



# PERFORMANCE Report 2002-2003



## Our Mission

Patient Care is our primary focus at Thunder Bay Regional Hospital. We strive to provide excellent general and special acute healthcare through a coordinated and comprehensive network of service providers.

Thunder Bay Regional Hospital



## Improvements in Patient Care

In 2002, TBRH was designated as the Regional Stroke Centre for Northwestern Ontario. The Hospital successfully recruited an experienced neurologist, Dr. D. Howse, as Medical Director who was instrumental in the development of one of the original pilot stroke programs in Kingston. A Regional Stroke Steering Committee has been established to provide guidance to the program in its region-wide implementation.

Thanks to a grant from AstraZeneca Pharmaceutical company, TBRH, in partnership with the Lung Association, AstraZeneca and various health professionals, were able to develop a specialized Asthma Clinic to improve lung health in our community. The clinic opened as a pilot project in January 2003, to assist individuals to better manage their own health and decrease the frequency of hospitalization, emergency room visits, unscheduled visits to physicians, days off school/work and exacerbation of asthma symptoms.

TBRH has been designated as one of 13 hospitals provincially to participate in the establishment and maintenance of a regional organ donation program. An in-hospital donation coordinator will work with our health team to foster and sustain a culture that facilitates informed choice about donation as part of quality end of life care. It is our hope that we will enhance public and professional awareness of organ/tissue donation as a life-affirming act of generosity that each one of us should think about and discuss with our loved ones.

**Thunder Bay Regional Hospital  
welcomes responses to the 2002/2003 Performance Report**

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## PERFORMANCE REPORT 2002 - 2003

### Our Vision

Thunder Bay Regional Hospital will be an outstanding treatment, educational, research and referral centre for acute healthcare services in Northwestern Ontario. We will be a key part of effective and integrated healthcare which will be responsive to the people we serve.

### Improvements in Patient Care - continued

In October 2002, the Hospital implemented a Wound Management program. The program, supported by Convatec Inc. involves the use of standardized wound care products, intense education for a core group of resource nurses, and a basic orientation to wound and skin care for all nurses. Two staff are also pursuing specialization in wound and ostomy care supported by the Hospital and the Registered Nurses Association of Ontario. Hospitals that have implemented similar programs have reported improved patient outcomes, reduced lengths of stay and reduced supplies expenditures.

The current CT turnaround times are of concern to physicians, patients, staff and management alike. It is recognized that waiting for access to a CT or its results has a significant impact on patient care. As access to this diagnostic modality is a priority, it was identified that creative means of expanding CT hours must be pursued within our existing budget. A proposal was developed by the Diagnostic Imaging department to provide for an additional 3 evenings per week of CT time effective October 15, 2002, funded by revenues gained in by expanded ultrasound and X-ray examinations. Already the additional evening shifts have had a dramatic impact on both urgent inpatient and elective outpatient turnaround times.

Pressure continues to be felt in our Emergency Department with the rise in the number of in-patients waiting for beds. We are working both internally and with the Ministry of Health to identify and manage the escalating numbers of both in-patients and alternate level of care patients occupying acute care beds. A flexible overflow, bed-management plan has been initiated as a temporary measure to accommodate for seasonal peaks in census.



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## Our Values

- We are committed to
- Service based on compassion and respect
  - Our staff, physicians and volunteers
  - The dignity of the individual
  - Life-long learning
  - The wise and effective use of resources
  - An environment that encourages innovative thinking
  - Honesty and openness as prerequisites to our team building and performance

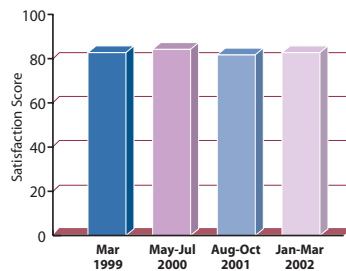
## Patient Satisfaction

Over the past year we have continued to evaluate how satisfied patients and families are with the health care they receive at Thunder Bay Regional Hospital. We recently initiated monthly surveys of Inpatients and Emergency patients. Timely surveying along with feedback from focus groups and 'customer comment' cards provides valuable information on how well we meet patient needs.

