


# I am niagarahealth

Annual Report 2017/2018



Our Music and Memory Program is bringing smiles to faces in our Extended Care Unit.



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## WHO WE ARE

Niagara Health is on a bold new journey to create a healthier Niagara.

Our CORE values inspire us to be **EXTRAORDINARY**: Compassion in Action, Driven by Optimism, Achieving Ambitious Results.

We are a regional healthcare provider with multiple sites and a growing network of community-based services. Our team is made up of more than 4,800 employees, 600 physicians and 850 volunteers who we count on to deliver extraordinary caring to every person, every time.

We provide a wide range of inpatient and outpatient services to more than 450,000 residents across Niagara, including Acute Care, Cancer Care, Cardiac Care, Complex Care, Emergency and Urgent Care, Kidney Care, Long-Term Care, Mental Health and Addictions, Stroke Care and Surgical Care.



Our Accreditation with Exemplary Standing is a clear demonstration of our team's commitment to the highest safety and quality standards. As a community-based academic centre, teaching and learning, research, innovation and partnership are propelling us as we imagine a healthier Niagara.

**COVER PHOTO:** Herb Thomas, a resident at the Extended Care Unit at our Welland Site, listens to music as part of our Music and Memory Program. Learn about the difference the program has made in the lives of residents on Page 4.



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[www.niagarahealth.on.ca](http://www.niagarahealth.on.ca)





Dr. Suzanne Johnston  
President



John MacDonald  
Board Chair



Dr. Tom Stewart  
Chief of Staff

# I am niagarahealth

We are proud to share Niagara Health's 2017/18 Annual Report, demonstrating the many ways our teams are elevating healthcare as we work to achieve our vision of a healthier Niagara.

We chose the theme I Am Niagara Health to highlight how our people are committed to deliver on our promise to provide extraordinary caring to our patients and their loved ones.

This past year has presented many opportunities, and we are grateful to our staff, physicians and volunteers for their unwavering dedication to our deep-rooted purpose of caring.

Our report provides an update on the progress we are making implementing our strategic plan initiatives to improve quality and other important work that supports these initiatives.

You'll also learn about our increasing focus on research and academics, which is transforming healthcare in Niagara, enhancing the patient experience and attracting and retaining the best and brightest to work at Niagara Health.

We've had much to celebrate over the past year and take great pride in the care provided by our teams, delivered with caring and compassion.

## 04 RESEARCH & ACADEMICS

Our increasing focus on research and academics is transforming healthcare in Niagara. Here are some examples.



### The power of music

Providing personalized music playlists on iPods is proving to be beneficial to residents in the Extended Care Unit (ECU) at our Welland Site. Residents with cognitive impairments like dementia can sometimes experience agitation and depression. The ECU staff and Brock University students introduced the Music and Memory Program to enhance the quality of life for residents. The program has helped to improve the mood and behaviour of residents and has been effective in reducing incidence of falls by creating more relaxing environments. "It's amazing

when you see someone who really responds to the music and you see their face brighten and their eyes twinkle or a smile comes across their face," says Lezlie Leduc, the ECU Program and Services Manager. Music and Memory is part of the Interprofessional Education for Quality Improvement Program (I-EQUIP), which pairs students from Brock and McMaster's School of Medicine - Niagara Campus, with staff from Niagara Health to work together on health system improvement projects.

◀ **Photo: ECU Program and Services Manager Lezlie Leduc with resident Herb Thomas, who is part of the Music and Memory Program.**

### Helping patients focus on mealtime

It's an alarming statistic: Nearly half of patients admitted to Canadian hospitals are malnourished. To combat malnutrition, Niagara Health joined a University of Waterloo study to look at ways to treat and prevent malnutrition for at-risk patients. Malnourished patients, the majority of whom are seniors, experience longer hospital stays and are at higher risk for readmission within 30 days. Now, when admitted, the patients are asked if they are eating less than usual or have lost weight without trying. If they answer yes to the two screening questions, our dietitians will assess and work with

them on a nutrition treatment plan. The second phase of the study launches this fall. There will be an increased focus on connecting patients with family health teams and other care providers in the community for continued nutrition care after they are discharged. Marilee Stickles-White, Niagara Health Manager, Clinical Nutrition Services, says the program is also expanding to more units. "If we identify malnourished patients early on in their hospitalization, we can intervene earlier with great success," she says. "We are making a difference."

