

*Recognized for providing exemplary care, making your health care our priority.*

## Serving Our Local Communities

We are responding to the needs of our communities, keeping pace with new programs and clinical innovations.

Here are the results:

### HOSPITAL

#### SURGICAL CASES

Inpatients	63
Outpatients	2012
Colonoscopies	1100

#### AMBULATORY CARE VISITS

Diabetes Clinic Visits	831
Medical Day Program	425
Geriatric Emergency Medicine Patients	141
Nutrition Consultation	624
Outpatient Clinic Visits	8705
Pediatric Speech	210
Telemedicine	364
Urotherapy	370

#### ER VISITS

18105

#### PHYSICAL THERAPY

Inpatients	2617
Outpatient	1716

#### DIAGNOSTIC IMAGING

Bone Density	623
Mammography	622
Ontario Breast Screening Program	1365
Ultrasound	4657
X-ray	11041

#### CARDIOLOGY

Pulmonary Function Test	390
Electrocardiography (ECG)	5097
Stress Test	476
Echocardiogram	877

#### GROVE NURSING HOME

Grove Resident Days	21696
Adult Day Program visits	2061
Respite Residence days	227

#### ASSISTED LIVING SERVICES

Number of Clients	16
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## Letter from CEO and Chair of the Board

### The Patient, Resident and Client Experience

The vision of Arnprior Regional Health (ARH) is "to be recognized for exemplary care" and to this end we spent the past year focusing on improving the experience of the patient, resident and client. Using externally administered surveys, ARH tracked only scores of excellence (5 out of 5) and excluded scores of very good (4 out of 5). In each of our core services – hospital, nursing home and assisted living services – the Board of Directors set goals for 2012/13 for the percentage of respondents who would rate their care as being excellent. We tracked the results all year to ensure our process improvements yielded a better patient experience. The year end results are outstanding!

	Goal Rating Care as Excellent	Year End Results Rating Care as Excellent
Hospital (ER and Inpatient)	50%	56%
Grove	34%	58%
Assisted Living Services	35%	70%

To achieve these results Arnprior Regional Health adopted a number of strategies and best practices known to impact the experience of the patients, residents, and clients. For example, at the hospital our Patient Flow Coordinator makes a post discharge phone call to patients and asks, "What went well, and what could we do better?" All results, both good and bad, are then passed along to members of the care team. This sharing of information enables us to recognize individuals for service excellence and also to action items for care or service improvement.

It wasn't just the survey results that provided guidance for improvement. ARH also collected information and feedback from many other sources, such as ADMH Patient Family Advisory Council, Grove Family Council, Community Ambassador Breakfasts, Nurse Leader Rounding, and community engagement. All were consulted as part of our strategic planning exercise. Arnprior Regional Health is most proud of our commitment to provide a great patient, resident and client experience, and we will continue to make continuous improvements with respect to the experience of those requiring our care.



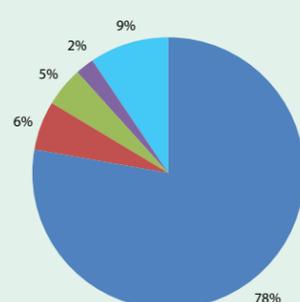
Eric Hanna  
President and CEO



Jay Johnston  
Chair of the Board

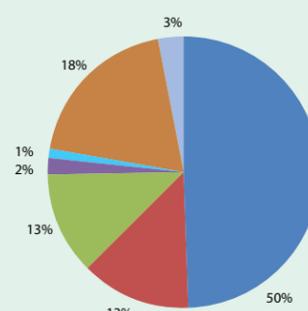
## BY THE NUMBERS

### Arnprior Regional Health Results of Operation Total Revenue: \$23,889,000



- Ministry of Health
- Outpatient
- Co-payment
- Preferred Accomodation
- Other

### Arnprior Regional Health Results of Operation Total Expense: \$23,853,000



- Salaries and Wages
- Benefits
- Medical Staff Remuneration
- M & S Supplies
- Drugs
- Other
- Equipment Depreciation

For more information about ARH

## Assisted Living Services Program

**Ray and Margaret Gauthier** moved to Arnprior two years ago. Married for 53 years, they easily finish each other sentences. In the last few years they've had some health concerns. This led to a period of time where they were unable to live together as there was no option to live at home while receiving care.