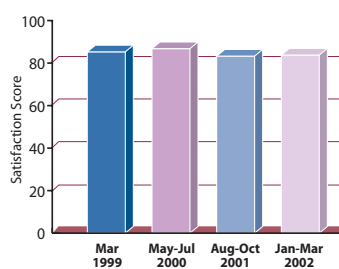
In the near future we will begin to survey individuals receiving outpatient services, an important dimension. All of the information allows us to focus our improvement activities on areas that interest patients most. The Care and System Teams use patient satisfaction data as a tool to monitor and improve the quality of patient care. Some of the many improvement initiatives underway include the development and implementation of clinical pathways, the development of clinical guidelines, the implementation of process changes designed to improve turnaround and wait times, and the expansion of strategies to ensure patient safety.

Another area of focus is customer service. Over the past year we have taken steps to enhance customer service skills. Our Code of Conduct articulates how we will interact with patients and peers while workshops on Excellent Customer Service endorse higher standards for interpersonal interactions.

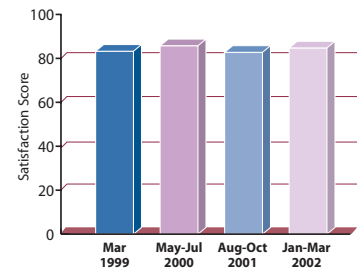
In-Patient Satisfaction with Global Quality



Satisfaction with Nursing



Satisfaction with Physicians



## PERFORMANCE REPORT 2002 - 2003

### Walk the Talk - Demonstrates Leadership

Four years ago, the Walk the Talk Awards were established to recognize leaders, individuals and teams who demonstrate excellence through their work at Thunder Bay Regional Hospital. Through the years, every nomination for the Walk the Talk Awards and Medical Staff Awards of Excellence has provided an inspiring description of committed, positive role models. Congratulations are extended to all of the nominees for the 2003 Walk the Talk Awards and Medical Staff Awards of Excellence.

The 2003 Leadership Award recipient is Margaret Bananish, also recognized with an Individual Award along with Lisa Beck, Deborah Broll, Cathy Covino, Jim Hyder, and Cindy Oda.

The Housekeeping Department is the recipient of the Team Award while Beverly Carter, Gussie (Agnes) Ward, Marion Babcock and Carol Coulson were selected as Volunteer Award recipients.

This was the second year that Thunder Bay Regional Hospital recognized excellence in the area of courtesy. Recipients include Joe Cuglietta, Jeff Glavish, and Cindy Oda.

Medical Staff Awards of Excellence were presented to Dr. Ian Dobson, Dr. Kenneth Gehman, and Dr. Bruce Pynn.

Congratulations to Pat Piaskowski and Dr. G. Gamble on receiving the President's Award of Excellence. This award is presented to deserving individuals on the recommendation of the President. Pat and Dr. Gamble were chosen for their exceptional leadership and guidance in managing the Infection Prevention and Control program during such challenging times.



Port Arthur Site



McKellar Site

## PERFORMANCE REPORT 2002 - 2003

### Infection Prevention and Control

In December 2002, TBRH experienced an outbreak of Norwalk, more commonly known as “winter vomiting disease.” Norwalk is highly contagious; during the course of the outbreak, 42 patients and 70 staff were symptomatic. This led to the closure of 6 inpatient-nursing units over a 2-week period. With strict infection control measures implemented during that time, the Hospital was able to maintain essential services.

Most recently, in March 2003, Southern Ontario was faced with emergence of a new infectious disease called Severe Acute Respiratory Syndrome (SARS). The response to this disease included province-wide directives on strict screening for hospital entry; protocols for transferring patients between hospitals; high-level precautions for caregivers caring for SARS cases; and restrictions on visitors. While the Province has relaxed many of the original directives, hospitals are now in the process of implementing what is known as the “new-normal” for health care facilities.