**Photo: Clinical Dietitian Andrea Digweed meets with patient June Annett at our Greater Niagara General Site to discuss dietary needs.** ▶



## Prompt care for addictions

Our Rapid Access Addiction Medicine (RAAM) Clinic is making a difference in people's lives by providing effective treatment for addictions and associated mental health concerns. The clinic provides rapid care for people looking for help with alcohol, opiates and other substances. The clinical team offers counselling, anti-craving medications and connects patients to counselling and rehab programs in the community or at Niagara Health. Key to the clinic's success is treating a client's substance use and any associated mental health problems at the same time. The program has resulted in a significant

decrease in the number of clients returning to the Emergency Department or being admitted to a Mental Health inpatient unit. "People with substance problems get better with effective treatment," says RAAM Medical Director Dr. Richard Kimacovich. "We help people to rejoin life, to rejoin their families." One of five pioneering RAAM sites in Ontario, Niagara Health contributed research showing the benefits of this care model and that facilitated further expansion of RAAM clinics across Ontario. The RAAM clinic began at our St. Catharines Site and has expanded to our Welland and Niagara Falls sites.

**Photo: Dr. Richard Kimacovich, Nurse Practitioner Denis White and Social Worker Nicole Valeriote are members of the RAAM team.** ▶



## Research in the ICU

Patients in Intensive Care Units are our sickest patients and are often unable to express when they feel anxious or are in pain. In addition, our teams may have difficulty accurately determining when patients are experiencing confusion, clinically described as delirium. A leading researcher at Niagara Health, Dr. Jennifer Tsang, and Brock University Associate Professor Dr. Madelyn Law are working with our ICU team to identify better ways to predict and manage a patient's care when they are experiencing one or more of these symptoms. The pain, agitation and delirium (PAD) research is important to enhance care for our patients by reducing the length of

time they require this more intensive level of care while also preventing complications. "When we know that delirium is at the root of confusion and agitation, then we can target specific treatments more readily," Dr. Tsang says. Results from the first phase of the PAD study were presented at the European Society of Intensive Care Medicine conference in Vienna in 2017, and three manuscripts have been submitted for publications. Drs. Tsang and Law are now embarking on the second phase of the study, which broadens the research to involve patients' family members and additional healthcare disciplines.

◀ **Photo: Dr. Jennifer Tsang is studying ways to better manage pain, agitation and delirium in Intensive Care Unit patients.**



## 06 HOW WE'RE DOING: Year 2 of our 10-year Strategic Plan



### Extraordinary Caring

We are collaborating on a number of initiatives that target areas of medication safety, patient flow and quality of care that directly impact every aspect of a patient's healthcare journey, as well as the work environment for our teams. With We Round, for example, patients are formally checked on every two hours for pain, personal possessions within reach, pumps, and positioning. This initiative is a key strategy focused on decreasing patient fall rates, reducing the number of pressure ulcers, and lowering call bell rates, while increasing positive feedback from patients surveyed about their care. Patient flow remains a challenge due to a number of factors internal and external to the hospital, and our teams continue to focus their efforts on reducing wait times in our Emergency Departments through partnerships and other innovative approaches.

Decrease the number  
of patient safety incidents

376  
Target

430  
Current

Maintain staff survey results  
for patient safety reporting

70%  
Target

68%  
Current

### Initiatives

- **Patient Flow:** Reduce Emergency Department length-of-stay for admitted patients awaiting a bed.
- **Medication Reconciliation:** Gather patients' accurate medication history at admission and discharge.
- **We Round:** Structured approaches to improve the safe sharing and exchange of information between our teams, especially during care transitions, and collaborating with patients and families as part of this process.



### Extraordinary Teams

We are proud to work with the very best. To support our teams in providing Extraordinary Caring, we need to provide our people with opportunities to develop and learn. Our teams deserve to work in a respectful culture that fosters critical thinking and innovative ideas. Our most recent employee engagement survey results show we are headed in the right direction. We have seen an increase in the engagement level of staff, leaders and physicians. We've also seen a decrease in negative interactions in the workplace as we continue our work to build a culture of mutual respect. The Unit-Based Teams initiative is spreading, and we will be giving more attention to the growth of this quality improvement program that provides team members with ownership over improvements and results in their respective areas.