Now personal support workers (PSW) visit clients, like Margaret, in their homes to assist with personal care, meal preparation, medication management and light housekeeping, as well providing other services and supports that allow seniors to remain in their own homes. The initial funding received in 2012 from the Champlain LHIN was for 10 clients, 24 hours a day, seven days a week.

Ray and Margaret are grateful for this program, "Living in our home is what we want. The ladies who come to see us have been helping Margaret with her physiotherapy on her arm. On a scale of 1 to 5 with 5 being excellent, these girls are a 5 plus. They help her with her shower and help us change the beds, they make us food, they get Margaret walking, we just really can't ask for better."



Kathleen Nunn coordinates this program through her office at the Grove and has been pleased with the success. "We have a viable option to offer seniors that supports them in their desire to stay at home. Some clients are visited multiple times every day, while others like the Gauthier's receive care three times a week. Clients determine their care requirements in collaboration with us. We also work closely with other services, such as Meals on Wheels and programs offered through Arnprior Braeside McNab Seniors at Home and the CCAC."

In November 2012, the Champlain LHIN approved funding for an additional 10 clients based upon community needs and the success of the program during the first year. ■

## The Adult Day Program

Celebrating 10 years!

The United Way of Renfrew County and the Grove Nursing Home have had a working relationship for more than ten years.. In 2002, the United Way of Renfrew County agreed to provide funding to the Adult Day Program at the Grove, and they have continued to provide funding to the program on an annual basis. The Adult Day Program began as an initiative designed, and run, by volunteers. Over the years the program expanded and hired staff to facilitate the program. The main focus is to offer social interaction, mental stimulation and physical activities for clients with the early stages of Alzheimer's and Dementia. In addition, clients are able to enjoy a hot nutritious meal. The program also provides respite and an informal support network for care givers.

"The Day Program has benefited our entire family. I can go to work and have peace of mind knowing he is safe and that experienced staff members are taking care of him. He feels involved and is happy to attend. It gives him the opportunity to socialize and feels like he is part of the community".

Vicki, family member of a participant.

Over the last few years, the program has expanded to accommodate more individuals from our community. Today, ten years since inception, the Adult Day Program is offered three days per week with more than 23 clients and families benefiting. ■

## Meals on Wheels Partnership

**Arnprior Regional Health** was awarded the opportunity to be the provider of meals for the Meals on Wheels program operated by Arnprior Braeside McNab Seniors at Home.

The need for residents of our community to have a Hot Meals on Wheels Program is necessary in order to assist our elderly and disabled community members to remain in their homes. Having a hot meal delivered several times a week improves quality of life for residents living at home with limitations. It not only provides a nourishing meal, but also allows for some social interaction with the delivery volunteer as they drop off the meal and it is another check in with someone who cares. "The program saved my life", said Bev Bourne. "I didn't even have enough energy to make a

bowl of soup when I got out of the hospital. I looked forward to the hot bowl of soup each day. I would recommend them to anyone" stated Mrs. Bourne.

This program is currently averaging 40 delivered meals per week. This is a great community partnership for both ARH and Arnprior Braeside McNab Seniors at Home Program, both of which have a common mission to assist those in need in our community. We are able to meet the needs of our clients by offering a three week menu cycle and are also able to meet any therapeutic dietary requirements. The meals are made at the Grove Nursing Home kitchen, where the staff is well aware of the specific needs of the elderly. ■

## Golden retriever, Radar, entertains day program participants



## Auxiliary - Year in Review



The Auxiliary to Arnprior Regional Health once again had a busy year. The year started by hosting the Regional Conference for Ontario East. Auxiliary fundraising efforts contributed \$100,000 towards the digital mammography unit and an additional \$25,000 for the Grove for equipment. For two weeks the Opportunity Shop closed to allow for renovations resulting in a brighter and more spacious store. Total sales at the Opportunity Shop were just shy of \$150,000! Over 18,925 volunteer hours were spent assisting patients, residents or clients at ADMH, or the Grove, supporting the Gift Shop and the Opportunity Shop, as well as participating in the sewing program or the HELPP Lottery. ■



visit [www.ArnpriorRegionalHealth.ca](http://www.ArnpriorRegionalHealth.ca)

## Chief of Staff Report to the Community

Dr. Christine Schriver

I would like to take this opportunity to report on some of the improvements pertaining to quality of patient care implemented over the past year.

