Hospital Information System and become a partner in the regional implementation with the University of Ottawa Heart Institute, Hawkesbury General Hospital, Ottawa Hospital Family Health Team and St. Francis Memorial Hospital.

This project impacts every area of hospital operations from registration, housekeeping and physician orders to nursing notes to diagnostic testing. The project has a \$6.6 million budget.

This is not an IT initiative, but rather a new way of defining relationships and providing better quality patient care across the Champlain LHIN.

RVH has a long history of collaboration with TOH. Some advantages of joining this partnership will be: the ability to share patient data regionally; improved referrals to TOH; standardized clinical best practices and high quality of care; clinical expertise; competitive pricing (discounts for larger combined volumes); and Information Technology expertise.

This project is scheduled to go live June 2019.

MEDICAL STAFF

BOILER REPLACEMENT

The project for the replacement of the existing steam boilers was completed as of March 31, 2018. This \$2M project was funded by the Hospital Infrastructure Renewal Fund, and was completed on budget.

FLUOROSCOPY SUITE REPLACEMENT

The fluoroscopy suite replacement is complete. In addition to new equipment being installed, the entire suite was redeveloped to meet current standards. Approved Budget for equipment was \$800,000, and \$750,000 for renovations. The project came in on budget.

CHILLERS

The Chiller replacement project had an approved budget of \$700,000 and was funded by the Hospital Infrastructure Renewal Fund. The project has been completed and on budget.

FRIDGE & FREEZER UPGRADES

RVH received approval for \$506,000 for Dietary fridge and freezer upgrades through the Hospital Energy Efficiency Funding. This project has been completed and came in on budget.

HEALTHY FOODS

In November 2017, RVH achieved the Silver benchmark for Healthy Foods. Most of the changes made to achieve silver also meet the gold-level criteria or require only small tweaks to the recipes in order to achieve gold. We are planning to achieve the gold level!



In 2015, RVH began a journey to implement best practices through the Registered Nurses of Ontario's (RNAO's) Best Practice Spotlight Organization (BPSO) program. BPSOs are health care organizations selected by RNAO to implement and evaluate its internationally acclaimed best practice guidelines. These guidelines incorporate evidence-based practice to enhance patient outcomes. All of the required deliverables of the program were met by RVH and we received the BPSO designation in 2018. This is a testament to the leadership and hard work of our team, as well as our commitment to the highest standards of excellence in care to all of our patients.

Despite positive reports, numerous challenges remain for our Medical Staff and our Hospital. The average age of our existing pool of physicians is such that we will need to remain diligent in the physician recruitment process. Without physician recruiting, by 2021, we estimate that over 10,200 residents within Renfrew and the surrounding municipalities will be without a Family Physician. The statement of need analysis indicates that we will need an additional 10 to 13 Family Physicians before the end of 2021.

In March 2017 we welcomed Dr. Anthony De Jesus and in August 2017, Dr. Amanda Low, Family Practitioners. Dr. Ben Blaine joined the Calabogie Family Practice in June 2017 with Dr. Max Buxton and Dr. Kristian Davis.

In October 2017, Dr. Robert Duggan retired from his Family Practice.

In the past year we added six visiting specialists: Dr. Mary Ann Beimers, Pediatrician; Dr. Monica Bishop, Palliative Care; Dr. Christopher De Jesus, Orthopaedics; Dr. Vanessa Doyle, Neurologist; Dr. David Messika-Zeitoun, Echocardiography; and Dr. Jeremy Setterfield, Urologist.

The Medical Advisory Committee updated the Medical Staff bylaws reflecting our current processes as we strive for continual improvement.

We continue to participate in the education and training of residents and medical students. The mentoring relationship is one that provides guidance and support to trainees and is a key component of the education and professional development of our future physicians. This participation is also a great recruitment tool for residents to consider RVH for their family practice.

In the past year residents and students have come from the University of Ottawa, Queen's University, McMaster, the Northern Ontario School of Medicine and the University of Australia.

Physicians mentored 13 Medical Residents and 19 Medical Students for a total of 682 days.

We have maintained our strong relationship and continue to work with the Hospital Administration and the Board of Directors as we maintain and advance the medical services we provide.

FAST FACTS

Our People
Our Hospital
Our Patients



\$42 Million
Impact on economy!