Increase engagement  
score response rate

47.9%  
Target

44.9%  
Current

Increase engagement  
score results

62.4%  
Target

65.9%  
Current

### Initiatives

- **Unit-Based Teams:** Establish unit-based teams to develop the ability of staff, physicians and leaders to undertake improvement action in their respective work areas.
- **Healthy Teams:** Build a culture of mutual respect by decreasing reports of negative interactions in the workplace.
- **Leadership Development:** Develop our emerging and experienced leaders.



From left: Nurse Educator Suzette Mahabeer, Program Director Nancy Fletcher, Charge Nurse Cristina Gomes and Jocelyn Dooley, a former nurse educator who now manages Unit 5B at the St. Catharines Site, have all been instrumental in successfully implementing We Round.



## Extraordinary Future

Investing in the future of healthcare through our people, equipment and technology ensures the work we are doing today to improve the quality and safety of healthcare for our patients and families is sustainable into the future. We are working with our community to create a well-balanced efficient healthcare system that serves the entire region. Initiatives like Be Well aimed at preventing workplace injuries and illness are proving to create a safer and more fulfilling workplace for our teams.

Fiscally sustainable plan that supports investments in education, technology and capital

0.64%  
Target

3.27%  
Current



## Extraordinary Innovation

Ensuring a smooth transition between hospital and community care for our patients requires innovative approaches to healthcare and effective communication. Partnering in the community to keep people healthier, get better, or cope with disease or end of life requires collaboration outside of the hospital. The Integrated Comprehensive Care (ICC) model supports patients to manage symptoms at home and avoid Emergency Department visits or long hospital stays. Patients and their families have shared they are less frustrated and have voiced increased satisfaction with services. The early success of our program has led to its expansion to include Mental Health and Addictions Program.

4 innovative models of care in operation

100%  
Target

59.4%  
Current

## Initiative

- **Be Well:** Identify and implement prevention initiatives to keep people healthy and safe at work.

## Initiative

- **Integrated Comprehensive Care:** for patients who have Congestive Heart Failure and Chronic Obstructive Pulmonary Disease.



# 08 EXTRAORDINARY YEAR

We've had much to celebrate over the past year and we're pleased to share some of our proud moments with you.

## Medical learners at Niagara Health

As a learning organization, we have strong partnerships with our academic partners, including the Niagara Regional Campus of McMaster University's Michael G. DeGroote School of Medicine. Medical students work alongside and learn from our healthcare teams. Dr. Han-Oh Chung, Niagara Health's Academic Lead, says: "It's a privilege to be involved in supporting, mentoring and the growth of future physicians. By shaping care through teaching and education, it helps us provide better care for the community, and it's a good thing for patients."

Dr. Han-Oh Chung is Niagara Health's Academic Lead.