Over the last year, we have seen the fall rates of patients admitted at the hospital decline. In April 2012, the fall rate was 8.77 per 1000 patient days. By March 31, 2013 we had reduced the number to 6.26 falls per 1000 patient days. Much work has gone into the training of nursing staff according to the recently completed falls prevention program. They have been trained on early identification of patient at risk of falling, using fewer restraints, decreasing specific medications known to influence falls, and having increased vigilance around patients who are at a higher fall risk. The introduction of a new "Fall Risks Assessment Tool" ensures an initial assessment of all patients who might be at risk of a fall are assessed very early on in their hospital stay. Currently, this is being completed on 100 percent of our patients. The falls prevention program involves all staff and was truly a cooperative team project working with other members of our team such as physicians and physiotherapists.



Hand hygiene compliance has improved amongst all staff. We continue to audit on a monthly basis all staff's hand hygiene practices and we are happy to report that our compliance is currently at 98%. Our rate now exceeds the provincial average of 85.6%. Thanks to all staff for making this a priority to help prevent the transmission of hospital acquired infections.

Chronic obstructive pulmonary disease (COPD) has a high re-admission rate for our patients due to the nature of the disease. There has been increased focus on patient education, in collaboration with the Family Health Team (FHT) and the ARH COPD working group. A big factor for patients doing less well at home has been improper use of inhalers which can lead to re-admission. We are now demonstrating to patients how to appropriately take their inhaled medications in addition to enhanced teaching during admissions. ARH has introduced a new program where interested patients can follow up with a health care professional at the FHT for ongoing education and support. In addition, patients are now sent home with specific written "action plans" and pre-booked appointments with their family doctors.

These are just a few of the quality improvements we have implemented that have seen our goals either met or exceeded over the past year. ■

## Cardiac Rehab



### In 2012, Arnprior Regional Health added The Cardiac Rehabilitation Program

to our clinical services through our Ontario Telemedicine Network (OTN). As an OTN site, ARH is set up for videoconferencing using a private and secure Internet connection and have been offering tele dermatology, telepsychiatry, telenephrology and teleendocrinology.

The Cardiac Rehabilitation Program is administered by The University of Ottawa Heart Institute (UOHI) and serves Eastern Ontario. Fourteen sites, including ARH, offer this program to patients living throughout the region to benefit from comprehensive risk factor management and secondary prevention, in the form of cardiac rehabilitation.

Patients returning home following a cardiac episode were not always making their follow up appointments. They were overwhelmed with the amount of information they received in hospital and often forgot about the cardiac rehabilitation package. If they did remember about the program they were required to fill in a questionnaire and mail it to the UOHI before the cardiac rehab process could even begin. This process captured only 27% of cardiac rehab patients.

In addition to the paperwork hurdle, many patients also expressed doubt that they would be able to attend in person. There were many reasons why people couldn't get to their follow up appointments: their age, lack of access to a vehicle, difficulties with traveling and parking, or not wanting to burden their family members.

To encourage more people to attend cardiac rehab, some changes were implemented. Patients were pre-booked for assessment appointments before leaving the UOHI and their information was given to their regional hospital (ARH). The telemedicine coordinator (TMC) at the regional hospital would then call the patient. This call would remind the patient they were referred, help them fill out their questionnaire, and explain the cardiac rehabilitation process. The TMC further assists the patient when they come to ARH for subsequent visits.

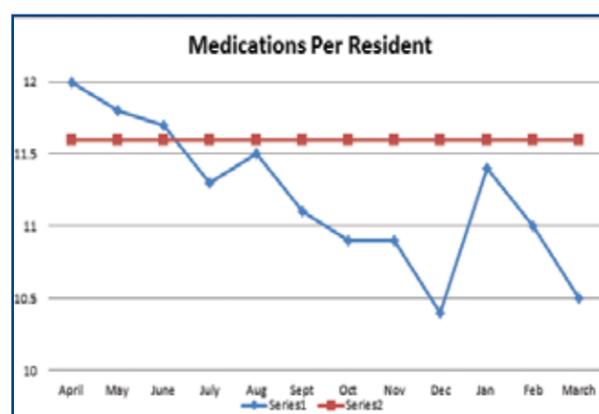
In December 2012 the first patient for the Cardiac Rehab Program came to their booked appointment at ARH and consulted through videoconferencing with a member of the UOHI cardiac rehab staff. The UOHI are now seeing 70% of people make their follow up appointments. ■