2017-2018 STATISTICS

	<p>Active Physicians – 24 Honorary Physicians - 2 Consulting Physicians - 42 Casualty Officers - 7 Radiologists - 50+ Oncologists - 25</p>	<p>55 Beds (Includes 31 Active Beds and 24 Continuing Care Beds)</p>
	<p>Medical Residents – 13 Medical Resident Days - 418 Medical Students – 19 Medical Student Days - 264</p>	<p>Admissions – 1,174 Average Length of Stay – 14.4 Active Bed Occupancy – 105.27%</p>
	<p>Oncology Visits - 925</p>	<p>Surgical Procedures Inpatients - 67 Day Surgery – 1,325</p>
	<p>Emergency Visits/Outpatient Visits – 27,953 Clinic Visits – 12,019</p>	<p>Dialysis Treatments- 12,164 Peritoneal Dialysis Treatments – 247</p>
	<p>Ontario Breast Screening Program – 1,657 Mammography – 983</p>	<p>Diagnostic Imaging Exams – 17,401 CT – 5,450 Ultrasound – 6,070 Bone Density – 874</p>
	<p>Electrocardiogram - 1,536 Echocardiograms – 6,914</p>	<p>Sleep Lab - 1,349 Pulmonary Function Studies – 874 Stress Tests - 609</p>

RVH BALANCED SCORECARD 2017-2018

FINANCIAL PERFORMANCE (EFFECTIVENESS)	QUALITY OF CARE (SAFETY/PATIENT-CENTERED)
<ul style="list-style-type: none"> • Capital Expenditures \$6,139,752 • Operating Revenues \$43,284,000 <ul style="list-style-type: none"> ○ Operation Surplus \$358,738 • Total Number of Patient Days 18,890 <ul style="list-style-type: none"> ○ Direct cost per Patient Day \$397.40 • Average Resource Intensity Weight 1.8 • Paid Hours \$538,263 • Total Worked Hours <ul style="list-style-type: none"> ○ Total Hospital 476,357 ○ Management and Support Areas 176,185 ○ Patient Care Workload Hours 300,172 • Funding Announcements: <ul style="list-style-type: none"> ○ New Base Funding (Pressures Small Hospital) \$470,000 ○ Volume-Based Funding (Systemic Therapy) \$269,700 ○ One-Time Funding (includes Critical Care Nursing, Non HSMR Surge Funding, Crisis Bed Funding) \$464,228 ○ Capital (Transformation Fund –Hospital Infrastructure Renewal Fund; Hospital Energy Efficiency Program) \$3,610,728 • Tuition Assistance Program provided \$32,511.77 to 99 employees • Dialysis Education Fund provided \$7,088.29 to 14 employees • Medical Imaging Fund provided \$1,462.07 to 3 employees • Cost of Sick Days = \$463,367 (**This does not include replacement costs) • Sleep Studies revenue generated \$562,270 • Sleep Products revenue generated \$903,473 • Regional Assault Care Program was able to divert 139 inpatient admission days with use of Senior Crisis Bed Program which equals hospital savings • Foot Care Clinic revenue generated \$26,385 • ER received funding to mentor three new physicians (\$27,254 for each) • Funding received for replacement of fridges/freezers in Dietary • Maintenance continues to refresh/refurbish key areas of the hospital, without bringing in outside help 	<ul style="list-style-type: none"> • Received 3 Year Designation as “Best Practice Spotlight Organization”; will continue to maintain over next few years • Discharge Planners continue to conduct follow-up phone calls with patients discharged to see how they felt their stay went and receive feedback for change • 180 Employees received influenza vaccine • Physio actively participates in Home First Philosophy an Senior Friendly Hospital Strategy • ER implemented Columbia Suicide Severity Suicide Screening tool for high risk patients • Integration of Patient and Family Advisory Committee members into all the Care Team Meetings • Code Blue Family Presence policy developed by PFAC Committee • Physio performs ongoing audits of Barthel; Up for Meals and Falls Prevention • Silver Status achieved in Cafeteria to create a healthier food environment for staff/patrons • Synergy implementation for patient menus started; will allow for more individualization to better reflect patient needs • 100% of DI staff registered with relevant licensing body and must maintain registration by participating in mandatory annual education • 61 Employee Incidents • Patient and Family Advisory Committee involved in implementation of numerous quality/patient safety centered practices • Participated in the 2017/18 IPUP Survey (Complex Continuing Care) • Wait times for general surgery is 4-6 weeks; Cancer surgery <28 days; endoscopy surgery 6-8 weeks – well below provincial average • 50+ volunteers in Recreation provide help and entertainment to our patients • OR continues to participate in National Surgical Quality Improvement Program (NSQIP); significant metric improvement achieved • Both Active Care and Emergency involved with NRC Picker Satisfaction Survey • Bedside Patient Communication Boards in patient rooms has benefitted patients, families and staff • 100% compliance with all Required Organizational Practices (ROPS) for accreditation, including tow client identifiers and Fall Prevention Program • ER Dept participating in Emergency Department (ED) Return Visit Quality Program; program supports hospitals in investigating return visits to the ED as an indicator of quality of care provide in ED • EndPJPParalysis Program implemented on Complex Continuing Care Unit with help of Recreation and Physio