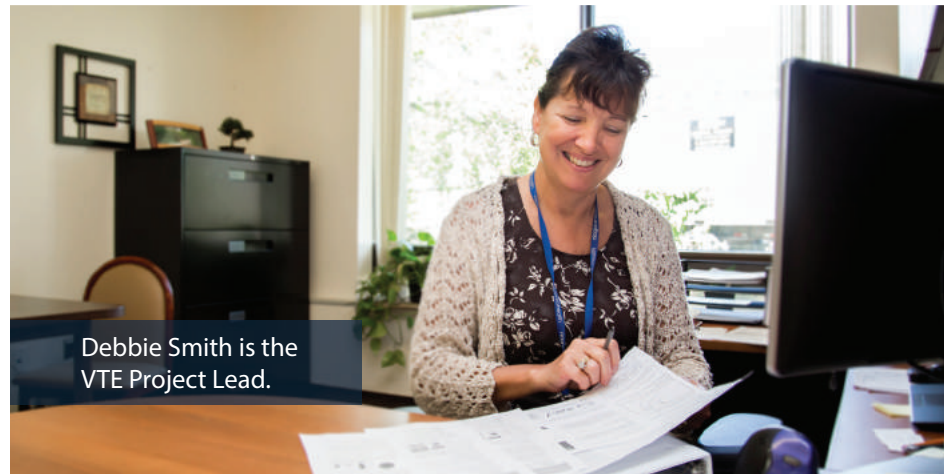


## Extraordinary U

We launched Extraordinary U, the Niagara Health Leadership Institute that offers developmental opportunities for our leaders. The program fosters an environment where leaders can acquire knowledge and skills to empower our people to create A Healthier Niagara. Extraordinary U equips our leaders with the knowledge they need to transform the future of healthcare and provide extraordinary caring. Among topics covered so far in courses offered: critical thinking, human dynamics of change and workplace mental health. Our leaders can also participate in courses offered as part of new partnerships with Hamilton Health Sciences and Niagara Region.



Lisa Harnett-Conners, Food Services Supervisor, Kathy Alexander, Manager Financial Operations and Capital and Jeff Wilson, Director of ICT Operations have all benefitted from Extraordinary U.



Debbie Smith is the VTE Project Lead.

## National patient safety award

Our Venous Thromboembolism (VTE) program received the Excellence in Patient Safety Award by the Canadian College of Health Leaders last June. VTE, the formation of blood clots in the vein, is one of the most common complications of hospitalization. The program focuses on improving daily risk assessment processes for every admitted patient, and starting preventative treatment, if needed.

## Acts of Kindness

Our Acts of Kindness Workplace Challenge is spreading. The idea for the challenge was generated by our Information and Communications Technology team after the launch of our workplace Be Kind Campaign last summer. The department decided to perform 1,000 acts of kindness to encourage our culture of kindness and connect the team to care. Since then, 15 departments have participated in the challenge, performing thousands of acts of kindness in the hospital and in the community.



From left: Manager Jennifer Ricker-Bonin, Lisette Bisson and Sandy Holmes of the Environmental Services team at our Welland Site participated in the Workplace Acts of Kindness Challenge.

# 10 HONOURING EXCELLENCE

Niagara Health Awards of Excellence recognize extraordinary individuals within our organization who are living our Purpose, Vision and Values. In addition to the President's Award, which recognizes overall extraordinary performance, seven additional awards were presented to valued members of the Niagara Health team. All peer nominations were inspiring!



## President's Award: Extraordinary Performance

**Don Versluis** | St. Catharines Site  
Nurse Practitioner

Don demonstrates an unwavering commitment to our patients and families. Don supports our patients and their loved ones through the Medical Assistance in Dying process, and shares his knowledge and experience with others. Don is thoughtful and compassionate, putting our patients and their loved ones at ease during one of the most difficult times in their lives.

## Compassion in Action Awards



**Angela Dueck** | St. Catharines Site  
Physiotherapist

Angela is a compassionate and highly skilled physiotherapist whose dedication to her patients, their loved ones and colleagues goes beyond words. Angela cared for a patient requiring rehabilitation therapy following a tragic accident. Angela worked with the patient's family, making arrangements on her personal time for her patient to attend his wife's funeral despite many challenges.



**Doris Frost** | Welland Site  
Ward Clerk, Inpatient Medical

Doris is a role model for new staff and the entire team as to what compassion in action is all about. She came up with the idea of placing a magnetic butterfly on the door of each palliative patient's room and dimming the lights when the patient passes away, so that everyone on the floor can support the family during this difficult time.



## Driven by Optimism Award



**Sherri Lemon** | St. Catharines Site  
Volunteer Resources Coordinator

Sherri puts her whole heart into everything she does. If there is a new volunteer program that benefits our patients, Sherri is on it, doing whatever it takes to make sure it's a success. From fidget aprons for dementia patients to the Patient Visiting Program, Sherri approaches everything from a "how-much-can-I-do" perspective.

## Extraordinary Caring Award



**Derek Sands** | St. Catharines Site  
Personal Support Worker, Patient Transport

Derek puts the well-being of others first and shows tremendous compassion for everyone around him. Whether it's offering patients a warm blanket, bringing them water, escorting a family member from the waiting room or getting a wheelchair to discharge a patient home, he is always there to help with a smile on his face.

## Extraordinary Team Award

### **Three Wishes Program** | St. Catharines Site Intensive Care Unit (ICU)

The multidisciplinary ICU team decided to bring the Three Wishes program to Niagara as a way to personalize end-of-life care. Patients and their loved ones who make the decision to have their ICU care withdrawn are encouraged to let staff know what would help provide comfort through this journey. The team makes these wishes come true, and recognizes how important small moments are within the big picture of care.