## Medication Management at the Grove

Over the past year at the Grove we undertook an initiative to reduce the number of medications each resident was taking. This began in the interest in overall health of the residents, and in response to benchmark data indicating our residents had a slightly higher use of scheduled and prn (as needed) medications compared to other long-term care facilities. We began our initiative by focusing on antipsychotic medications, because of their side effect profile in this demographic of the population. Antipsychotics can contribute to falls in the elderly, while also increasing the risk of stroke and sometimes death. Behaviors of dementia wax and wane and, therefore, antipsychotic medication should be reviewed on a regular basis. Antipsychotics are appropriately prescribed in long-term care for behaviors such as exit seeking, aggression towards other residents and also aggression towards staff trying to administer care. Antipsychotic medications cannot be stopped suddenly; they must be tapered.

A clinical team at the Grove including our pharmacist from Medisystem developed an action plan. Staff and physicians were all made aware of our initiative. Dr. Villis and Jacqueline, our pharmacist, targeted residents with stable behaviors for several months and began to try and reduce their antipsychotics. Nursing staff were responsible for monitoring changes in residents' behaviors. Weekly informal meetings were held to discuss progress and track results. It is a very slow process as we could only reduce medications on several patients at a time.

In the meantime our pharmacist while doing medication reviews of the charts targeted external medications residents were using as well as the drugs classified "as needed" (i.e. Tylenol) that had not been used in some time and made recommendations based on their usage. At the beginning of this quality improvement initiative, medications were 12.6 per resident. They are now 10.5 per resident. Providing residents of the Grove with excellent care doesn't end here. While antipsychotics are continually being reviewed, other medications also continue to be reviewed to ensure residents are receiving the highest quality of care in a safe environment. Weekly visits from the Medisystem pharmacist will continue to help keep track of our residents' medication and health issues. Continued vigilance and communication regarding our quality improvement initiatives is key to achieving our vision of being recognized for exemplary care. ■



## Thank You

A huge thank you to board members who completed their terms this past year: JoAnne McLean, Dana Dingman, Sue How, and Ted Kelly. We are always looking for other community minded individuals to join us. Please contact the PIC office for more information.



# Keeping Health Care Talent at ARH

## Partners in Caring had a fantastic year.

Through the support of the community over **\$400,000** was raised to purchase a digital mammography unit. This piece of equipment uses digital direct radiography (DR) and is the most effective equipment to screen for breast cancer.



**Mardi Bras** celebrated its second year. This ladies night, held in September, is organized by representatives from CIBC, RBC, Scotiabank, Northern Credit Union, TD Bank, and the Co-operators Insurance. This event was the initiative of former PIC Board Member Joanne McLean and to date has raised over **\$40,000**.



**The Christmas Tree Lighting**, typically held the first Friday in December, raised **\$31,000** towards the purchase of a scope used in the operating room. Members of the community purchased a light in honor of staff members at ARH or in memory of a loved one. It is the donations of members

of the community that allow Partners in Caring to fund the needs of Arnprior Regional Health, both at the hospital and the Grove. Thank you for your ongoing support.



**R**etaining our top talent and recruiting much needed health care professionals to meet the needs of our community is of much importance to Arnprior Regional Health. Two years ago, with funding from Partners in Caring, a bursary program was launched.

Amanda Lushman was one of the first staff members to apply. Amanda began her career at Arnprior Regional Health in 2008 as a Registered Practical Nurse on the inpatient floor at ADMH. A transplant from Newfoundland, Amanda and her husband settled here in Arnprior knowing that a small town would be a great place for raising their children. Amanda also longed to go back to school in order to become a Registered Nurse.

“The transition to Arnprior was quite easy as the hospitality and warm friendly presence of the Ottawa Valley was similar to my home province of Newfoundland. The moment I started working at Arnprior Regional Health, I felt like I worked there for years, the staff were so friendly and inviting and soon became my family away from home. ARH has provided me with so many opportunities to advance my profession as a nurse. The experience I have obtained over the years has been phenomenal. With the help and support of ARH I have been able to continue my education in obtaining my bachelor degree in nursing.

ARH has a partnership with Nipissing University which enables me to complete my clinicals at the hospital and complete my courses through distance learning. The bursary program has certainly given me a good head start financially on pursuing my degree and the motivation to keep going. Raising a family, working full time and school has been a real challenge. Through the support the Partners in Caring bursary program, pursuing my goals has been much smoother. I look forward to working in my new home town for many more years”



## Thank you, thank you, thank you!