### Foundation Recognizes Partnerships

Thunder Bay Regional Hospital Foundation is pleased to recognize the partnership of our community and region in assisting us with the building and equipping of our new Hospital. These individuals, corporations, businesses, foundations, service clubs, community organizations and other groups have committed over \$17.1 million to date. Their generous giving communicates a very powerful message that Thunder Bay and area needs a state-of-the-art facility equipped with modern technology and equipment to ensure quality healthcare services for our city and region.



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### Community Health Care Providers Commit to Recruitment

Despite physician shortages, Thunder Bay Regional Hospital has made significant gains in the recruitment and retention of specialists. The new state of the art hospital and the new Medical School are major attractions to physicians looking to relocate to our area. The new Surgical and Pediatric post-graduate programs offered through the McMaster University and the Northern Ontario Medical Program are also attracting new medical graduates to the North.

Recruitment success is attributed to a committed community partnership which include Thunder Bay Regional Hospital, St. Joseph's Care Group, Lakehead Psychiatric Hospital, City of Thunder Bay, and a multitude of other organizations. Strategies include follow-up with the candidate, within 24 –48 hours of initial contact, and pre-screening of candidates to ensure eligibility for licensure to practice medicine with the College of Physicians and Surgeons of Ontario and specialty certification with the Royal College of Physicians and Surgeons of Canada.

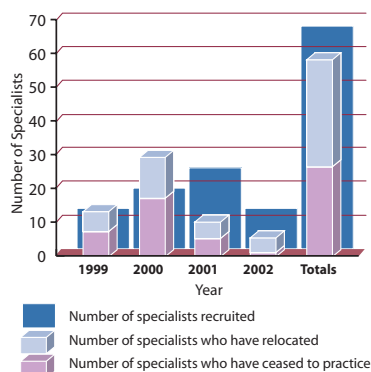
Lifestyle needs of the family are compiled. This may include real estate tours, tours of the city, local schools, assistance with spousal employment opportunities, day care, cultural, arts and recreational activities, and meeting with other families of the medical community. Stephanie Sherlock, Community Relations Co-ordinator with the City of Thunder Bay co-ordinates the community component.

Since 2001, Thunder Bay Regional Hospital has shown an increase in specialist retention.

Provincial changes have assisted in the recruitment of foreign-trained physicians: the new Assessment of International Medical Graduates Program, enhancements to the Physician Immigration Program, and issuance of restricted licenses to

qualified candidates by the Special Registration Committee of the College of Physicians and Surgeons of Ontario.

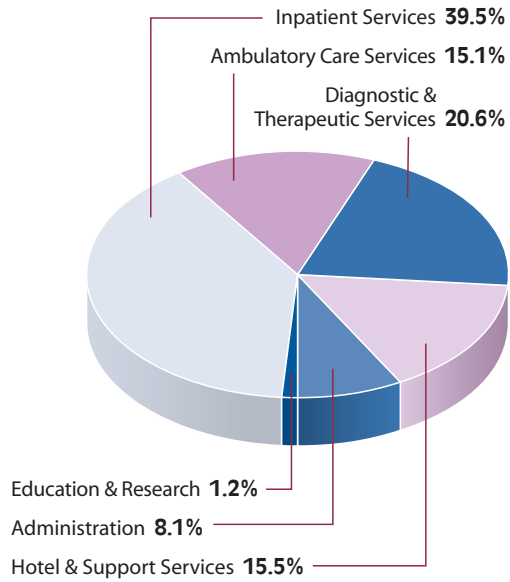
The Ministry of Health and Long Term Care offers many programs which have supported recruitment/retention in the north. These include the Community Sponsored Site Visit, the Incentive Grant Program, the Free Tuition Programs, the Specialist Retention Incentive and the Northern Physician Retention Initiative, which is administered by the Ontario Medical Association.



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## Financial Operations 2002-2003

### Hospital Expenses by Type



### Actual vs. Expected Cost per Weighted Case