## Achieving Ambitious Results Award



**Dr. Radhika Yelamanchili** | St. Catharines Site  
Outpatient Oncology

Dr. Yelamanchili leads by example, inspiring those around her through her strong work ethic and commitment to her patients. She practices whole person care, such as coaching patients through anxiety and life challenges. She inspires the people around her to work harder, learn more and do more for our patients.

## Extraordinary Future through Innovation Award



**Krita Teeluckdharry** | St. Catharines Site  
Manager, Biomedical Engineering

After only one year in his role, Krita created a workplace where innovative ideas quickly become a reality. His determination is leading the department through a second Peer Review - an audit of the preventative maintenance program - by the Canadian Medical and Biological Engineering Society. Only a handful of hospitals in Canada have received this distinction as a Best Practice Biomedical Engineering Department.

# 12 FINANCIAL OVERVIEW

Niagara Health publishes our audited financial statements every year as part of our financial accountability and responsibility to the community. Complete financial statements for 2017/2018 are posted on the Niagara Health website at [www.niagarahealth.on.ca](http://www.niagarahealth.on.ca).

Our financial health continues to improve thanks to the work of our teams. Our total operating budget for the year was more than \$500 million and we ended the year with a surplus of \$12,854,500. The surplus will be reinvested to improve our working capital position.



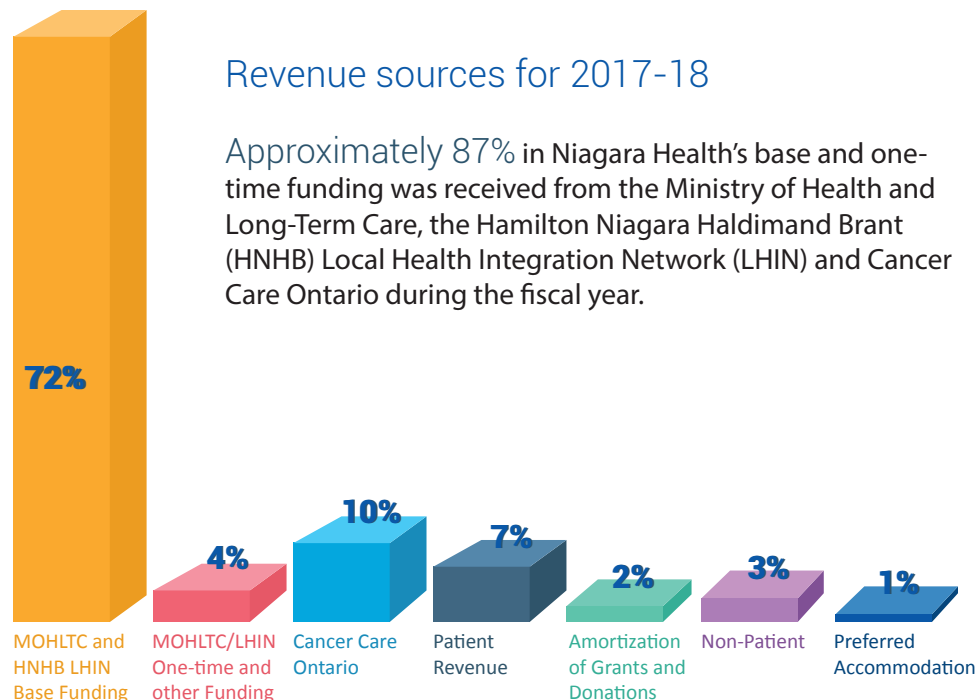
Thanks to the generosity of Niagara Health Foundation donors, \$2.2 million was raised for the replacement and enhancement of Medical Imaging equipment across all sites of Niagara Health. With up-to-date Medical Imaging equipment, Niagara Health can provide patients with more accurate images, faster treatment decisions and better outcomes. Technologist Sonia Leggett and patient Sandra are shown with one of the upgraded X-Ray units at the Welland Site.