RVH BALANCED SCORECARD 2017-2018

SYSTEM INTEGRATION (ACCESS TO CARE & INTEGRATION)			STRENGTH IN PEOPLE (WORKLIFE)
	2017/2018	2016/2017	
Average Length of Stay	14.4	13.4	<ul style="list-style-type: none"> • Annual Celebration of Worklife Dinner honoring 95 employees, physicians and Board Directors, including 14 retirees • Hospital of Ontario Pension Plan retirement seminars/individual counseling provided to employees • Workplace Wellness Stats: <ul style="list-style-type: none"> ○ Purchased new equipment for the gym; purchased new TV for Employee Lounge ○ LHIN Initiative – Siler achieved in Healthy Foods in Hospitals ○ Smoking Cessation Program continued ○ Employee Assistance Program has new supplier (Morneau Shepell) – 46 counselling services; 1 Crisis Management Service; 10 Life Smart Coaching; 2 Wellness Workshops; 51 Employees/4 dependents/1 spouse • Partnership with the UOHI for BPG maintenance for heart failure, ACS and Smoking Cessation • ER Department hosted a PALS course; CHEO Education Session; Community Emergency Outreach Session; ATLS re-certification • Camera System implemented to ensure safety of staff; TV monitor now shows 64 locations as enhancement of staff/patient safety especially after hours • Medical Imaging continues to maintain accreditation with CARMAP and OBSP through CCO with the submissions of its staff's specialized training and imaging techniques • Ongoing support and education provided to service areas related to code of conduct, workplace harassment, WHMIS; violence prevention; Hand Hygiene, Wound Care, Feeding Tubes; Smoking Cessation; Infection Control and workplace safety • Continued implementation of Violence Prevention Program with provision of certification for employees in Nonviolent Crisis Intervention training • Nursing Skills Fair and Patient Safety Days done annually to maintain skills and provide education • Volunteer Ambassador program implemented and has been very successful; volunteers deal with many questions on a daily basis and are able to assist patients and families • Recreationology has 50+ volunteers to augment programs • LEAP Renal training for numerous nursing staff • Physiotherapy has active participation in development of Restorative Care Model for Complex Continuing Care Unit and arranged for OT education for Activity of Daily Living
% of Occupancy (Medical/Surgical)	105.2	111.2	
Number of Admissions	1,174	1,148	
Patient Days	18,890	17,497	
Number of Emergency/Outpatient Visits	27,953	28,603	
Number of Clinic Visits	12,019	15,130	
Chemotherapy Visits	925	765	
Medical Day Care Procedures	1,036	1,030	
Hemodialysis Treatments	12,164	14,120	
<ul style="list-style-type: none"> • Total of 281 clients seen by Regional Assault Care Program; 912 follow visits done by program • 1,691 support/advocacy phone calls done by Assault Care Program • 1,220 OR cases; 201 Pre-operative clinics; 91 telephone assessments • 71 PICC insertions • 8,380 attendance days and 10,596 patients visits for Physiotherapy • 49,624 instruments processed • 1,496 Scopes reprocessed • 1,349 sleep tests done; OTN Clinics being held at Sleep Products Store • More than 42,000 Diagnostic examinations conducted (ECG; X-Ray; Bone Density; OBSP; Mammo; Echo and CT) • Performed 6,070 Ultrasounds and increased echocardiography exams by 167% (significant increase in revenues) • 2,721 Telehealth Clinic visits • Total of 440 employees at RVH; 118 employees are eligible to retire; 157 job postings; 42 new hires • ACS GAP compliance and Heart Failure compliance for Active Care 100% includes discharge follow-up (highest in Champlain LHIN) • Health Records had 11,744 coded visits for Day Care; 24,723 coded visits for ER registrations and 1,173 coded discharges • Health Records answered 1,267 written requests for information • Hand Hygiene prior to contact average: 80% • 106 new referrals made to Recreationology; 3,131 attendance days • Assisted Living Program provided 24/7 coverage for 365 days with no gaps or delays in service 			