## How Can You Help?

Did you know you can support Niagara Health programs and services through a donation to Niagara Health Foundation? Niagara Health Foundation fundraises exclusively for Niagara Health, to support priority equipment needs, redevelopment projects and patient programs not funded by the government. To learn more about how you can support a healthier Niagara, visit [www.NiagaraHealthFoundation.com](http://www.NiagaraHealthFoundation.com) or call 905-323-FUND.

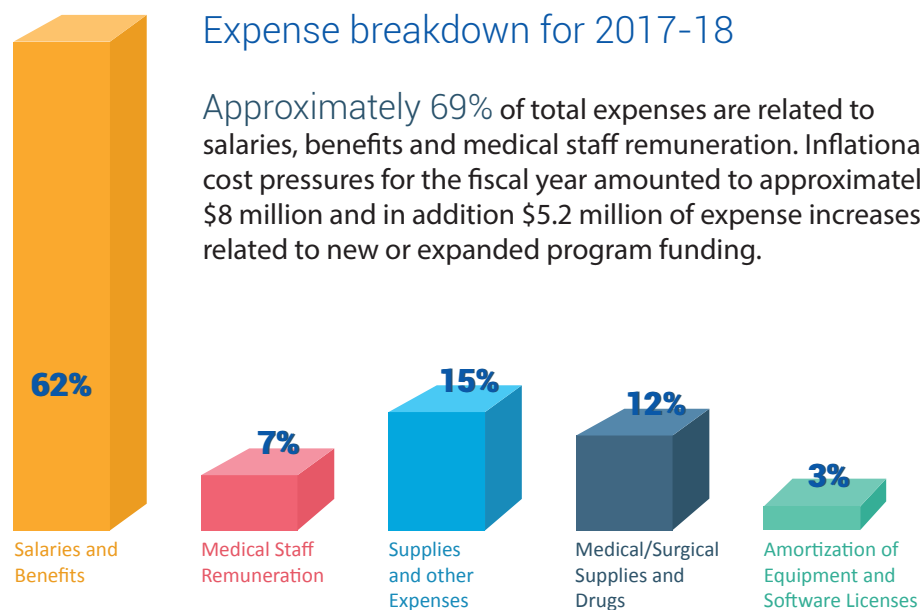
## Revenue sources for 2017-18

Approximately 87% in Niagara Health's base and one-time funding was received from the Ministry of Health and Long-Term Care, the Hamilton Niagara Haldimand Brant (HNHB) Local Health Integration Network (LHIN) and Cancer Care Ontario during the fiscal year.



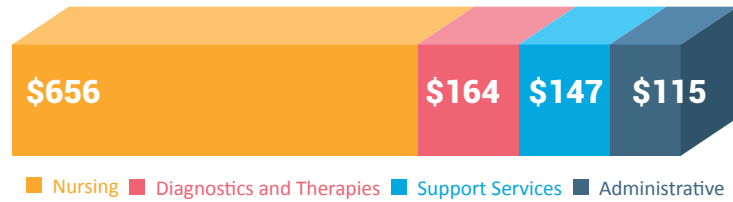
## Expense breakdown for 2017-18

Approximately 69% of total expenses are related to salaries, benefits and medical staff remuneration. Inflationary cost pressures for the fiscal year amounted to approximately \$8 million and in addition \$5.2 million of expense increases related to new or expanded program funding.





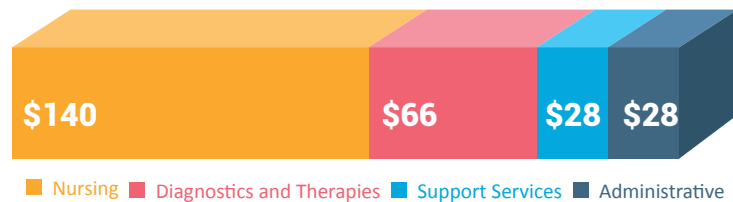
Average inpatient cost per day: \$1,083



Approximately 79% of expenses are related to direct patient care like nursing, pharmacy, diagnostic imaging, laboratory and therapies.

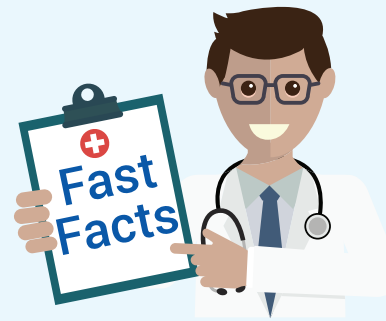
An additional 11% is related to support services like housekeeping, food and maintenance. The remaining 10% is for administrative costs.

Average emergency visit: \$261



79% of expenses are related to direct patient care like nursing, pharmacy, diagnostic imaging, laboratory and therapies.

An additional 11% is related to support services like housekeeping, food and maintenance. The remaining 10% is for administrative costs.



## IN-PATIENT

949  
Beds

34,846  
Admissions

## SURGICAL CASES

7,766  
Inpatient

31,467  
Outpatient

\* Includes Acute, Complex Care, Long-Term Care, Mental Health and Addictions.



## VISITS

199,997  
Emergency  
and Urgent Care

68,082  
Dialysis/Renal  
Clinics

38,848  
Mental Health  
Clinics

179,608  
Other Outpatient  
Clinics

## CARE BY NUMBERS

2,898  
Babies Born

24,410  
MRI Scans

5,701  
Cataract  
Surgeries

2,487  
Heart Investigation  
Unit Procedures



# 14 BOARD, SENIOR & MEDICAL LEADERSHIP

## Board of Directors 2017/2018

**Mr. John MacDonald**  
Board Chair

**Mr. John Bragagnolo**  
Board Vice-Chair  
and Governance Chair

**Mr. Ken Kawall**  
Resources and Audit Chair

**Ms. Bernice (Bunny) Alexander**  
Governance Vice-Chair

**Mr. Larry Boggio**  
Quality Chair

**Ms. Marti Jurmain**  
Quality Vice-Chair

**Dr. Ron Mergl**

**Mr. Murray Paton**

**Mr. Robert Tiffin**

**Mr. Charles Rate**

**Ms. Cathy Sutherland**  
Resources and Audit Vice-Chair

**Dr. Barry Wright**

Dr. Suzanne Johnston (ex officio)

Dr. Tom Stewart (ex officio)

Dr. Parminder Brar (ex officio)

Mr. Derek McNally (ex officio)

## Senior Executive Team

**Dr. David Higgins**  
Interim Chief Executive Officer

**Dr. Suzanne Johnston**  
President

**Ms. Linda Boich**  
Executive Vice President, Quality,  
Community Development  
and Mental Health and Addictions

**Mr. Derek McNally**  
Executive Vice President, Clinical  
Services and Chief Nursing Officer

**Ms. Flo Paladino**  
Executive Vice President, People &  
Organizational Development

**Dr. Tom Stewart**  
Chief of Staff and Executive Vice  
President, Medical Affairs

**Dr. Johan Viljoen**  
Deputy Chief of Staff

**Ms. Caroline Bourque Wiley**  
Director of Communications

**Ms. Angela Zangari**  
Executive Vice President, Finance &  
Operations and Chief Financial Officer

**Mr. Roger Ali**  
President and CEO, Niagara Health  
Foundation

## Medical Advisory Committee

Reporting to the Board of Directors, this committee oversees quality patient care. Physician members are:

**Chair:** Dr. Tom Stewart

### Department Chiefs:

**Medicine:** Dr. Terry Chan

**Surgery:** Dr. Jeff Cranford

**Diagnostic Imaging:** Dr. Julian Dobranowski

**Anesthesia:** Dr. Donald DuVall

**Oncology:** Dr. Janice Giesbrecht

**Laboratory Medicine:** Dr. Suhas Joshi

**Mental Health and Addictions:** Dr. Amin Muhammad (Interim)

**Pediatrics:** Dr. Madan Roy

**Emergency Medicine:** Dr. Rafi Setrak

**Obstetrics/Gynecology:** Dr. Johan Viljoen

### Medical Staff Association

**President:** Dr. Parminder Brar

**Vice President:** Dr. Gurpreet Gill

**Secretary/Treasurer:** Dr. Maynard Luterman

### Additional members (Non-voting members)

**Chief of Staff, Hotel Dieu Shaver Health and Rehabilitation Centre:**  
Dr. Jack Luce

**Chair of Credentialing:** Dr. Sven Pallie





Recreation Therapist Cindy Pinelli  
with patient Lois Bailey at our  
Port Colborne Site.





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